

Prison Rape Elimination Act (PREA) Audit Report Adult Prisons & Jails

Interim Final

Date of Report 21 October 2017

Auditor Information

Name: Marc L. Coudriet	Email: usmc5831@ec.rr.com
Company Name:	
Mailing Address: P.O. Box 1120	City, State, Zip: Midlothian, Texas 76065
Telephone: 910-750-9005	Date of Facility Visit: 16 – 18 October 2017

Agency Information

Name of Agency: New York State Department of Corrections and Community Supervision	Governing Authority or Parent Agency (If Applicable): State of New York		
Physical Address: 1220 Washington Avenue	City, State, Zip: Albany, NY, 12226-2050		
Mailing Address: 1220 Washington Avenue	City, State, Zip: Albany, NY, 12226-2050		
Telephone: (518) 457-8126	Is Agency accredited by any organization? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
The Agency Is: ACA	<input type="checkbox"/> Military	<input type="checkbox"/> Private for Profit	<input type="checkbox"/> Private not for Profit
<input type="checkbox"/> Municipal	<input type="checkbox"/> County	<input checked="" type="checkbox"/> State	<input type="checkbox"/> Federal

Agency mission: To improve public safety by providing a continuity of appropriate treatment services in safe and secure facilities where all inmates' needs are addressed and they are prepared for release, followed by supportive services for all parolees under community supervision to facilitate a successful completion of their sentence.

Agency Website with PREA Information: <http://www.doccs.ny.gov/PREA/PREAinfo.html>

Agency Chief Executive Officer

Name: Anthony J. Annucci	Title: Acting Commissioner
Email: commissioner@doccs.ny.gov	Telephone: (518) 457-8134

Agency-Wide PREA Coordinator

Name: Jason D. Effman	Title: Associate Commissioner
Email: jason.effman@doccs.ny.gov	Telephone: (518) 457-3955
PREA Coordinator Reports to: Acting Commissioner	Number of Compliance Managers who report to the PREA Coordinator 14

Facility Information

Name of Facility: Walkkill Correctional Facility			
Physical Address: 50 McKendrick Road Walkkill, New York 12589-0286			
Mailing Address (if different than above): PO Box G Walkkill, New York 12589-0286			
Telephone Number: (845) 895-2021			
The Facility Is:	<input type="checkbox"/> Military	<input type="checkbox"/> Private for profit	<input type="checkbox"/> Private not for profit
<input type="checkbox"/> Municipal	<input type="checkbox"/> County	<input checked="" type="checkbox"/> State	<input type="checkbox"/> Federal
Facility Type:	<input type="checkbox"/> Jail	<input checked="" type="checkbox"/> Prison	
Facility Mission: To improve public safety by providing a continuity of appropriate treatment services in safe and secure facilities where all inmates' needs are addressed and they are prepared for release, followed by supportive services for all parolees under community supervision to facilitate a successful completion of their sentence.			
Facility Website with PREA Information: http://www.doccs.ny.gov/PREA/PREAinfo.html			

Warden/Superintendent

Name: Catherine Jacobsen	Title: Superintendent
Email: Catherine.Jacobsen@DOCCS.NY.GOV	Telephone: (845) 895-2021 Ext: 2000

Facility PREA Compliance Manager

Name: John Neuwirth	Title: Captain
Email: John.Neuwirth@DOCCS.NY.GOV	Telephone: (845) 895-2021 Ext: 5550

Facility Health Service Administrator

Name: Maryanne Genovese	Title: Clinical Physician
Email: Maryanne.Genovese@DOCCS.NY.GOV	Telephone: (845) 895-2021 Ext: 6100

Facility Characteristics

Designated Facility Capacity: 608		Current Population of Facility: 550	
Number of inmates admitted to facility during the past 12 months			615
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for 30 days or more:			557
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for 72 hours or more:			609
Number of inmates on date of audit who were admitted to facility prior to August 20, 2012:			1
Age Range of Population:	Youthful Inmates Under 18: 0	Adults: 21-73	
Are youthful inmates housed separately from the adult population?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
		<input checked="" type="checkbox"/> NA	
Number of youthful inmates housed at this facility during the past 12 months:			0
Average length of stay or time under supervision:			329 days
Facility security level/inmate custody levels:			Medium
Number of staff currently employed by the facility who may have contact with inmates:			285
Number of staff hired by the facility during the past 12 months who may have contact with inmates:			48
Number of contracts in the past 12 months for services with contractors who may have contact with inmates:			0

Physical Plant

Number of Buildings: 131		Number of Single Cell Housing Units: 6	
Number of Multiple Occupancy Cell Housing Units:		6	
Number of Open Bay/Dorm Housing Units:		6	
Number of Segregation Cells (Administrative and Disciplinary):		2	

Description of any video or electronic monitoring technology (including any relevant information about where cameras are placed, where the control room is, retention of video, etc.):

The Walkkill Correctional Facility does not have video or electric monitoring technology.

Medical

Type of Medical Facility:	Medical Level 3 services. This unit does not have an infirmary. On-site medical care available 15.5 hours a day, seven days a week. On-call emergency medical service is available. Telemedicine is available on site.
Forensic sexual assault medical exams are conducted at:	Saint Luke's Hospital, Orange County Regional Medical Center and Albany Medical Center.

Other

Number of volunteers and individual contractors, who may have contact with inmates, currently authorized to enter the facility:	267
Number of investigators the agency currently employs to investigate allegations of sexual abuse:	25

Audit Findings

Audit Narrative

The PREA on-site audit of the Wallkill Correctional Facility, New York State Department of Corrections and Community Supervision (NYS DCCS), was conducted on October 16 - 18, 2017, by United States Department of Justice Certified PREA Auditor Marc L. Coudriet, Certified Auditor. Prior to the audit, the Wallkill Correctional Facility provided the auditor with appropriate policies, procedures and facility documentation related to the standards for review. No youthful inmates or female inmates are housed at the Wallkill Correctional Facility. The audit was coordinated through the American Correctional Association, Alexandria, Virginia. The audit began at 8:00 a.m., the following facility personnel were assigned to assist the audit team during the audit and tour process: Superintendent Catherine Jacobsen; Captain John Neuwirth, PREA Point Person/PREA Compliance Manager; Lawrence O'Neill, Deputy Superintendent for Programs; Roger Harris, Deputy Superintendent for Security; Deborah Fleury, Deputy Superintendent for Administration; and Yana Murray, Correctional Officer. Jason Effman, Associate Commissioner was present during this audit as the Agency liaison and to provide insight and guidance on Agency-wide policies as it pertaining to the PREA Program. The aforementioned staff accompanied the auditor as we toured the facility multiple times throughout this audit period. All areas of the Wallkill Correctional Facility were toured including, intake, inmate housing areas, the medical area, food service, education, law library, work areas and the recreation areas. The Wallkill Correctional Facility does not have a restrictive housing area or specialized staff for segregation. The Wallkill Correctional Facility has two cells reserved in the general housing area that is used for administrative separation from the general population, normally used for inmates awaiting transfer. The auditor informally interviewed (1) contractor; (22) staff and (9) inmates during the tours of the facility.

The PREA Resource Audit Instrument used for Adult Prisons and Jails was furnished by the National PREA Resource Center. To summarize, there are seven sections, A through G, comprised of the following: A) Pre-Audit Questionnaire; B) the Auditor Compliance Tool; C) Instructions for the PREA Audit Tour; D) the Interview Protocols; E) the Auditor's Summary Report; F) the Process Map; and G) the Checklist of Documentation.

Following the protocols of making contacts, and checking on the posting of notices (posting was initiated through the American Correctional Association (ACA) and the facility, Wallkill Correctional Facility) this auditor reviewed each item on the Pre-Audit Questionnaire and additional material given to the auditor prior to and the on-site visit.

Captain John Neuwirth, PREA Point Person provided the PREA standards files for preliminary review, these files were used to complete most of the information on the PREA Compliance Audit Instrument Checklist of Policies/Procedures and other documents in advance to identify additional information that might be required during the site visit. Additional information of the Wallkill Correctional Facility was provided in a binder upon arrival to Wallkill, NY.

This auditor stayed in Middletown, NY and was transported to the Wallkill Correctional Facility daily by Captain John Neuwirth, PREA Point Person. On Monday, once the tour was completed for that day, the auditor conducted formal interviews with (12) random staff; (2) Intermediate or higher level facility staff, (3) Medical/Mental Health staff (1) Administrative Human Resource staff; (1) Volunteer/Contractor who has contact with inmates; (1) Staff who performs screening for risk of victimization and abusiveness; (1) Staff on the incident review team; (1) designated staff member charged with monitoring retaliation; (3) First Responders- security and non-security; and (1) intake staff. The Wallkill Correctional Facility does not have Staff who supervises inmates in segregated housing; this facility does not have a segregation housing area.

On Tuesday, the auditor conducted formal interviews with (1) Volunteer; (2) Investigative staff; (1) Agency Contract Administrator's designee, (1) SANE/SAFE staff; (16) random inmates; (1) Disabled inmates; (1) Hard of hearing inmate; (3) LGB inmates; (4) Transgender inmates, (1) Limited English Proficient inmates; (1) Inmates with cognitive disorders, (0) inmate in restrictive housing, (0) inmates who report sexual abuse or harassment, (1) High risk of victimization inmate and (2) inmates who reported previous abuse or harassment during the intake screening. Formal interviews were conducted with staff from all shifts, during the audit a total of (54) staff and (39) inmates were formally or informally interviewed. Formal interviews were conducted utilizing the approved PREA questionnaires from the PREA Resource Center. The random sample of inmates was selected from the general housing population. The Wallkill Correctional Facility does not have a restrictive housing unit and none of the current inmate population has reported sexual abuse or harassment in this facility. The Wallkill Correctional Facility has eight investigative staff that covers this region; the auditor interviewed two investigators during this site visit.

On Wednesday, the auditor researched agency policy information, annotated all administrative concerns, addressed follow on questions and concluded the PREA on-site visit.

The vast majority of inmates interviewed stated the Wallkill Correctional Facility personnel keep the atmosphere in the facility in a positive and respectful environment; they have established professional and respectful interactions between the staff and inmate population.

Facility Characteristics

The Wallkill Correctional Facility is a medium security prison in New York State. The prison is located just north of the hamlet of Wallkill, in the Town of Shawangunk.

The prison opened in 1933, in the form of a collegiate campus with no surrounding wall or fence. The architect was Alfred Hopkins, an east-coast estate architect with a sideline in prisons such as Lewisburg Federal Penitentiary in Pennsylvania. Connected three-story English Gothic buildings of gray stone into one facility. Hopkins also designed Woodbourne Correctional Facility and Cocksackie Correctional Facility for the state. Wallkill was once only used to house "Good Behavior/White Collar" inmates.

Due to changing times, the inmate population has changed and first-time inmates now begin and end their sentences at Walkill Correctional Facility. The one-time "Prison without a Wall," is now in the process of erecting chain link fencing and razor wire was around the perimeter.

The facility has a long-running optical laboratory to grind lenses and produce eyeglasses. Inmates may also learn to serve retired racehorses through the Thoroughbred Retirement Foundation's Second Chances program. In addition, the Walkill facility has started a Puppies Behind Bars program to training bomb scent dogs and service dogs for persons with disabilities.

The Walkill Correctional Facility is designed to house 606 inmates; the Walkill Correctional Facility provides an assortment of vocational activities for the inmates, to include: Optics Certification and Training, Building Maintenance, Horticulture, Horse Care and Handling, Aggression Replacement Training (A.R.T.), Alcohol and Substance Abuse Treatment (A.S.A.T) and Transitional Services for reintegration into the community. The Walkill Correctional Facility has degree programs through New York University and the New York State Department of Education along with various educational classes consisting of but not limited to English as a Second Language, Pre-High School Equivalency, Adult Basic Education and High School Equivalency to assist the inmates in rehabilitation and re-entry into society. The inmate demographics are 23% Hispanic, 57% Black, 17% White, 3% Other or mixed races.

The Walkill Correctional Facility has five Chaplains assigned to the Walkill Correctional Facility that administer to the needs of the inmate population as well as to any staff needs. Volunteer ministry services are also conducted at the Walkill Correctional Facility. The Walkill Correctional Facility has 59 active volunteers that were approved by the New York State Department of Corrections and Community Supervision.

The Walkill Correctional Facility has an on-site Primary Care Unit that is staffed 15.5 hours daily with on-call emergency care that is available 24 hours a day. The Primary Care Unit has medical staff personnel and dentistry services assigned to it. The Mental Health staff are provided from the nearby Shawangunk Correctional Facility, which is located less than one mile away. The Primary Care Unit does not have an infirmary, if this service is needed the inmate is transported to the nearby Shawangunk Correctional Facility or to a local hospital. The Walkill Correctional Facility utilizes Orange County Regional Medical Center, Saint Luke's Hospital and Albany Medical Center for its primary SANE/SAFE forensic examinations.

The Walkill Correctional Facility is currently building its first outer perimeter fencing system surrounding the entire perimeter of the facility. There are no cameras throughout the facility; all areas are monitored by duty security staff personnel. The facility is illuminated at night by high mast pole lights and lights affixed to the outside of the building.

Summary of Audit Findings

Number of Standards Exceeded: 9

Standard 115.11: Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
Standard 115.16: Inmates with disabilities and inmates who are limited English proficient
Standard 115.17: Hiring and promotion decisions Standard 115.31: Employee training Standard 115.32: Volunteer and contractor training Standard 115.33: Inmate education Standard 115.34: Specialized training: Investigations Standard 115.35: Specialized training: Medical and mental health care Standard 115.64: Staff first responder duties

Number of Standards Met: 36

Standard 115.12: Contracting with other entities for the confinement of inmates Standard 115.13: Supervision and monitoring Standard 115.14: Youthful inmates Standard 115.15: Limits to cross-gender viewing and searches Standard 115.18: Upgrades to facilities and technologies Standard 115.21: Evidence protocol and forensic medical examinations Standard 115.22: Policies to ensure referrals of allegations for investigations Standard 115.41: Screening for risk of victimization and abusiveness Standard 115.42: Use of screening information Standard 115.43: Protective Custody Standard 115.51: Inmate reporting Standard 115.52: Exhaustion of administrative remedies Standard 115.53: Inmate access to outside confidential support services Standard 115.54: Third-party reporting Standard 115.61: Staff and agency reporting duties Standard 115.62: Agency protection duties Standard 115.63: Reporting to other confinement facilities Standard 115.65: Coordinated response Standard 115.66: Preservation of ability to protect inmates from contact with abusers Standard 115.67: Agency protection against retaliation Standard 115.68: Post-allegation protective custody Standard 115.71: Criminal and administrative agency investigations Standard 115.72: Evidentiary standard for administrative investigations Standard 115.73: Reporting to inmates Standard 115.76: Disciplinary sanctions for staff Standard 115.77: Corrective action for contractors and volunteers Standard 115.78: Disciplinary sanctions for inmates Standard 115.81: Medical and mental health screenings; history of sexual abuse Standard 115.82: Access to emergency medical and mental health services Standard 115.83: Ongoing medical and mental health care for sexual abuse victims and abusers Standard 115.86: Sexual abuse incident reviews Standard 115.87: Data collection Standard 115.88: Data review for corrective action Standard 115.89: Data storage, publication, and destruction Standard 115.401: Frequency and scope of audits Standard 115.403: Audit contents and findings

Number of Standards Not Met: 0

None

Summary of Corrective Action (if any)

None

PREVENTION PLANNING

Standard 115.11: Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

115.11 (a)

- Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment? Yes No
- Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment? Yes No

115.11 (b)

- Has the agency employed or designated an agency-wide PREA Coordinator? Yes No
- Is the PREA Coordinator position in the upper-level of the agency hierarchy? Yes No
- Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?
 Yes No

115.11 (c)

- If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.) Yes No NA
- Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)
 Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

DOCCS Directives 4027A and 4027B establish that coerced inmate on inmate sexual harassment, assault, and abuse and all staff on inmate sexual harassment, assault, and abuse are prohibited. An Agency Wide PREA Coordinator was appointed on March 4, 2012. This individual is an Associate Commissioner who is responsible for developing, implementing, and overseeing DOCCS efforts to comply with PREA standards throughout the DOCCS. At facility level, a Captain/PREA Point Person will be responsible for the staff training and implementation of the PREA compliance program.

Staff personnel at Walkill Correctional Facility are issued a pocket card which outlines the Zero Tolerance Policy and explains how to report sexual harassment, abuse, and assault on one side of the card. The other side of the card reviews the first responder duties.

Supervisory Staff are given a PREA Overview and Quick Response Guide which covers the history of PREA, definitions of sexual harassment and abuse, incident response, and other PREA issues. Random staff interviewed, knew clearly the Zero Tolerance Policy on sexual abuse and assault and the reporting process for PREA incidents. Zero Tolerance PREA information is also included in the Employee Manual. Inmates interviewed were aware of the DOCCS Zero Tolerance Policy on Sexual Abuse, Harassment, and Assault. This information is included in the issued Inmate handbook and they are shown the PREA Video upon arrival.

Based on observations during the tour, interviews with inmates and staff, and a review of documentation Walkill Correctional Facility has created a PREA compliant culture and exceeds this standard.

Standard 115.12: Contracting with other entities for the confinement of inmates

115.12 (a)

- If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.) Yes No NA

115.12 (b)

- Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates OR the response to 115.12(a)-1 is "NO".) Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

The Auditor has reviewed the contracts awarded by New York Department of Corrections and Community Supervision; all are appropriate and are in compliance with PREA standards. The Walkill Correctional Facility does not currently have any inmate being confined with other contracted entities.

Standard 115.13: Supervision and monitoring

115.13 (a)

- Does the agency ensure that each facility has developed a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse? Yes No
- Does the agency ensure that each facility has documented a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse? Yes No
- Does the agency ensure that each facility's staffing plan takes into consideration the generally accepted detention and correctional practices in calculating adequate staffing levels and determining the need for video monitoring? Yes No
- Does the agency ensure that each facility's staffing plan takes into consideration any judicial findings of inadequacy in calculating adequate staffing levels and determining the need for video monitoring? Yes No
- Does the agency ensure that each facility's staffing plan takes into consideration any findings of inadequacy from Federal investigative agencies in calculating adequate staffing levels and determining the need for video monitoring? Yes No
- Does the agency ensure that each facility's staffing plan takes into consideration any findings of inadequacy from internal or external oversight bodies in calculating adequate staffing levels and determining the need for video monitoring? Yes No
- Does the agency ensure that each facility's staffing plan takes into consideration all components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated) in calculating adequate staffing levels and determining the need for video monitoring? Yes No
- Does the agency ensure that each facility's staffing plan takes into consideration the composition of the inmate population in calculating adequate staffing levels and determining the need for video monitoring? Yes No
- Does the agency ensure that each facility's staffing plan takes into consideration the number and placement of supervisory staff in calculating adequate staffing levels and determining the need for video monitoring? Yes No
- Does the agency ensure that each facility's staffing plan takes into consideration the institution programs occurring on a particular shift in calculating adequate staffing levels and determining the need for video monitoring? Yes No NA
- Does the agency ensure that each facility's staffing plan takes into consideration any applicable State or local laws, regulations, or standards in calculating adequate staffing levels and determining the need for video monitoring? Yes No

- Does the agency ensure that each facility's staffing plan takes into consideration the prevalence of substantiated and unsubstantiated incidents of sexual abuse in calculating adequate staffing levels and determining the need for video monitoring? Yes No
- Does the agency ensure that each facility's staffing plan takes into consideration any other relevant factors in calculating adequate staffing levels and determining the need for video monitoring? Yes No

115.13 (b)

- In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)
 Yes No NA

115.13 (c)

- In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section? Yes No
- In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies? Yes No
- In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan? Yes No

115.13 (d)

- Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment? Yes No
- Is this policy and practice implemented for night shifts as well as day shifts? Yes No
- Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Wallkill Correctional Facility has established a staffing plan which provides for adequate levels of staffing and where applicable, they use direct monitoring to protect inmates against sexual abuse. Wallkill Correctional Facility provided their staffing plan (plot plan) to this auditor for review. This facility does not have video monitoring capabilities.

The interview with the Superintendent verified that the staffing plan was developed considering the generally acceptable correctional practices; any judicial findings, any findings of inadequacy from federal investigative agencies, any findings of inadequacy from internal or external oversight bodies, all components of the physical plant, the inmate population, the number and placement of supervisory staff, institutional programs and the shifts they occur on applicable state or local laws or regulations, the prevalence of substantiated and unsubstantiated incidents of sexual abuse and any other relevant information. The annual review of the staffing plan took place on June 24, 2017. Any deviations from the staffing plan were documented and the reasons for the deviation noted. Intermediate and higher level staff are making unannounced rounds as required. This was verified by review of log books, Weekly Administrative Activity Reports and the Daily Security Supervisors Report. Staff are prohibited from notifying other staff that Supervisory rounds are being conducted by Directive #4001, Facility Administrative Coverage & Supervisory Rounds and the Employee Manual.

Based on my review of DOCCS Directives, the Wallkill Correctional Facility staffing plan, and interviews with supervisory staff, Wallkill Correctional Facility meets this standard.

Standard 115.14: Youthful inmates

115.14 (a)

- Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates [inmates <18 years old].) Yes No NA

115.14 (b)

- In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates [inmates <18 years old].) Yes No NA
- In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates [inmates <18 years old].) Yes No NA

115.14 (c)

- Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates [inmates <18 years old].) Yes No NA
- Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates [inmates <18 years old].) Yes No NA

- Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates [inmates <18 years old].)
 Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

The New York Department of Corrections and Community Supervision have policies in place that meet this standard for its correctional facilities that house youthful inmates. The Walkill Correctional Facility does not house youthful inmates.

Standard 115.15: Limits to cross-gender viewing and searches

115.15 (a)

- Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?
 Yes No

115.15 (b)

- Does the facility always refrain from conducting cross-gender pat-down searches of female inmates in non-exigent circumstances? (N/A here for facilities with less than 50 inmates before August 20,2017.) Yes No NA
- Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A here for facilities with less than 50 inmates before August 20, 2017.) Yes No NA

115.15 (c)

- Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches? Yes No
- Does the facility document all cross-gender pat-down searches of female inmates?
 Yes No

115.15 (d)

- Does the facility implement a policy and practice that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their

breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks? Yes No

- Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit? Yes No

115.15 (e)

- Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status? Yes No
- If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner? Yes No

115.15 (f)

- Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs? Yes No
- Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

This auditor reviewed Directive #2230, Guidelines for Assignment of Male and Female Correctional Officers, Directive#4001, Facility Administrative Coverage & Supervisory Rounds, Directive #4910 Control and Search of Contraband, the Sexual Abuse Prevention and Response Lesson Plan, HSPM 1.37 Body Cavity Searches, and HSPM 1.19 Health Appraisals and training records that show Walkkill Correctional Facility has established processes to limit cross gender viewing. Walkkill Correctional Facility houses only male inmates. Cross gender strip searches are required to be documented on Report of Strip Search or Strip Frisk form #1140. Only staff of the same gender may be present during a strip search.

No cross-gender strip searches or cross gender visual body cavity searches have been performed at Walkkill Correctional Facility during this audit period.

Staff interviewed knew that they would not search or physically examine a transgender or intersex inmate solely to determine their genital status. Inmates interviewed indicated that they are not seen fully naked by female staff.

Based on my review of DOCCS Directives, interviews with staff and inmates, Walkill Correctional Facility meets this standard.

Standard 115.16: Inmates with disabilities and inmates who are limited English proficient

115.16 (a)

- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing? Yes No
- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are blind or have low vision? Yes No
- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have intellectual disabilities? Yes No
- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have psychiatric disabilities? Yes No
- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have speech disabilities? Yes No
- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other (if "other," please explain in overall determination notes)? Yes No
- Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing? Yes No
- Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary? Yes No

- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have intellectual disabilities? Yes No
- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills? Yes No
- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Are blind or have low vision? Yes No

115.16 (b)

- Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient? Yes No
- Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary? Yes No

115.16 (c)

- Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

This auditor reviewed Directive #2612, Inmates with Sensorial Disabilities, Directive #4490, Cultural and Language Access Service, Memorandum from the Associate Commissioner/Agency PREA Coordinator about the language availability of the PREA Video.

An inmate at Wallkill in need of mental health services beyond what can be offered at the facility will be transferred to Shawangunk Correctional Facility or another facility with the services that can fully meet the inmate's needs.

The facility takes all necessary steps to ensure inmates with limited English proficiency have an opportunity to participate in and benefit from the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment.

Bilingual Posters were observed throughout the facility in inmate housing units, library and law library, program areas, and medical areas. The PREA Video is available in eight languages, English, Spanish, Polish, Russian, Haitian-Creole, Italian, Chinese, and Korean. I have not seen the PREA video or PREA pamphlets available in this variety of languages in any of my audits outside of New York State. This is clearly above the “minimum” standard requirement. Sexual abuse prevention pamphlets are also available in multiple languages.

Facility staff, the Office of Cultural and Language Access Services staff interpreters, and a Language Line Service are available to the facility for interpretation services as needed.

Based on my review of DOCCS Directives, posters, and signs throughout the facility, the multiple languages that the PREA video pamphlets are available in and interviews with staff and inmates, Walkkill Correctional Facility exceeds this standard.

Standard 115.17: Hiring and promotion decisions

115.17 (a)

- Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)? Yes No
- Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse? Yes No
- Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the question immediately above? Yes No
- Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)? Yes No
- Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse? Yes No
- Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the question immediately above? Yes No

115.17 (b)

- Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates? Yes No

115.17 (c)

- Before hiring new employees, who may have contact with inmates, does the agency: perform a criminal background records check? Yes No
- Before hiring new employees, who may have contact with inmates, does the agency: consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse? Yes No

115.17 (d)

- Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates? Yes No

115.17 (e)

- Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees? Yes No

115.17 (f)

- Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions? Yes No
- Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees? Yes No
- Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct? Yes No

115.17 (g)

- Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination? Yes No

115.17 (h)

- Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.) Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

This auditor reviewed Directive #2012, Release of Employee Personnel and Payroll Information, Directive #2112, Report of Criminal Charges, Directive # 2216, Fingerprinting/Criminal History Inquiry-New Employees and Contractors, Memorandum from the Deputy Commissioner and Counsel, Division of Criminal Justice Services, Reference PREA Background Checks, and other provided memorandums and personnel forms.

Wallkill Correctional Facility does not hire or promote any individual who has engaged in sexual abuse in any prison, jail or lockup. Nor do they hire or promote any persons who have been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force or threats or intimidation. DOCCS and Wallkill Correctional Facility make its best effort to contact all prior institutional employers for information on any substantiated allegations of sexual abuse or harassment. Initial Background checks are conducted by the DOCCS Employee Investigations Unit.

The Employee Investigations Unit and Wallkill Correctional Facility are immediately notified of any staff and contractors if they have been arrested. This exceeds the requirement of background checks every five years as this notification is immediate. Additionally, the employee or contractor is required to report any subsequent arrest to their immediate supervisor before reporting for duty.

Interviews were conducted with the Human Resource Manager, the Superintendent, and the PREA Point Person and these verified that Wallkill Correctional Facility is following the provisions of this standard in hiring and promotion decisions.

Based on my review of DOCCS Directives, Memorandums and other provided forms, an interview with the Human Resource Manager and Superintendent, Wallkill Correctional Facility exceeds this standard.

Standard 115.18: Upgrades to facilities and technologies

115.18 (a)

- If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)
 - Yes No NA

115.18 (b)

- If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)
 Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

The Walkkill Correctional Facility is currently in the process of installing a new construction security perimeter fencing system and security tower. Inmate safety and security was considered as well as all aspects of the PREA program when designing this renovation. This renovation project is in accordance with all New York Department of Corrections and Community Supervision directives.

Currently the Walkkill Correctional Facility uses effectively placed mirrors, see through wall partitions/windows and security staffing to enhance inmate monitoring and safety. The Walkkill Correctional Facility meets this standard.

RESPONSIVE PLANNING

Standard 115.21: Evidence protocol and forensic medical examinations

115.21 (a)

- If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)
 Yes No NA

115.21 (b)

- Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.) Yes No NA
- Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National

Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents,” or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.) Yes No NA

115.21 (c)

- Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate? Yes No
- Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible? Yes No
- If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)? Yes No
- Has the agency documented its efforts to provide SAFEs or SANEs? Yes No

115.21 (d)

- Does the agency attempt to make available to the victim a victim advocate from a rape crisis center? Yes No
- If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? Yes No
- Has the agency documented its efforts to secure services from rape crisis centers? Yes No

115.21 (e)

- As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews? Yes No
- As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals? Yes No

115.21 (f)

- If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating entity follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.) Yes No NA

115.21 (g)

- Auditor is not required to audit this provision.

115.21 (h)

- If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? [N/A if agency attempts to make a victim advocate from a rape crisis center available to victims per 115.21(d) above.] Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

This auditor reviewed Directive #4027B Sexual Abuse Reporting and Investigations which outlined a very detailed and thorough investigative process coordinated by the Office of Special Investigations which is responsible for investigating all allegations of Sexual Abuse or Sexual Harassment. The Sex Crimes Division conducts these investigations. DOCCS and Walkkill Correctional Facility use the New York Department of Health Protocol for the Acute Care of the Adult Patient Reporting Sexual Abuse for evidence protocols and forensic medical examinations. Also reviewed was HSPM 1.60, Sexual Assaults, which provides for the use of emergency off site healthcare, provided at no cost to the inmates.

This healthcare includes forensic examinations by SAFE/SANE nurses where appropriate. Additionally, a victim advocate will be provided, if requested, to provide emotional support. The DOCCS and the New York State Police Bureau of Criminal Investigation have a working relationship to work cooperatively in all sexual assault/abuse investigations. This auditor interviewed two investigators from the Office of the Special Investigations who normally respond to incidents of sexual abuse/sexual assault. Both were extremely knowledgeable of the sexual assault investigative process, use of the Sexual Abuse Checklist, and evidence protocols.

Based on my review of DOCCS Directives, completed case investigations, and interviews with OSI Investigator, Walkkill Correctional Facility meets this standard.

Standard 115.22: Policies to ensure referrals of allegations for investigations

115.22 (a)

- Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse? Yes No

- Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment? Yes No

115.22 (b)

- Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior? Yes No
- Has the agency published such policy on its website or, if it does not have one, made the policy available through other means? Yes No
- Does the agency document all such referrals? Yes No

115.22 (c)

- If a separate entity is responsible for conducting criminal investigations, does such publication describe the responsibilities of both the agency and the investigating entity? [N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).] Yes No NA

115.22 (d)

- Auditor is not required to audit this provision.

115.22 (e)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

This auditor reviewed Directives #0700, Office of Special Investigations which requires that all complaints and information received relative to possible investigations be reviewed, processed, and documented; Directive #4027B, Sexual Abuse Reporting & Investigation Inmate on Inmate and Directive #4028B, Sexual Abuse Reporting & Investigation Staff on Inmate which require the Deputy Superintendent for Security to compile a Monthly Sexual Abuse/Threat Incident Summary that shall be a chronological listing of each sexual abuse or threat incident during the month. This is submitted thru the Superintendent to the Deputy Commissioner for Correctional Facilities.

Based on my review of DOCCS Directives 0700, 4027B and 4028B, the Monthly Sexual Abuse/Threat Incident Summary, and interviews with OSI Investigators, Walkill Correctional Facility meets this standard.

TRAINING AND EDUCATION

Standard 115.31: Employee training

115.31 (a)

- Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment? Yes No
- Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures? Yes No
- Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment Yes No
- Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment? Yes No
- Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement? Yes No
- Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims? Yes No
- Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse? Yes No
- Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates? Yes No
- Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates? Yes No
- Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities? Yes No

115.31 (b)

- Is such training tailored to the gender of the inmates at the employee's facility? Yes No

- Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa? Yes No

115.31 (c)

- Have all current employees who may have contact with inmates received such training? Yes No
- Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures? Yes No
- In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies? Yes No

115.31 (d)

- Does the agency document, through employee signature or electronic verification, that employees understand the training they have received? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

This auditor reviewed Training Manual Subject: 0.100, Frequency Training Chart and Training Bulletin; Training Bulletin #7, PREA Sexual Abuse Prevention and Response; Training Manual Subject: 6.500, Facility Familiarization; Training Manual Subject: 6.600, Initial Employee Training/40 Hours Orientation; Memorandums on the Sexual Abuse Prevention and Response Training from the Deputy Commissioner and Associate Commissioner; and the Sexual Abuse Prevention and Response Training Lesson Plan. New York DOCCS has been training their staff on sexual abuse prevention since 1996 when sexual relationships with inmates were criminalized. The number of hours required training for staff increased in 2015 to three hours initially, with an hour refresher every two years.

The aforementioned lesson plan is very detailed and addresses all the PREA requirements: the zero tolerance policy; the agency policy and procedures for prevention; reporting and response to a sexual assault or sexual harassment incident, and the dynamics of sexual abuse and harassment in a confinement setting; common reactions of sexual abuse and sexual harassment victims; how to detect and respond to signs of threatened and actual sexual abuse; how to avoid inappropriate relationships with inmates; how to communicate effectively and professionally with inmates; and how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.

Additional PREA training is conducted throughout the year at line up and staff meeting training. Both formal and informal interviews with staff indicate that they are well trained in Sexual Assault Prevention and Response and their duties as first responders.

Staff personnel at Walkkill Correctional Facility are issued a pocket card which outlines the Zero Tolerance Policy and explains how to report sexual harassment, abuse and assault on one side of the card. The other side of the card reviews the first responder duties.

Supervisory Staff are given a PREA Overview and Quick Response Guide which covers the history of PREA, definitions of sexual harassment and abuse, incident response, and other PREA issues. Randomly interviewed knew clearly the Zero Tolerance Policy on sexual abuse and assault and the reporting process for PREA incidents.

Based on my review of the Training Manual Subjects listed above, a review of the Sexual Abuse Prevention and Response Lesson Plan and interviews with both line staff and supervisory staff, Walkkill Correctional Facility exceeds this standard.

Standard 115.32: Volunteer and contractor training

115.32 (a)

- Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures? Yes No

115.32 (b)

- Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)? Yes No

115.32 (c)

- Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

This auditor reviewed Directive #4027A Sexual Abuse Prevention and Intervention Inmate on inmate, Directive #4028A Sexual Abuse Prevention and Intervention Staff on Inmate and Directive #4750 Volunteer Services Program which address the requirement for volunteer and contractor orientation, training and acknowledgement that they understand the training.

All contractors and volunteers who have contact with inmates at the Wallkill Correctional Facility receive PREA training prior to assuming their responsibilities.

This orientation training includes the agency's policy and procedures regarding sexual abuse and sexual harassment prevention, detention, reporting, and response including zero tolerance. Upon completion, they acknowledge this training through a written quiz and signed acknowledgement page. Wallkill Correctional Facility Volunteer and Contractor training records were reviewed and they indicated that the training was presented and that it was understood. Wallkill Correctional Facility had contractors currently working at this facility for repairs. During this site audit the contractor interviewed confirmed they all received the necessary PREA training, prior to conducting any services or coming in contact with inmates.

Based on my review of Directives #4027A and #4750, a review volunteer and contractor training records and interviewing the contractors on site, Wallkill Correctional Facility meets this standard.

Standard 115.33: Inmate education

115.33 (a)

- During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment? Yes No
- During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment? Yes No

115.33 (b)

- Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment? Yes No
- Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents? Yes No
- Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents? Yes No

115.33 (c)

- Have all inmates received such education? Yes No
- Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?
 Yes No

115.33 (d)

- Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient? Yes No
- Does the agency provide inmate education in formats accessible to all inmates including those who are deaf? Yes No
- Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired? Yes No
- Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled? Yes No
- Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills? Yes No

115.33 (e)

- Does the agency maintain documentation of inmate participation in these education sessions? Yes No

115.33 (f)

- In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

This auditor reviewed Directives #4021, Inmate Reception/Classification; #4027A. Sexual Abuse Prevention & Intervention, Various Memorandums from the Deputy Commissioner and the Associate Commissioner about Inmate Orientation Film Implementation, New and Updated PREA Materials, Reasonable Accommodations Information; the Inmate Orientation Outline, and completed PREA Risk Screening Forms.

When inmates arrive at Wallkill Correctional Facility they receive an Inmate Orientation Manual and a pamphlet "The Prevention of Sexual Abuse in Prison." These materials cover the agency's zero tolerance policy and how to report incidents. These pamphlets are primarily in English and Spanish but they are also available in Polish, Russian, Haitian-Creole, Italian, Chinese and Korean.

Audio tapes, cassettes tapes, and CD's are available to the visually impaired. Facility staff, the Office of Cultural and Language Access Services staff interpreters, and a Language Line Service are available to the facility for interpretation services as needed.

Within five days following arrival at Walkill Correctional Facility, inmates participate in an orientation program that includes a comprehensive PREA education session consisting of a video and staff-led discussion. The PREA Video is available in eight languages, English, Spanish, Polish Russian, Haitian-Creole, Italian, Chinese and Korean. I have only seen this variety of languages during audits at NYS DOCCS facilities. This is clearly above the "minimum" standard requirement. Sexual abuse prevention pamphlets are also available in multiple languages.

Inmates assigned to Walkill Correctional Facility prior to the implementation of the PREA Standards, were required to see the PREA Video no later than July 26, 2015, in accordance with DOCCS directions. Formal and informal inmate interviews conducted throughout the course of the on-site audit indicated that they were knowledgeable of the Zero Tolerance Policy and how to report an incident if it occurred.

Based on my review of the above Directives, Memorandums and Intake Screening Forms, observations and interviews with inmates, Walkill Correctional Facility exceeds this standard.

Standard 115.34: Specialized training: Investigations

115.34 (a)

- In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators have received training in conducting such investigations in confinement settings? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).] Yes No NA

115.34 (b)

- Does this specialized training include techniques for interviewing sexual abuse victims? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).] Yes No NA
- Does this specialized training include proper use of Miranda and Garrity warnings? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).] Yes No NA
- Does this specialized training include sexual abuse evidence collection in confinement settings? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).] Yes No NA
- Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).] Yes No NA

115.34 (c)

- Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).]
 Yes No NA

115.34 (d)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

This auditor reviewed OSI Policy and Procedure, Training Requirements for Sex Crimes investigators; Power Point Presentation Excerpt; PREA Specialized Training; Investigations; and Power Point Presentation Excerpt: Sexual Abuse Investigations and PREA. OSI Sex Crimes Division Investigators are required to complete the following training curriculum Specialized Training: Investigations, OSI Overview Training, NIC PREA Investigating Sexual Abuse in a Confinement Setting, and Evidence Collection Training, and Sexual Abuse Investigations and PREA. Additionally, these investigators complete all annual training required of all DOCCS staff.

Both investigators interviewed during the on-site audit had completed multiple training courses including the NIC PREA Investigating Sexual Abuse in a Confinement Setting. There are currently eight OSI Sex Crimes Investigators in the region that covers the Walkkill Correctional facility. These investigators are assigned to a region and not assigned to a specific facility but respond as needed to all correctional facilities within their region.

Based on my review of the above policies, and power point presentation excerpts, and the interview with OSI Investigators, Walkkill Correctional Facility exceeds this standard.

Standard 115.35: Specialized training: Medical and mental health care

115.35 (a)

- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? Yes No
- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? Yes No

- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? Yes No
- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or suspicions of sexual abuse and sexual harassment? Yes No

115.35 (b)

- If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams.) Yes No NA

115.35 (c)

- Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? Yes No

115.35 (d)

- Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? Yes No
- Do medical and mental health care practitioners contracted by and volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

This auditor has reviewed the Office of Mental Health Memorandum of Understanding with DOCCS; Directive 4750, Volunteer Services Program; Power Point Presentation: PREA: Medical and Mental Health Care HSPM 1.60 and PREA Standards; Training Manual Subject: 6.600 Initial Employee Training/40 Hour Orientation; Walkkill Correctional Facility Medical and Mental Health Staff Training Documentation. All full and part time medical and mental health staff are required to complete all training outlined in this standard.

The training required includes how to detect and assess signs of sexual abuse and sexual harassment, how to preserve physical evidence of sexual abuse, how to respond effectively and professionally to victims of sexual abuse and sexual harassment, and how and who to report allegations or suspicions of sexual abuse and sexual harassment.

Office of Mental Health staff who are assigned to respond to requests for services at Wallkill Correctional Facility are covered by the MOU with the DOCCS in regards to receiving the required PREA training. Training was verified by review of sign in sheet.

Interviews with medical and mental health staff indicate that they are knowledgeable of their duties and responsibilities under PREA and know how to properly respond to or report an allegation of sexual abuse or assault. No forensic medical exams are conducted at Wallkill Correctional Facility but can provide emergency medical healthcare if needed. Forensic examinations by SANE/SAFE staff are provided at the outside hospital, Orange County Regional Medical Center, Saint Luke's Hospital and Albany Medical Center. These services are at no cost to the inmate.

Based on my review of the Memorandum of Understanding, Training Manual, Power Point Presentation, sign in sheets completed by medical and mental health staff and staff interviews, Wallkill Correctional Facility meets this standard.

SCREENING FOR RISK OF SEXUAL VICTIMIZATION AND ABUSIVENESS

Standard 115.41: Screening for risk of victimization and abusiveness

115.41 (a)

- Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates? Yes No
- Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates? Yes No

115.41 (b)

- Do intake screenings ordinarily take place within 72 hours of arrival at the facility?
 Yes No

115.41 (c)

- Are all PREA screening assessments conducted using an objective screening instrument?
 Yes No

115.41 (d)

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate? Yes No

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes? Yes No

115.41 (e)

- In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior acts of sexual abuse? Yes No
- In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior convictions for violent offenses? Yes No
- In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: history of prior institutional violence or sexual abuse? Yes No

115.41 (f)

- Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening? Yes No

115.41 (g)

- Does the facility reassess an inmate's risk level when warranted due to a: Referral?
 Yes No
- Does the facility reassess an inmate's risk level when warranted due to a: Request?
 Yes No
- Does the facility reassess an inmate's risk level when warranted due to a: Incident of sexual abuse? Yes No
- Does the facility reassess an inmate's risk level when warranted due to a: Receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?
 Yes No

115.41 (h)

- Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section? Yes No

115.41 (i)

- Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

This auditor has reviewed PREA Risk Screening Form, FM 115.41M; Memorandum from Deputy Commissioners; Memorandum from Associate Commissioner and Assistant Commissioner, New/Revised Other Security Characteristics regarding Sexual Orientation and Gender Identity. Initial assessment is conducted of all newly confined inmates at the reception center. This initial assessment is available to staff at receiving institutions on a need to know basis and will alert them to any PREA issues involved with transferring inmates.

Wallkill Correctional Facility intake staff complete the FM 115.41M on all arriving inmates within the required 72 hours.

The screening form include questions regarding mental, physical, and developmental disabilities; age of the inmate; physical build of the inmate; whether the inmate has been previously incarcerated; whether the inmate's criminal history is exclusively nonviolent; whether the inmate has prior convictions for a sex offense against an adult or child; whether or not the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming; whether or not the inmate has previously experienced sexual victimization; and the inmate's own perception of vulnerability. The Form Other Security Characteristics regarding Sexual Orientation and Gender Identity is used depending on the inmates' answers to specific questions.

The Inmate Rehabilitation Coordinators will reassess the inmate's risks of victimization and abusiveness within 5 working days. Reassessment of inmate's risk level occur when warranted by a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization. Quarterly reviews are conducted with the inmate to determine if there are any changes as part of the caseload reviews with the guidance staff. As part of the quarterly caseload reviews, the staff member will review the inmate disciplinary history and any notes in the inmate's files prior to the meeting. During the inmate, initial medical examination at the facility, additional questions are asked regarding sexual abuse history.

Based on my review of PREA Risk Screening Form, FM 115.41M; Memorandum from Deputy Commissioners, New Procedure Necessitated by Directive #4027A; Memorandum from Associate Commissioner and Assistant Commissioner, New/Revised Other Security Characteristics regarding Sexual Orientation and Gender Identity, interviews with Walkill Correctional Facility intake and medical and mental health staff from Shawangunk Correctional Facility; Walkill Correctional Facility meets this standard.

Standard 115.42: Use of screening information

115.42 (a)

- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments? Yes No
- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments? Yes No
- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments? Yes No
- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments? Yes No

- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments? Yes No

115.42 (b)

- Does the agency make individualized determinations about how to ensure the safety of each inmate? Yes No

115.42 (c)

- When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)? Yes No
- When making housing or other program assignments for transgender or intersex inmates, does the agency consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems? Yes No

115.42 (d)

- Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate? Yes No

115.42 (e)

- Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments? Yes No

115.42 (f)

- Are transgender and intersex inmates given the opportunity to shower separately from other inmates? Yes No

115.42 (g)

- Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? Yes No
- Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay,

bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? Yes No

- Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

This auditor has reviewed Directive #4009, Minimum Provisions for Health and Morale; Directive #4027A, Sexual Abuse Prevention and Intervention; Directive #4001, Guidance and Counseling Services, Memorandums from Deputy Commissioners, New Procedures Necessitated by Directive #4027A; and PREA Risk Screening Forms. Wallkill Correctional Facility does not house gay, bisexual, transgender or intersex inmates in dedicated units.

Housing is determined on a case by case basis with the inmate's own view with respect to their own safety given serious consideration. Placement and programming assignments for each transgender, or intersex inmate is reassessed at least twice each year per Directive #4401. In accordance with Directive #4009, transgender and intersex inmates may request to shower separately from other inmates. Information collected from the PREA Risk Screening form, intake assessments are available on a "need to know" only basis to staff.

Based on my review of Directive #4009, Minimum Provisions for Health and Morale; Directive #4027A, Sexual Abuse Prevention and Intervention and Directive #4001, Guidance and Counseling Services, observations and interviews with inmates and medical, mental health and security staff, Wallkill Correctional Facility meets this standard.

Standard 115.43: Protective Custody

115.43 (a)

- Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers? Yes No

- If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?
 Yes No

115.43 (b)

- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible? Yes No
- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible? Yes No
- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible? Yes No
- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible? Yes No
- If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The opportunities that have been limited? Yes No
- If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The duration of the limitation? Yes No
- If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The reasons for such limitations? Yes No

115.43 (c)

- Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?
 Yes No
- Does such an assignment not ordinarily exceed a period of 30 days? Yes No

115.43 (d)

- If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety? Yes No
- If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged? Yes No

115.43 (e)

- In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

This auditor has reviewed Directive #4948, Protective Custody Status which clearly spells out the process for involuntary placement of inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers. Inmates placed in Segregation must be reviewed every 30 days. No inmates have been placed in involuntary segregated housing due to being deemed at high risk for sexual victimization in the past twelve months at Wallkill Correctional Facility. Wallkill Correctional Facility does not have a dedicated Special Housing Unit staff or segregation housing unit. The facility has two general population cells reserved in case protective custody is needed. The supervisors and staff are aware of their duties and responsibilities under this standard if an inmate needs to be temporarily housed in the reserved cells.

Based on my review of Directive #4948, Protective Custody Status and interviews with staff, Wallkill Correctional Facility meets this standard.

REPORTING

Standard 115.51: Inmate reporting

115.51 (a)

- Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment? Yes No
- Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment? Yes No
- Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents? Yes No

115.51 (b)

- Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency? Yes No
- Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials? Yes No

- Does that private entity or office allow the inmate to remain anonymous upon request?
 Yes No
- Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? Yes No

115.51 (c)

- Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties? Yes No
- Does staff promptly document any verbal reports of sexual abuse and sexual harassment?
 Yes No

115.51 (d)

- Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

This auditor has reviewed the Employee Manual, Section-2.20; Directive #4027A, Sexual Abuse Prevention and Intervention, Inmate on Inmate; Directive #4028A, Sexual Abuse Prevention and Intervention, Staff on Inmate; the Sexual Abuse Prevention and Response Lesson Plan; The Prevention of Sexual Abuse in Prison, What Inmates Need PREA Audit Report to Know Pamphlet and the letter from the Chairman of the State Commission of Corrections to the DOCCS Acting Commissioner. Multiple procedures, internally and externally, have been established to allow inmates to report sexual abuse and assault. Inmates receive a copy of The Prevention of Sexual Abuse in Prison, What Inmates Need to Know Pamphlet, at intake which tells the inmate they can contact any staff member or the DOCCS Office of Special Investigation to report sexual abuse or assault internally.

Additionally, there are posters throughout the facility which also tell the inmate the reporting options. To report to an external organization, inmates can contact the New York State Commission of Corrections. Reports to the New York State Commission of Correction may be made confidentially and remain anonymous upon request. The New York State Commission of Correction immediately forwards any reports of sexual abuse and sexual harassment to the OSI for investigation.

Inmates may also report allegations to third parties who in turn would contact the DOCCS concerning the allegations. All allegations, including anonymous allegations, are investigated.

Even though Wallkill Correctional Facility does not house inmates solely for civil immigration offenses, consular official contact information is available in the library and the legal library. Inmates interviewed indicated they were familiar with the various ways to report sexual abuse or assault information.

The PREA pocket card given to all staff explains how staff can privately report sexual abuse or assault allegations to OSI Sex Crimes Division. Staff personnel interviewed was familiar with the methods to report sexual abuse or assault. They knew that inmates could report sexual assault or abuse allegations verbally or in writing.

Based on my review of the Employee Manual, Directive #4027A, Sexual Abuse Prevention and Intervention, Inmate on Inmate; Directive #4028A, Sexual Abuse Prevention and Intervention, Staff on Inmate; the Sexual Abuse Prevention and Response Lesson Plan; The Prevention of Sexual Abuse in Prison Pamphlet, observations and interviews with staff and inmates, Wallkill Correctional Facility meets this standard.

Standard 115.52: Exhaustion of administrative remedies

115.52 (a)

- Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse. Yes No NA

115.52 (b)

- Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.) Yes No NA
- Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.) Yes No NA

115.52 (c)

- Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.) Yes No NA
- Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.) Yes No NA

115.52 (d)

- Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.) Yes No NA
- If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)
 Yes No NA
- At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.) Yes No NA

115.52 (e)

- Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)
 Yes No NA
- Are those third parties also permitted to file such requests on behalf of inmates? (If a third-party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.) Yes No NA
- If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)
 Yes No NA

115.52 (f)

- Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.) Yes No NA
- After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)
 Yes No NA
- After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.) Yes No NA

- After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)
 Yes No NA
- Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.) Yes No NA
- Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.) Yes No NA
- Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.) Yes No NA

115.52 (g)

- If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.) Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

NYSDOCCS does not use their grievance process to address incidents of sexual abuse or harassment. If a sexual abuse or sexual harassment allegation is received through a grievance, it is removed from the grievance process and immediately submitted to the PREA Point Person and investigate as a PREA occurrence. The agency directive #4040 Inmate Grievance Program stipulates that the NYSDOCCS has a zero tolerance for sexual abuse and sexual harassment.

"Consistent with this policy and the Prison Rape Elimination Act (PREA)... An inmate is not required to file a grievance concerning an alleged incident of sexual abuse or sexual harassment to satisfy the Prison Litigation Reform Act... " (PLRA). To further outline grievance procedures, timeframes, third-party assistance, and discipline concerning this standard and its subsections a-g, the NYSDOCCS not only addresses such in the above directive, but outlines in a summary memorandum concerning sexual abuse and sexual harassment complaints the following: "any inmate grievance filed regarding a complaint of sexual abuse or sexual harassment shall immediately be reported by the inmate grievance program supervisor to the Watch Commander for further handling in accordance with departmental policies. The complaint shall be deemed exhausted upon filing for PLRA purposes. If the grievance does not set forth any additional matters that require a response, the grievance shall be closed." A notice is then sent to the inmate filing the complaint, stating that an investigation will be started in accordance with the department's sexual abuse and sexual harassment reporting and investigation policies. Therefore, the Agency is exempt from this standard.

Standard 115.53: Inmate access to outside confidential support services

115.53 (a)

- Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations? Yes No
- Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? Yes No
- Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible? Yes No

115.53 (b)

- Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws? Yes No

115.53 (c)

- Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse? Yes No
- Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

This auditor has reviewed Directive #4404, Inmate Legal Visits; Directive #4421, Privileged Correspondence; Directive #4423, Inmate Telephone Calls; the Memorandum from the Associate Commissioner: Just Detention International Resource Guide and the Walkkill Correctional Facility Inmate Orientation Manual. The Inmate Orientation Manual contains detailed information concerning how inmates can access outside confidential support services.

The New York Resource Guide prepared by Just Detention International is available in the library, the law library and at Transitional Services. This guide contains a detailed list of programs that can provide services to address needs related to sexual abuse. Inmates can add the phone number to Rape Crisis Center to their authorized phone list by submitting a request to their assigned counselor. Inmates have been informed by memorandum previously that conversations with representatives of Rape Crisis Programs are confidential and information can only be shared with the department if the inmate authorizes it. Inmates can correspond with Rape Crisis Center as privilege correspondence or “legal” mail and victim advocates can visit and have the same privileges as an attorney visit. Staff can assist with “legal” calls with rape crisis program providers and these calls will not be monitored as they are considered confidential.

Based on my review of Directive #4404, Inmate Legal Visits; Directive #4421, Privileged Correspondence; Directive #4423, Inmate Telephone Calls; the Memorandum from the Associate Commissioner: Just Detention International Resource Guide; the Wallkill Correctional Facility Inmate Orientation Manual, observations and interviews with inmates and staff, Wallkill Correctional Facility meets this standard.

Standard 115.54: Third-party reporting

115.54 (a)

- Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment? Yes No
- Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

This auditor reviewed the New York DOCCS website and verified that it contains information under the PREA link on third party reporting of alleged PREA incidents. The information on the web site encourages third parties to report allegations to the facility Superintendent, Watch Commander, PREA Coordinator or the OSI. This information is included in the Prevention of Sexual Abuse in Prison Pamphlet which is provided to each inmate. This information is posted throughout the facility and available in the law library and library.

OFFICIAL RESPONSE FOLLOWING AN INMATE REPORT

Standard 115.61: Staff and agency reporting duties

115.61 (a)

- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency? Yes No
- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment? Yes No
- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation? Yes No

115.61 (b)

- Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions? Yes No

115.61 (c)

- Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section? Yes No
- Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services? Yes No

115.61 (d)

- If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws? Yes No

115.61 (e)

- Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

This auditor has reviewed the Employee Manual Section -2.20; Directive #0700, Office of Special Investigations; Directive #4027A, Sexual Abuse Prevention and Intervention, Inmate on Inmate; Directive #4028A, Sexual Abuse Prevention and Intervention, Staff on Inmate; the Memorandum from Associate Commissioner, Sexual Abuse Response and Containment Checklist; and the Office of Mental Health (OMH) Memorandum of Understanding. The Employee Manual and the above Directives require that all staff must report immediately any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment; retaliation against inmates or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. It also states that staff are not to reveal any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions. Staff are prohibited from discussing this information with any staff that do not have an official "need to know".

All allegations of sexual abuse, including third party reporting are referred to OSI Sex Crimes Division for investigation. The Sexual Abuse Incident Review Checklist provides for a systematic method to ensure all steps in the initial investigation and notification process are completed and documented. The PREA pocket cards given to staff which outlines the steps taken as the first responder, how to report sexual abuse allegations and how to privately report those allegations to OSI if needed.

The OMH Memorandum of Understanding with DOCCS outlines the staff reporting responsibilities regarding allegations of sexual abuse. Interviews with random and specialized staff indicated that they were familiar with their reporting responsibilities and how to report any allegations or suspicions of sexual abuse, assault, or harassment immediately.

Based on my review of the Employee Manual Section -2.20; Directive #0700, Office of Special Investigations; Directive #4027A, Sexual Abuse Prevention and Intervention, Inmate on Inmate; Directive #4028A, Sexual Abuse Prevention and Intervention, Staff on Inmate; the Memorandum from Associate Commissioner, Sexual Abuse Response and Containment Checklist; and the Office of Mental Health (OMH) Memorandum of Understanding, interviews with random and specialized staff, Walkkill Correctional Facility meets this standard.

Standard 115.62: Agency protection duties

115.62 (a)

- When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

This auditor reviewed Directive #4040, Inmate Grievance Program; Directive #4948, Protective Custody Status and Directive #4027A Sexual Abuse Prevention and Intervention Inmate and Inmate and #4028A Sexual Abuse Prevention and Intervention Staff and Inmate; and Walkkill Correctional Facility specific documentation.

The PREA Pocket card given to all staff clearly states the first duty is to separate and isolate potential victims, abusers or witnesses. Additionally, Directives #4027A and #4028A require that immediate action be taken by staff to protect any inmate subject to sexual abuse. All staff interviewed knew the first step was to immediately isolate and protect potential victims of sexual abuse. In the past twelve months, there were no reported instances where inmates had told staff that they were at substantial risk of imminent sexual abuse.

Based on my review of Directive #4040, Inmate Grievance Program; Directive #4948, Protective Custody Status and Directive #4027A Sexual Abuse Prevention and Intervention Inmate and Inmate, and #4028A Sexual Abuse Prevention and Intervention Staff and Inmate, and Walkkill Correctional Facility specific documentation and the fact that there were no reported instances where inmates claimed to be at imminent risk, Walkkill Correctional Facility meets this standard.

Standard 115.63: Reporting to other confinement facilities

115.63 (a)

- Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred? Yes No

115.63 (b)

- Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation? Yes No

115.63 (c)

- Does the agency document that it has provided such notification? Yes No

115.63 (d)

- Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

This auditor reviewed the Memorandum for the Associate Commissioner, Reporting to Other Confinement Facilities and Form 115.63 Report of Sexual Abuse. DOCCS has clearly established procedures to follow in the event of receiving an allegation from another facility or how to report to another facility that an allegation has been made that an inmate was sexually assaulted or abused.

Notification is made electronically by the Superintendent of one institution to the Superintendent of the other institution. OSI Sex Crimes Division must also be notified so that an investigation can be initiated. Allegations will also be recorded in the Sexual Abuse/Threat Incident Log. Specialized staff and the Superintendent were knowledgeable of their roles if an allegation is received.

During this audit period, there were no allegations received from another facility that an inmate had been sexually abused/assaulted while at Wallkill Correctional Facility. There was one sexual harassment allegation in the past 12 months; this case file was completed during the on-site visit. The finding was unsubstantiated; the inmate had transferred to another facility prior to the completion of the investigation. The receiving facility was provided all documentation of the allegation prior to the inmate's transfer and has since received the final case summary and the closure letter to be given to the inmate. A review of the documentation indicates that proper steps were taken throughout the processing of this allegation.

Based on my review of the Memorandum for the Associate Commissioner, Reporting to Other Confinement Facilities; Form 115.63 Report of Sexual Abuse, interviews with the Superintendent and Specialized staff and a review of the provided documentations, Wallkill Correctional Facility meets this standard.

Standard 115.64: Staff first responder duties

115.64 (a)

- Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?
 Yes No
- Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence? Yes No
- Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence? Yes No
- Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence? Yes No

115.64 (b)

- If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

This auditor has reviewed Directive #4027B, Sexual Abuse Reporting and Investigations, Inmate on Inmate; Directive # 4028B, Sexual Abuse Reporting and Investigation, Staff on Inmate; Memorandum from the Associate Commissioner, PREA Coordinated Response Plan, Sexual Abuse Response and Containment Checklist;

and Memorandum from Deputy Commissioner/Chief Medical Officer and Associate Commissioner, Response to Inmate Sexual Activity and the Sexual Abuse Prevention and Response Lesson Plan. Staff personnel are required by multiple DOCCS directives to immediately report any knowledge, suspicion, or information regarding any instance of sexual assault/abuse.

The PREA pocket card has been given to staff, and it outlines the first responder's steps to separate the alleged victim and abuser; preserve and protect the crime scene; and request the alleged victim and alleged abuser take no action to destroy evidence. The responding staff is to immediately notify their immediate supervisor and the Watch Commander. The Watch Commander will make further notifications to the Superintendent, medical, mental health, and OSI, as noted on the Sexual Abuse and Containment Checklist. Interviews were conducted with OSI Investigators, higher and intermediate level supervisors, and random staff. It was demonstrated that staff were knowledgeable in the steps as first responder. All staff personnel are considered first responders.

Based on my review of Directive #4027B, Sexual Abuse Reporting and Investigations; Directive # 4028B, Sexual Abuse Reporting and Investigation; Memorandum from the Associate Commissioner, PREA Coordinated Response Plan, Sexual Abuse Response and Containment Checklist; Memorandum from Deputy Commissioner/Chief Medical Officer and Associate Commissioner, Response to Inmate Sexual Activity and the Sexual Abuse Prevention and Response Lesson Plan, interviews with supervisory and line staff, Wallkill Correctional Facility exceeds this standard.

Standard 115.65: Coordinated response

115.65 (a)

- Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

This auditor reviewed the Memorandum from the Associate Commissioner, PREA Coordinated Response Plan and the Walkkill Correctional Facility Coordinated Response Plan to an Incident of Inmate Sexual Abuse.

The PREA Coordinated Response Plan coordinates the actions taken in response to an incident of sexual abuse among first responders, security, medical and mental health practitioners, OSI, facility leadership, and victim advocates.

A checklist, Sexual Abuser Response and Containment Checklist Form, is utilized to ensure all steps are properly completed and appropriate notifications are made in a timely manner. Interviews with staff indicate that each area is aware of their specific responsibilities under this plan. Based on the above, Walkkill Correctional Facility meets this standard.

Standard 115.66: Preservation of ability to protect inmates from contact with abusers

115.66 (a)

- Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted? Yes No

115.66 (b)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

This auditor has reviewed Directive #2110, Employee discipline, Suspension From Duty During Continuation of Disciplinary Proceedings; Directive #2114, Functions of the Bureau of Labor; Union Contracts continuation after Expiration –Taylor Law Triborough Amendment and Duration of Agreements on various Bargaining Units. DOCCS has not entered or renewed any collective bargaining agreements since August 20, 2012.

The state has state union contracts with: Administrative Services Unit; Institutional Services Unit; Operational Services Unit; Security Services Unit; Professional, Scientific, and Technical Services Unit, and Security Supervisors Unit. DOCCS union contracts allow removing alleged staff sexual abusers from contact with inmates pending the outcome of the investigations or of a determination of whether and to what extent discipline is warranted. The facility can remove alleged staff sexual abusers from contact with any inmates or place an employee on administrative leave pending the outcome of an investigation. The interview with the Superintendent verifies that there are no restrictions from removing an employee from inmate contact during an investigation. Documentation would be retained in the individual's personnel file if the allegation was substantiated and removed from the file if not substantiated.

Based on my review of reviewed Directive #2110, Employee discipline, Suspension form Duty During Continuation of Disciplinary Proceedings; Directive #2114, Functions of the Bureau of Labor; Union Contracts continuation after Expiration –Taylor Law Triborough amendment and Duration of Agreements on various Bargaining Units and interview with the Superintendent, Walkkill Correctional Facility meets this standard.

Standard 115.67: Agency protection against retaliation

115.67 (a)

- Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff? Yes No
- Has the agency designated which staff members or departments are charged with monitoring retaliation? Yes No

115.67 (b)

- Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with

victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations? Yes No

115.67 (c)

- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of residents or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? Yes No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? Yes No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation? Yes No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports? Yes No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes? Yes No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes? Yes No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff? Yes No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff? Yes No
- Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need? Yes No

115.67 (d)

- In the case of inmates, does such monitoring also include periodic status checks?
 Yes No

115.67 (e)

- If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?
 Yes No

115.67 (f)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

This auditor has reviewed the Employee Manual 2.19; Memorandum from the Associate Commissioner, Agency Protection against Retaliation, PREA Standard 115.67; and Completed PREA Retaliation Monitoring Forms 115.67. Wallkill Correctional Facility has designated the PREA Point Person as the designated staff member who monitors retaliation.

Monitoring will include a review of any new disciplinary reports, program changes, housing changes, and any other pertinent information. My interview with the responsible senior staff members indicated that they are knowledgeable of these duties. They track inmates by use of a spread sheet and completes the PREA Retaliation Monitoring Form on each inmate being monitored. They know that they can monitor inmates if necessary, though normally monitoring will not extend beyond 90 days.

Based on my review of the Employee Manual 2.19; Memorandum from the Associate Commissioner, Agency Protection against Retaliation, PREA Standard 115.67; PREA Retaliation Monitoring Forms 115.67 and interview with the Deputy Superintendent Security, Wallkill Correctional Facility meets this standard.

Standard 115.68: Post-allegation protective custody

115.68 (a)

- Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

This auditor has reviewed Directive# 4948, Protective Custody Status. This Directive prohibits the placement of inmates who alleged to have suffered sexual abuse in involuntary segregated housing unless an assessment of all available alternatives has been made and a determination has been made that there is no available alternative means of separation from likely abusers. Inmates that are placed in protective custody on this basis shall have access to programs privileges, education, and work opportunities in accordance with PREA Standard 115.43. If an inmate is placed in involuntary protective custody; his status is reviewed every thirty days. There were no inmates who alleged sexual abuse or were victims of sexual abuse held in involuntary segregation housing in the past twelve months.

Based on my review of the directives and supporting documentation, Wallkill Correctional Facility meets this standard.

INVESTIGATIONS

Standard 115.71: Criminal and administrative agency investigations

115.71 (a)

- When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? [N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).] Yes No NA
- Does the agency conduct such investigations for all allegations, including third party and anonymous reports? [N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).] Yes No NA

115.71 (b)

- Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34? Yes No

115.71 (c)

- Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data? Yes No
- Do investigators interview alleged victims, suspected perpetrators, and witnesses?
 Yes No
- Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator? Yes No

115.71 (d)

- When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution? Yes No

115.71 (e)

- Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff? Yes No
- Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding? Yes No

115.71 (f)

- Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse? Yes No
- Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings? Yes No

115.71 (g)

- Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible? Yes No

115.71 (h)

- Are all substantiated allegations of conduct that appears to be criminal referred for prosecution? Yes No

115.71 (i)

- Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years? Yes No

115.71 (j)

- Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation? Yes No

115.71 (k)

- Auditor is not required to audit this provision.

115.71 (l)

- When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).) Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

This auditor reviewed New York Criminal Procedure Law 160.45 Polygraph Test: prohibitions; Directive #0700 Office of Special Investigations; Directive #2011, Disposition of Department Records; OSI Policy & Procedure: Training Requirements for Sex Crime Investigators; OSI Policy & Procedure; Intake and Case Management Unit; OSI Sex Crimes Division Dispatch and Operational Guidelines, Inmate on Inmate Sexual Abuse; OSI Sex Crimes Division Dispatch and Operational Guidelines, Staff on Inmate Sexual Abuse; Power Point Presentation: PREA Specialized Training; Letter to the Acting Commissioner from Superintendent New York State Police.

DOCCS OSI Sex Crimes Division has primary jurisdiction to investigate initial allegations of inmate sexual abuse occurring within Walkill Correctional Facility. They work cooperatively with the New York State Police in investigating criminal misconduct.

A review of closed investigations and interviews with two OSI Investigators indicate that they follow a uniform evidence protocol to investigate sexual abuse and sexual harassments. Sexual investigations are conducted promptly, early, and objectively including third party and anonymous reports, and the use of investigators who have been specially trained in sexual abuse investigation. Both investigators had completed multiple training courses including the NIC PREA Investigating Sexual Abuse in a Confinement Setting webinar in accordance with standard 115.34 and explained the investigative process clearly. They explained that they had a sound working relationship with the New York State Police concerning inmate sexual abuse incidents. The credibility of an alleged victim, suspect, or witness is assessed on an individual basis and not determined by the person's status as an inmate or staff.

Inmates who allege sexual abuse are not required to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such an allegation. Additionally, the departure of the alleged abuser or victim from the employment or control of the facility or agency does not provide a basis for terminating an investigation.

Based on my review of New York Criminal Procedure Law 160.45 Polygraph Test: prohibitions; Directive #0700 Office of Special Investigations; Directive #2011, Disposition of Department Records; OSI Policy & Procedure: Training Requirements for Sex Crime Investigators; OSI Policy & Procedure; Intake and Case management Unit; OSI Sex Crimes Division Dispatch and Operational Guidelines, Inmate on Inmate Sexual Abuse; Sex Crimes Division Dispatch and Operational Guidelines, Staff on Inmate Sexual Abuse; Power Point Presentation: PREA Specialized Training; Letter to the Acting Commissioner from Superintendent New York State Police, interviews with OSI investigator and review of closed investigations, Walkill Correctional Facility meets this standard.

Standard 115.72: Evidentiary standard for administrative investigations

115.72 (a)

- Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

This auditor has reviewed the Memorandum from Deputy Chief of Investigations: Sex Crimes Division Close out Procedures and the Power Point Presentation Excerpt: PREA Specialized Training: Investigation which clearly states no standard greater than a preponderance of the evidence for determining whether allegations of Sexual Abuse or Harassment are substantiated. This was confirmed during my interview with two OSI investigators.

Based on my review of the directives and supporting documentation, Walkkill Correctional Facility meets this standard.

Standard 115.73: Reporting to inmates

115.73 (a)

- Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded? Yes No

115.73 (b)

- If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.) Yes No NA

115.73 (c)

- Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit? Yes No
- Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the

resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility? Yes No

- Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility? Yes No
- Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility? Yes No

115.73 (d)

- Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility? Yes No
- Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility? Yes No

115.73 (e)

- Does the agency document all such notifications or attempted notifications? Yes No

115.73 (f)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

This auditor has reviewed the Memorandum from Chief, Office of Special Investigations, Notification of Investigative Determination; the Memorandum from the Deputy Chief of Special Investigations and Sex Crimes Division Close Out Procedures. All inmates who make allegations of sexual abuse shall be informed whether the allegations have been substantiated, unsubstantiated, or unfounded.

The OSI investigator is to notify the facility who then notifies the inmate in person if the outcome of the investigation is determined to be substantiated or unsubstantiated. This notification is documented in the investigative file. For cases that are unfounded, this notification will be made by the facility. All notifications will be in writing and documented. An inmate who makes allegations that the sexual abuse was perpetrated by a staff member shall be notified of the status of the staff member in writing to include whether the staff member is no longer posted within the inmate's unit, the staff member is no longer employed at the facility, the agency learns that the staff member has been indicted on a charge related to sexual abuse within the facility, and/or the agency learns the staff member has been convicted on a charge related to sexual abuse within the facility. If the allegation was sexual abuse by another inmate, the facility informs the inmate whether the alleged abuser has been indicted on a charge related to sexual abuse within the facility and/or convicted on a charge related to sexual abuse within the facility.

Interviews with the Superintendent and OSI investigators verified that the facility is following the documented procedures. During the past twelve months, no notifications were made to inmates at the Walkkill Correctional Facility.

Based on my review of the Memorandum from Chief, Office of Special Investigations, Notification of Investigative Determination; the Memorandum from the Deputy Chief of Special Investigations and Sex Crimes Division Close Out Procedures; interview with the Superintendent and interviews with the OSI Investigators, Walkkill Correctional Facility meets this standard.

DISCIPLINE

Standard 115.76: Disciplinary sanctions for staff

115.76 (a)

- Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies? Yes No

115.76 (b)

- Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse? Yes No

115.76 (c)

- Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories? Yes No

115.76 (d)

- Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies (unless the activity was clearly not criminal)? Yes No

- Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

This auditor has reviewed Directive #2110, Employee Discipline-Suspension from Duty During the Continuation of Disciplinary Proceedings; Directive #2111, Report of Employee Misconduct; Directive #2605, Sexual harassment in the workplace; Directive # 4028B Sexual Abuse Prevention and Intervention, Staff on Inmate; Directive # 4028A, Sexual Abuse Prevention and Intervention, Inmate on Inmate; and Memorandum from the Deputy Commissioner for Administrative Services, Prison Rape Elimination Act Presumptive Disciplinary Sanctions for Staff Sexual Misconduct.

These Directives address all elements in this standard. Staff personnel who are involved in sexual abuse, sexual harassment, or voyeurism with an inmate will be prosecuted to the fullest extent allowed by law. Termination is the presumptive disciplinary sanction for staff who have committed sexual abuse of an inmate. These directives also provide disciplinary sanctions for violations of the agency's policies relating to sexual abuse or sexual harassment commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories. Staff who would have been terminated if not for their resignation will be reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies. In the past twelve months, there have been no terminations or discipline imposed on any staff member for sexual abuse or sexual harassment.

Based on my review of the above listed Directives and Memorandum, Wallkill Correctional Facility meets this standard.

Standard 115.77: Corrective action for contractors and volunteers

115.77 (a)

- Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates? Yes No
- Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)? Yes No
- Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies? Yes No

115.77 (b)

- In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

This auditor reviewed Directive #4750 Volunteer Service Program, Memorandum from the Acting Commissioner reference the Policy on the Prevention of Sexual Abuse of Inmates, and OSI Reporting of Misconduct to Outside Agencies. These documents prohibit contractors or volunteers who engaged in sexual abuse to have contact with inmates and require they be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies.

Interviews verified in writing that volunteers were knowledgeable of these directives and policy. There are no contractors at the Walkkill Correctional Facility. There have been no instances in the past twelve months involving contractors or volunteers being accused of PREA violations with inmates.

Based on my review of the above Directives and Memorandum, Walkkill Correctional Facility meets this standard.

Standard 115.78: Disciplinary sanctions for inmates

115.78 (a)

- Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process? Yes No

115.78 (b)

- Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories? Yes No

115.78 (c)

- When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior? Yes No

115.78 (d)

- If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits? Yes No

115.78 (e)

- Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact? Yes No

115.78 (f)

- For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation? Yes No

115.78 (g)

- Does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)
 Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

This auditor has reviewed Directive #4027A Sexual Abuse Prevention and Intervention Inmate on Inmate; Directive #4028A Sexual Abuse Prevention and Intervention, Staff on Inmate; Directive #4932, Chapter V, Standards Behavior and Allowances; Memorandum from Deputy Commissioner, Disciplinary Disposition Guidelines; and Sex Inmate Counseling and Treatment Program Guidelines. Directive #4027A and the above reference memorandum outline disciplinary sanctions for inmates for sexual abuse and sexual harassment.

Inmates are subject to disciplinary sanctions imposed by a formal disciplinary process following administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse. Sanctions are commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories. Additionally, it shall be determined whether the inmate's mental disabilities or mental illness contributed to his behavior.

Rule violation, tier levels (I, II, III), types of misbehavior, and confinement time clearly indicating a formal disciplinary process resulting in administrative findings are spelled out in the Guidelines for Disciplinary Disposition.

DOCCS directives prohibit all sexual activity between inmates to include consensual sexual activity and will authorize disciplinary action on inmates, but will not consider it sexual abuse. An inmate may be disciplined for sexual conduct with staff only upon finding that the staff did not consent to such contact. The directives state an inmate reporting a sexual abuse in good faith upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if the investigation does not establish sufficient evidence to substantiate the allegation for purposes of disciplinary action. In the past twelve months, there were no administrative findings of inmate on inmate sexual abuse. There was no criminal finding of guilty for inmate on inmate sexual abuse.

Based on my review of reviewed Directive #4027A Sexual Abuse Prevention and Intervention Inmate on Inmate; Directive #4028A Sexual Abuse Prevention and Intervention, Staff on Inmate; Directive #4932, Chapter V, Standards Behavior and Allowances; Memorandum from Deputy Commissioner, Disciplinary Disposition Guidelines; and Sex Inmate Counseling and Treatment Program Guidelines, Walkkill Correctional Facility meets this standard.

MEDICAL AND MENTAL CARE

Standard 115.81: Medical and mental health screenings; history of sexual abuse

115.81 (a)

- If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? Yes No

115.81 (b)

- If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.) Yes No NA

115.81 (c)

- If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? Yes No

115.81 (d)

- Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law? Yes No

115.81 (e)

- Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

This auditor has reviewed Directive #4301, Mental Health Satellite Services and Commitments to CNYPC & Mental Health Referral Form 3150; HSPM 1.44, Health Screening for Inmates; Memorandum from Deputy Commissioner/Chief Medical Officer, Health Screening Forms 3278RC & 3278 TR; and the Memorandum of Understanding between the Department of Mental Health and the New York DOCCS. Directive #4301 requires all medical and mental health follow-up within fourteen days for those inmates who disclosed during screening prior sexual victimization or previously perpetrated sexual abuse whether it occurred in an institutional setting or in the community.

At the initial intake inmate screening, if the inmate has disclosed prior sexual victimization and/or previously perpetrated sexual abuse, the inmate is referred for medical and mental health services. Additionally, routine medical and mental health referrals will be seen within 14 days. This was verified by interviews with medical and mental health staff. All information about sexual victimization or abusiveness is strictly limited to medical and mental health staff and other staff as needed.

Medical Screening information is shared with appropriate staff, as needed, to make housing, bed, work, education, and program assignments. Informed consents are obtained before reporting prior sexual victimization that did not occur in an institutional setting. Inmate interviews confirmed that medical and mental health services are available as needed.

Based on my review of Directive #4301, Mental Health Satellite Services and Commitments to CNYPC & Mental Health Referral Form 3150; HSPM 1.44, Health Screening for Inmates; Memorandum from Deputy Commissioner/Chief Medical Officer, Health Screening Forms 3278RC & 3278 TR; and Memorandum of Understanding between the Department of Mental Health and the New York DOCCS, interviews with medical and mental health staff and inmate interviews, Walkkill Correctional Facility meets this standard.

Standard 115.82: Access to emergency medical and mental health services

115.82 (a)

- Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?
 Yes No

115.82 (b)

- If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62? Yes No
- Do security staff first responders immediately notify the appropriate medical and mental health practitioners? Yes No

115.82 (c)

- Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate? Yes No

115.82 (d)

- Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

This auditor has reviewed Directive #4027 B, Sexual Abuse Prevention and Intervention, Inmate on Inmate; Directive #4028B, Sexual Abuse Prevention and Intervention, Staff on Inmate; and HSPM 1.60, Sexual Assaults, SAFE/SANE hospitals. The above referenced Directives and Policy require that inmates who are victims of sexual abuse be afforded access to forensic medical examinations at an outside facility without financial cost where evidentiary or medically appropriate. Inmate victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners per their professional judgment.

Forensic exams are not conducted onsite. If needed, the inmate would be taken to an offsite hospital for the exam. HSPM 1.60, list all the available hospitals in the commuting area that have SAFE/SANE nurses available. These exams would be conducted at no cost to the inmate. Walkkill Correctional Facility has a Medical Level 01 Unit onsite and emergency medical attention for inmates are provided on site, if possible. As with all significant incidents, the Watch Commander would initiate notifications to the necessary parties, including medical and mental health for all sexual abuse/assault incidents. Interviews with medical and mental health staff, and supervisory security staff verified that this process is in accordance with policy. Inmate interviews verified that emergency medical and mental health treatment is available to them as needed and at no cost.

Based on my review of Directive #4027 B, Sexual Abuse Prevention and Intervention, Inmate on Inmate; Directive #4028B, Sexual Abuse Prevention and Intervention, Staff on Inmate; HSPM 1.60, Sexual Assaults, SAFE/SANE hospitals, interviews with security, medical and mental health staff and inmates, Walkkill Correctional Facility meets this standard.

Standard 115.83: Ongoing medical and mental health care for sexual abuse victims and abusers

115.83 (a)

- Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility? Yes No

115.83 (b)

- Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody? Yes No

115.83 (c)

- Does the facility provide such victims with medical and mental health services consistent with the community level of care? Yes No

115.83 (d)

- Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if all-male facility.) Yes No NA

115.83 (e)

- If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if all-male facility.) Yes No NA

115.83 (f)

- Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate? Yes No

115.83 (g)

- Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident? Yes No

115.83 (h)

- If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a prison.)
 Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

This auditor has reviewed HSPM#1.44, Health Screening of Inmates; HSPM1.12B Inmate Blood borne Pathogens Significant Exposure Protocol; HSPM#1.60 Sexual Assault, and the Office of Mental Health Memorandum of Understanding with the New York DOCCS.

These policies address all elements of the standards. Section (d) & (e) of this standard are non-applicable as Wallkill Correctional Facility houses only male inmates. Medical and mental treatment including evaluations, on-going care, and treatment to all inmates that have been identified as victims and/or abusers are provided at no cost to the inmates and are consistent with the community level of care.

Inmate victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate. Interviews with medical and medical health staff, inmates, and file reviews verify and document the process.

Based on my review of HSPM#1.44, Health Screening of Inmates; HSPM1.12B Inmate Blood borne Pathogens Significant Exposure Protocol; HSPM#1.60 Sexual Assault, and the Office of Mental Health Memorandum of Understanding with the New York DOCCS, interviews with medical and mental health staff and interviews with inmates, Wallkill Correctional Facility meets this standard.

DATA COLLECTION AND REVIEW

Standard 115.86: Sexual abuse incident reviews

115.86 (a)

- Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded? Yes No

115.86 (b)

- Does such review ordinarily occur within 30 days of the conclusion of the investigation?
 Yes No

115.86 (c)

- Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners? Yes No

115.86 (d)

- Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse? Yes No
- Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility? Yes No
- Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse? Yes No
- Does the review team: Assess the adequacy of staffing levels in that area during different shifts? Yes No
- Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff? Yes No
- Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1) - (d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?
 Yes No

115.86 (e)

- Does the facility implement the recommendations for improvement, or document its reasons for not doing so? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

This auditor has reviewed the Memorandum from the Deputy Commissioner and the Associate Commissioner, Prison Rape Elimination Act Procedural Enhancements Sexual Abuse Response and Containment Checklist; Sexual Abuse Incident Reviews and Security Staffing Audits.

This memorandum requires that a sexual abuse incident review must be conducted within 30 days of the conclusion of the investigation, unless the allegation is deemed to be unfounded. At Wallkill, the Captain/PREA Point Person will normally chair the Incident Review Team and serve as the Security representative. The Deputy Superintendent for Program Services and a third member designated by the Superintendent make up the rest of the incident review team. Input will be obtained from the investigator, area sergeant, crisis intervention team, mental health, medical, and others as deemed appropriate to complete the review. A Correctional Facility Operations Specialist from the agency-wide PREA Coordinator's Office is available to participate in the process by telephone as requested to provide guidance to the incident review team.

The team completes the Sexual Abuse Response and Containment Checklist and considers whether the allegation or investigation indicate a need to change policy or practice to better detect, or respond to sexual abuse; consider whether the incident or allegation was motivated by race, ethnicity, gender identity, lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status, gang affliction, or was motivated or otherwise caused by other group dynamics at the facility; an examination of the area in the facility where the incident alleged occurred to assess whether physical barriers in the area may enable abuse; an assessment of the adequacy of staffing levels in that area during different shifts; and an assessment as to whether monitoring technology should be deployed or augmented to supplement supervision by staff. Upon completion of the report it is forwarded to the Superintendent, Facility PREA Compliance Manager, and Agency PREA Coordinator for review. The facility shall implement recommendations that result from the review, or document the reasons for not making the implementations.

Based on my review of Memorandum from the Deputy Commissioner and the Associate Commissioner, Prison Rape Elimination Act Procedural Enhancements Sexual Abuse Response and Containment Checklist; Sexual Abuse Incident Reviews and Security Staffing Audits, interviews with the Superintendent and the PREA Point Person, Wallkill Correctional Facility meets this standard.

Standard 115.87: Data collection

115.87 (a)

- Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions? Yes No

115.87 (b)

- Does the agency aggregate the incident-based sexual abuse data at least annually? Yes No

115.87 (c)

- Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice? Yes No

115.87 (d)

- Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews? Yes No

115.87 (e)

- Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.) Yes No NA

115.87 (f)

- Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.) Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

This auditor reviewed the Office of Program Planning Research and Evaluation; PREA Data Collection, Review, Retention and Publications Manual and the DATA Dictionary which address all elements of this standard. The DATA Dictionary defines the elements of information collected by the Office of Program, Planning, Research and Evaluation from all incident based documents. The facility's Deputy Superintendent for Security is responsible for collecting and reporting monthly of all sexual abuse data. The latest Annual Report on Sexual Victimization report covering the period 2014-2015 is available on the DOCCS website at

http://www.doocs.ny.gov/Research/Reports/2017/Annual_Report_on_Sexual_Victimization_2015_Report.pdf and was reviewed by this auditor. Based on my review of the directives and supporting documentation, Walkkill Correctional Facility meets this standard.

Standard 115.88: Data review for corrective action

115.88 (a)

- Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas? Yes No
- Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis? Yes No
- Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole? Yes No

115.88 (b)

- Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse? Yes No

115.88 (c)

- Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means? Yes No

115.88 (d)

- Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

The auditor reviewed the Office of Program Planning Research and Evaluation; PREA Data Collection, Review, Retention and Publications Manual which address all elements of this standard. The PREA Analysis prepares and aggregates data collected in coordination with the Sexual Abuse Prevention & Education Office and the OSI Sex Crimes Division order to assess and improve the effectiveness of its sexual abuse prevention, detection and response polices and training.

An annual report is prepared and includes a comparison with the prior year's data and is published on the Agency website addressing facility specific and Department wide corrective actions. The report does not address any case specific information.

Only aggregated data is published after review and approval by the Acting Commissioner. The latest Annual Report on Sexual Victimization report covering the period 2014-2015 is available on the DOCCS website and was reviewed by this auditor.

Based on my review of the directives and supporting documentation, Walkill Correctional Facility meets this standard.

Standard 115.89: Data storage, publication, and destruction

115.89 (a)

- Does the agency ensure that data collected pursuant to § 115.87 are securely retained?
 Yes No

115.89 (b)

- Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means? Yes No

115.89 (c)

- Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available? Yes No

115.89 (d)

- Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

This auditor reviewed the Office of Program Planning Research and Evaluation; PREA data Collection, Review, Retention and Publication Manual which address all elements of this standard. Additionally, the 2013-2014 Annual PREA Report is posted on the DOCCS web site which documents availability to the public of the compiled aggregate agency wide data. Data collected is maintained by the Office of Special Investigations and is maintained for at least 10 years as required by PREA standard 115.87.

The latest Annual Report on Sexual Victimization report covering the period 2014-2015 is available on the DOCCS website and was reviewed by this auditor.

Based on my review of the directives and supporting documentation, Walkkill Correctional Facility meets this standard.

AUDITING AND CORRECTIVE ACTION

Standard 115.401: Frequency and scope of audits

115.401 (a)

- During the three-year period starting on August 20, 2013, and during each three-year period thereafter, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (N/A before August 20, 2016.)
 Yes No NA

115.401 (b)

- During each one-year period starting on August 20, 2013, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited? Yes No

115.401 (h)

- Did the auditor have access to, and the ability to observe, all areas of the audited facility?
 Yes No

115.401 (i)

- Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)? Yes No

115.401 (m)

- Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?
 Yes No

115.401 (n)

- Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

The Auditor reviewed the NYS DOCCS web page at http://www.doccs.ny.gov/PREA/PREA_Final_Audit_Reports.html containing the 35 audit reports for PREA audits completed from November 6, 2015 through June 21, 2017. In addition, the Auditor conducted an interview with the Agency-Wide PREA Coordinator, was provided with a copy of the Final Audit Report for Southport Correctional Facility completed on October 17, 2017, and viewed the schedule of audits. This auditor is conducting the sixth and seventh audits of NYS DOCCS prisons in audit year 2 of cycle 2. This Auditor is aware that several other audits are currently in progress and, as noted, one audit was completed while I was on site at Wallkill.

The Auditor verified that the NYS DOCCS has, beginning in audit year 3 of cycle 1, ensured that at least one-third of each facility type operated by the Agency was and is scheduled to be audited. A total of 19 DOCCS facilities are scheduled for audits during audit year 2 of cycle 2, including 18 Adult Prisons and 1 Community Confinement Facility.

NYS Correction Law section 121 provides that the private ownership or operation of a facility for housing state or local inmates or the private ownership or operation of a facility for the incarceration of other state's inmates is prohibited. Thus, no private prisons are operated on behalf of the Agency.

NYS DOCCS has entered into agreements with private organizations for 12 Community Base Residential Programs to provide up to 6 months of housing and treatment for selected Parolees. These contracts were effective starting 5/1/17 (6 programs) and 10/1/17 (6 programs). Each contract permits contract monitoring and requires the Program to achieve and maintain PREA Compliance, and to arrange for PREA Audits on a schedule set in consultation with the DOCCS Agency-Wide PREA Coordinator. Audits are scheduled at 2 per year per contract with the first pair to be completed on or about 1 year after the start of the contract (i.e., two by May 2018, two by October 2018, etc.), thus ensuring that one-third of each facility type operated by a private organization on behalf of the agency will be audited during each forthcoming audit year.

The Wallkill Correctional Facility and Superintendent Catherine Jacobsen opened the entire facility for this auditor, to ensure complete transparency of all records and freedom of speech from the inmates and staff alike. During the tour, the auditor noted all potential risk areas in the facility, these areas of risk were mitigated through the use of mirrors, direct supervision of staff, physical plant acoustics of the housing areas, the unobstructed view of interior windows and security minded placement of furniture in the rooms. With the aforementioned action being proactively taken, the risk areas were eliminated.

Standard 115.403: Audit contents and findings

115.403 (f)

- The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports within 90 days of issuance by auditor. The review period is for prior audits completed during the past three years PRECEDING THIS AGENCY AUDIT. In the case of single facility agencies, the auditor shall ensure that the facility's last audit report was published. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or in the case of single facility agencies that there has never been a Final Audit Report issued.) Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

The Auditor reviewed the NYS DOCCS web page at http://www.doccs.ny.gov/PREA/PREA_Final_Audit_Reports.html containing the 35 audit reports for PREA audits completed from November 6, 2015 through June 21, 2017.

The New York Department of Corrections and Community Supervision has all previous PREA Final Reports from the correctional facilities within its jurisdiction, published on the Agency's website within 90 days after the final report is issued by the auditor.

AUDITOR CERTIFICATION

I certify that:

- The contents of this report are accurate to the best of my knowledge.
- No conflict of interest exists with respect to my ability to conduct an audit of the agency under review, and
- I have not included in the final report any personally identifiable information (PII) about any inmate or staff member, except where the names of administrative personnel are specifically requested in the report template.

Marc Coudriet

21 October 2017

Auditor Signature

Date