

PREA Facility Audit Report: Final

Name of Facility: Hudson Correctional Facility

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 11/02/2023

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input type="checkbox"/>
Auditor Full Name as Signed: Valerie Wolfe Mahfood	Date of Signature: 11/02/ 2023

AUDITOR INFORMATION	
Auditor name:	Mahfood, Valerie Wolfe
Email:	wolfemahfood@aol.com
Start Date of On-Site Audit:	09/17/2023
End Date of On-Site Audit:	09/18/2023

FACILITY INFORMATION	
Facility name:	Hudson Correctional Facility
Facility physical address:	50 East Court Street, Hudson, New York - 12534
Facility mailing address:	

Primary Contact	
Name:	Stephen Brandow
Email Address:	stephen.brandow@doccs.ny.gov
Telephone Number:	5188284311

Warden/Jail Administrator/Sheriff/Director	
Name:	Stephen Brandow
Email Address:	stephen.brandow@doccs.ny.gov
Telephone Number:	518-828-4311

Facility PREA Compliance Manager	
Name:	Tami Kelly
Email Address:	Tami.Kelly@doccs.ny.gov
Telephone Number:	
Name:	Jerald Meigs
Email Address:	jerald.meigs@doccs.ny.gov
Telephone Number:	

Facility Health Service Administrator On-site	
Name:	Michael Macri
Email Address:	michael.macri@docs.ny.gov
Telephone Number:	5188084311

Facility Characteristics	
Designed facility capacity:	261
Current population of facility:	92

Average daily population for the past 12 months:	106
Has the facility been over capacity at any point in the past 12 months?	No
Which population(s) does the facility hold?	Males
Age range of population:	20-81
Facility security levels/inmate custody levels:	medium
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	234
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	30
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	0

AGENCY INFORMATION

Name of agency:	New York Department of Corrections and Community Supervision
Governing authority or parent agency (if applicable):	
Physical Address:	1220 Washington Avenue, Albany, New York - 12226
Mailing Address:	
Telephone number:	5184578126

Agency Chief Executive Officer Information:

Name:	Daniel F. Martuscello III
Email Address:	commissioner@dccs.ny.gov

Telephone Number:	518.457.8134
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Agency-Wide PREA Coordinator Information			
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Name:	Jason Effman	Email Address:	jason.effman@doccs.ny.gov
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Facility AUDIT FINDINGS

Summary of Audit Findings

The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.

Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.

Number of standards exceeded:

17	<ul style="list-style-type: none"> • 115.11 - Zero tolerance of sexual abuse and sexual harassment; PREA coordinator • 115.14 - Youthful inmates • 115.16 - Inmates with disabilities and inmates who are limited English proficient • 115.17 - Hiring and promotion decisions • 115.31 - Employee training • 115.32 - Volunteer and contractor training • 115.33 - Inmate education • 115.34 - Specialized training: Investigations • 115.35 - Specialized training: Medical
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	<p>and mental health care</p> <ul style="list-style-type: none"> • 115.42 - Use of screening information • 115.51 - Inmate reporting • 115.53 - Inmate access to outside confidential support services • 115.67 - Agency protection against retaliation • 115.82 - Access to emergency medical and mental health services • 115.83 - Ongoing medical and mental health care for sexual abuse victims and abusers • 115.401 - Frequency and scope of audits • 115.403 - Audit contents and findings
Number of standards met:	
28	
Number of standards not met:	
0	

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2023-09-17
2. End date of the onsite portion of the audit:	2023-09-18

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	Just Detention International, Crime Victim's Treatment Center, St. Peter's Crime Victim's Center

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	261
15. Average daily population for the past 12 months:	106
16. Number of inmate/resident/detainee housing units:	8
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

Audited Facility Population Characteristics on Day One of the Onsite Portion of the Audit

Inmates/Residents/Detainees Population Characteristics on Day One of the Onsite Portion of the Audit

36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	119
38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	4
39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	2
40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	1
41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	1
42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	1
43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	1

<p>44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>
<p>45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>
<p>46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:</p>	<p>2</p>
<p>47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>
<p>48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):</p>	<p>Inmates were allowed to self-select out of and/or into all targeted categories during the interview process. As such, while facility records may or may not include inmates within targeted categories, targeted protocols were still completed for any inmate who self-selected into any targeted protocol at the time of the interview. Also, it should be noted that if there were not sufficient numbers of inmates assigned to the facility within a targeted group, oversampling was done in other targeted groups to ensure the minimum number of targeted interviews were conducted. At the time of the onsite portion of the audit, there weren't any transgender inmates assigned to the facility. Likewise, there weren't any inmates who had previously reported sexual abuse assigned to the facility.</p>

Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit	
49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:	236
50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	0
51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	2
52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	NA
INTERVIEWS	
Inmate/Resident/Detainee Interviews	
Random Inmate/Resident/Detainee Interviews	
53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	10

<p>54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</p>	<p><input type="checkbox"/> Age</p> <p><input type="checkbox"/> Race</p> <p><input type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic)</p> <p><input type="checkbox"/> Length of time in the facility</p> <p><input type="checkbox"/> Housing assignment</p> <p><input type="checkbox"/> Gender</p> <p><input type="checkbox"/> Other</p> <p><input type="checkbox"/> None</p>
<p>If "Other," describe:</p>	<p>Custody, Job Assignment, Program Activity, Physical Characteristics, Psychological Characteristics, Primary Language Spoken, or other distinguishing factors amongst population.</p>
<p>55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</p>	<p>Housing Rosters</p>
<p>56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>

<p>57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</p>	<p>Inmates were allowed to self-select out of and/or into all targeted categories during the interview process. As such, while facility records may or may not include inmates within targeted categories, targeted protocols were still completed for any inmate who self-selected into any targeted protocol at the time of the interview. Also, it should be noted that if there were not sufficient numbers of inmates assigned to the facility within a targeted group, oversampling was done in other targeted groups to ensure the minimum number of targeted interviews were conducted. At the time of the onsite portion of the audit, there weren't any transgender inmates assigned to the facility. Likewise, there weren't any inmates who had previously reported sexual abuse assigned to the facility.</p>
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Targeted Inmate/Resident/Detainee Interviews

<p>58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</p>	<p>10</p>
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As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".

<p>60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>2</p>
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61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:	2
62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:	1
63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:	1
64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:	1
65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	1
66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	0

<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Reviewed facility documentation. All inmates interviewed were also asked if they were transgender, intersex, gay, lesbian, or bisexual. None of the inmates interviewed stated that they were transgender. Additionally, during random staff interviews, staff did not indicate that any transgender incarcerated persons were assigned to the facility.</p>
<p>67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Reviewed facility documentation. All inmates interviewed were also asked if they had filed reports of sexual abuse while assigned to the facility. None of the inmates interviewed stated that they had filed any such reports.</p>

<p>68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</p>	<p>2</p>
<p>69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Reviewed facility documentation. All inmates interviewed were also asked if they had ever been placed in segregated housing for risk of sexual victimization. None of the inmates interviewed stated that they had ever been placed in such housing for risk of sexual victimization.</p>

<p>70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</p>	<p>Inmates were allowed to self-select out of and/or into all targeted categories during the interview process. As such, while facility records may or may not include inmates within targeted categories, targeted protocols were still completed for any inmate who self-selected into any targeted protocol at the time of the interview. Also, it should be noted that if there were not sufficient numbers of inmates assigned to the facility within a targeted group, oversampling was done in other targeted groups to ensure the minimum number of targeted interviews were conducted.</p>
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Staff, Volunteer, and Contractor Interviews

Random Staff Interviews

<p>71. Enter the total number of RANDOM STAFF who were interviewed:</p>	<p>12</p>
<p>72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</p>	<p><input checked="" type="checkbox"/> Length of tenure in the facility</p> <p><input checked="" type="checkbox"/> Shift assignment</p> <p><input checked="" type="checkbox"/> Work assignment</p> <p><input checked="" type="checkbox"/> Rank (or equivalent)</p> <p><input checked="" type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken)</p> <p><input type="checkbox"/> None</p>
<p>If "Other," describe:</p>	<p>Gender, race, ethnicity, languages spoken, or other distinguishing factors amongst staff relative to their employment.</p>
<p>73. Were you able to conduct the minimum number of RANDOM STAFF interviews?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>

<p>74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</p>	<p>NA</p>
<p>Specialized Staff, Volunteers, and Contractor Interviews</p>	
<p>Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.</p>	
<p>75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):</p>	<p>18</p>
<p>76. Were you able to interview the Agency Head?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>78. Were you able to interview the PREA Coordinator?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>79. Were you able to interview the PREA Compliance Manager?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)</p>

80. Select which SPECIALIZED STAFF roles were interviewed as part of this audit from the list below: (select all that apply)

- Agency contract administrator
- Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment
- Line staff who supervise youthful inmates (if applicable)
- Education and program staff who work with youthful inmates (if applicable)
- Medical staff
- Mental health staff
- Non-medical staff involved in cross-gender strip or visual searches
- Administrative (human resources) staff
- Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff
- Investigative staff responsible for conducting administrative investigations
- Investigative staff responsible for conducting criminal investigations
- Staff who perform screening for risk of victimization and abusiveness
- Staff who supervise inmates in segregated housing/residents in isolation
- Staff on the sexual abuse incident review team
- Designated staff member charged with monitoring retaliation
- First responders, both security and non-security staff
- Intake staff

	<input checked="" type="checkbox"/> Other
If "Other," provide additional specialized staff roles interviewed:	Commissary, Quarter Master, Grievance, Mailroom Staff, Inmate Records, Training Staff, Chaplain, Law Library, and SAFE/SANE staff associated with local hospital
81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	<input type="radio"/> Yes <input checked="" type="radio"/> No
82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of CONTRACTORS who were interviewed:	2
b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Security/detention <input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Food service <input checked="" type="checkbox"/> Maintenance/construction <input type="checkbox"/> Other
83. Provide any additional comments regarding selecting or interviewing specialized staff.	There aren't any volunteers currently working within the HCF.

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

PREA Standard 115.401 (h) states, "The auditor shall have access to, and shall observe, all areas of the audited facilities." In order to meet the requirements in this Standard, the site review portion of the onsite audit must include a thorough examination of the entire facility. The site review is not a casual tour of the facility. It is an active, inquiring process that includes talking with staff and inmates to determine whether, and the extent to which, the audited facility's practices demonstrate compliance with the Standards. Note: As you are conducting the site review, you must document your tests of critical functions, important information gathered through observations, and any issues identified with facility practices. The information you collect through the site review is a crucial part of the evidence you will analyze as part of your compliance determinations and will be needed to complete your audit report, including the Post-Audit Reporting Information.

84. Did you have access to all areas of the facility?

Yes

No

Was the site review an active, inquiring process that included the following:

85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?

Yes

No

86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?

Yes

No

87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?

Yes

No

88. Informal conversations with staff during the site review (encouraged, not required)?

Yes

No

<p>89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).</p>	<p>NA</p>
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Documentation Sampling

Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.

<p>90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
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<p>91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).</p>	<p>Additional document sampling was done both at random, as well as in coordination with comments received from inmates and staff during the interview process.</p>
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SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

Remember the number of allegations should be based on a review of all sources of allegations (e.g., hotline, third-party, grievances) and should not be based solely on the number of investigations conducted. Note: For question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, or detainee sexual abuse allegations and investigations, as applicable to the facility type being audited.

92. Total number of SEXUAL ABUSE allegations and investigations overview during the 12 months preceding the audit, by incident type:

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual abuse	0	0	0	0
Staff-on-inmate sexual abuse	2	2	2	2
Total	2	2	2	2

93. Total number of SEXUAL HARASSMENT allegations and investigations overview during the 12 months preceding the audit, by incident type:

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	0	0	0	0
Staff-on-inmate sexual harassment	1	0	1	0
Total	1	0	1	0

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

Note: these counts should reflect where the investigation is currently (i.e., if a criminal investigation was referred for prosecution and resulted in a conviction, that investigation outcome should only appear in the count for “convicted.”) Do not double count. Additionally, for question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, and detainee sexual abuse investigation files, as applicable to the facility type being audited.

94. Criminal SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual abuse	0	0	0	0	0
Staff-on-inmate sexual abuse	0	0	0	0	0
Total	0	0	0	0	0

95. Administrative SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	0	0	0	0
Staff-on-inmate sexual abuse	0	0	1	0
Total	0	0	1	0

Sexual Harassment Investigation Outcomes

Note: these counts should reflect where the investigation is currently. Do not double count. Additionally, for question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, and detainee sexual harassment investigation files, as applicable to the facility type being audited.

96. Criminal SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual harassment	0	0	0	0	0
Staff-on-inmate sexual harassment	0	0	0	0	0
Total	0	0	0	0	0

97. Administrative SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	0	0	0	0
Staff-on-inmate sexual harassment	0	0	0	0
Total	0	0	0	0

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

98. Enter the total number of SEXUAL ABUSE investigation files reviewed/ sampled:

2

<p>99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)</p>
<p>Inmate-on-inmate sexual abuse investigation files</p>	
<p>100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>0</p>
<p>101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p>102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p>Staff-on-inmate sexual abuse investigation files</p>	
<p>103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>2</p>
<p>104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>

<p>105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>
<p>Sexual Harassment Investigation Files Selected for Review</p>	
<p>106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>1</p>
<p>107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)</p>
<p>Inmate-on-inmate sexual harassment investigation files</p>	
<p>108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>0</p>
<p>109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
<p>110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>

Staff-on-inmate sexual harassment investigation files	
111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	1
112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.	All cases are initially treated and reviewed as criminal allegations until the merits of the allegation, or subsequent investigation, determine the complaint to be less than criminal. At that point, the investigation, which still continues until exhausted, is deemed administrative in nature.
SUPPORT STAFF INFORMATION	
DOJ-certified PREA Auditors Support Staff	
115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.	<input type="radio"/> Yes <input checked="" type="radio"/> No

Non-certified Support Staff

<p>116. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p>
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AUDITING ARRANGEMENTS AND COMPENSATION

<p>121. Who paid you to conduct this audit?</p>	<p><input type="radio"/> The audited facility or its parent agency</p> <p><input type="radio"/> My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)</p> <p><input checked="" type="radio"/> A third-party auditing entity (e.g., accreditation body, consulting firm)</p> <p><input type="radio"/> Other</p>
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<p>Identify the name of the third-party auditing entity</p>	<p>ACA</p>
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Standards	
Auditor Overall Determination Definitions	
<ul style="list-style-type: none"> • Exceeds Standard (Substantially exceeds requirement of standard) • Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period) • Does Not Meet Standard (requires corrective actions) 	
Auditor Discussion Instructions	
<p>Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.</p>	

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>Documents:</p> <ul style="list-style-type: none"> · DIR #4027, Sexual Victimization Prevention & Response, 7/21/22 · NYDOCCS Sexual Victimization Prevention Policy Manual, Section 115.11, 2/15/22 · NYDOCCS Employees Manual (2019) · NYDOCCS Policy on the Prevention of Sexual Victimization (Revised), 8/19/22 · Agency e-mail announcement designating Associate Commissioner Jason Effman as agency-wide PREA Coordinator, 4/23/13 · NYS Department of Corrections and Community Supervision Central Office Organization, 6/14/23

- NYDOCCS SAPEO Central Office Organization Chart, 7/27/22
- NYDOCCS Appointment of Director of PREA Compliance, 12/13/21
- NYDOCCS Assistant Deputy Superintendent PREA Compliance Manager Reassignments and Appointments, 12/22/21
- NYDOCCS Assistant Deputy Superintendent PREA Compliance Manager Appointment, 9/26/19
- HCF PREA Point Person, 7/22/22
- HCF Facility Organizational Chart, 2/28/23

Interviews:

- Agency Head
- Agency PREA Coordinator
- Agency Director of PREA Compliance
- Regional Assistant Deputy Superintendent (ADS) PREA Compliance Manager (PCM)
- Facility PREA Compliance Manager/PREA Point Person
- Facility Warden/Superintendent
- Intermediate or Higher-Level Facility Staff
- Random Staff

Site Review Observations:

- The Regional ADS PREA Compliance Manager oversees the Hudson Correctional Facility (HCF) PREA program.
- Hudson PREA Point Person is physically assigned to the HCF and maintains a permanent office, with routine activities, within said institution as a function assignment.

Standard Subsections:

(a) The NYDOCCS Sexual Victimization Prevention Policy Manual, NYDOCCS Policy on the Prevention of Sexual Victimization (Revised), NYDOCCS Employees Manual, as well as the DIR #4027, Sexual Victimization Prevention & Response, provide written direction of mandating a zero-tolerance policy toward all forms of sexual abuse and sexual harassment. Policy also outlines the both the agency's and the facility's approach to preventing, detecting, and responding to such conduct.

(b) The agency has employed an agency-wide PREA Coordinator within the upper hierarchy of organizational authority inside the New York Department of Corrections and Community Supervision (DOCCS). This Associate Commissioner is a member of the Commissioner's Executive Team. The PREA Coordinator's sole purpose within the agency is to facilitate institutional needs specific to the implementation and advancement of the PREA standards. To assist in this process, the agency has also created a Director of PREA Compliance, who serves as the Assistant Agency-Wide PREA Coordinator. Together, these positions are charged with the supervision of 16 Assistant Deputy Superintendents (ADS), who serve as Regional PREA Compliance Managers (PCM) throughout the State of New York. The agency-wide PREA Coordinator and Assistant Agency-Wide PREA Coordinator, in coordination with the Regional PCMs and facility Superintendents, oversee the implementation of PREA standards, by the facility-based PREA Point Person, at the facility level.

(c) The State of New York operates multiple penal institutions. Each Superintendent within said institution has been charged with designating a PREA Point Person who holds the supervisory rank of Captain. HCF Superintendent affirms the designation of such a person to serve in this capacity. As well, the HCF PREA Point Person confirms both sufficient time and authority to coordinate the facility's efforts in complying with the PREA standards.

Reasoning & Findings Statement:

This standard works to ensure the agency operates with a zero-tolerance acceptance level of sexual abuse and sexual harassment of incarcerated individuals. As well, the standard requires that individual facilities operate with respect to the agency's zero-tolerance expectation. In this regard, the agency has implemented policies designed to prevent, detect, and respond to sexual abuse and sexual harassment. Though the standard requires the minimum staffing of one agency-wide PREA Coordinator and then individual PREA Compliance Managers assigned to each facility, the State of New York has vastly exceeded this requirement through the additional employment of a Director of PREA Compliance, as well as 16 Regional ADS PCMs. The sole function of these positions is to better coordinate and advance the implementation of the PREA

	<p>standards and policies to significantly increase the sexual safety of all incarcerated individuals within the New York State Department of Corrections and Community Supervision (DOCCS). Each of the 16 Regional ADS PCMs work closely with the PREA Point Person assigned to facilities within their region. By creating these extra levels of supervision, the State of New York has better ensured that each person in their respective capacities has significant oversight and time to dedicate themselves to the agency’s zero-tolerance mission. As such, the agency, and by extension the facility, has clearly exceeded the basic requirements of this standard.</p>
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115.12	Contracting with other entities for the confinement of inmates
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Documents:</p> <ul style="list-style-type: none"> · New York Consolidated Laws Service, Correction Law, Article 6, Section 121, Prohibiting the private ownership or operation of correctional facilities · Community Based Residential Programs (CBRP) PREA Audit Schedule, 8/23/22 · NY DOCCS Request for Application (August 2016) · NY DOCCS Request for Application (December 2021) <p>Interviews:</p> <ul style="list-style-type: none"> · Agency Contract Administrator · Agency PREA Coordinator · Agency Director of PREA Compliance · Regional Assistant Deputy Superintendent (ADS) PREA Compliance Manager (PCM) · Facility PREA Compliance Manager/PREA Point Person <p>Site Review Observations:</p>

· The HCF is a publicly operated correctional facility through the New York State DOCCS.

Standard Subsections:

(a) The DOCCS does not contract for the confinement of its inmates with private agencies. Rather, NYS Correction Law, Section 121, expressly forbids the use of said contracts.

(b) In accordance with the DOCCS Agency Contract Administrator, the DOCCS does, however, contract for the management of numerous Community Based Residential Programs (CBRP) for parolee management services. As noted by the Agency Contract Administrator, all contracts require compliance with the PREA Standards. As evidenced by the Community Based Residential Programs PREA Audit Schedule, all CBRP programs are routinely audited for their compliance with the PREA standards.

Reasoning & Findings Statement:

This standard ensures that all CBRP entities contractually bound to the parent agency; namely, the New York State DOCCS, comply with the PREA standards. While the DOCCS does not contract for the supervision of its incarcerated persons, the agency does contract for up to 4 months of housing and treatment for selected Parolees. In this, the agency ensures upon the applicant's original CBRP submission, the applicant understands its absolute responsibility to comply with PREA regulations. Furthermore, if contracted with the DOCCS, the applicant understands its continuing duty to remain in compliance with all PREA standards. Lastly, all CBRP programs are routinely audited on a rotating basis to encourage said compliance. As such, the agency meets the established requirements under this standard.

115.13 Supervision and monitoring	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents:

- NYDOCCS Sexual Victimization Prevention Policy Manual, Section 115.13, 2-15-22
- NYDOCCS Post Closure Key, 9/6/22
- NYDOCCS Employees' Manual (2019)
- DIR #4001, Facility Administrative Coverage & Supervisory Rounds, 8/2/23
- Form 4001A, Weekly Administrative Activity Report (05/21)
- Form 4001B, Daily Security Supervisor Report (08/21)
- HCF Chart and Staffing Review, 6/29/23
- HCF Post Closures, 6/29/23 to 7/12/23
- HCF Annual Supervision and Monitoring Plan Review, 1/10/23
- HCF Annual Supervision and Monitoring Plan Review, 12/16/21
- HCF Annual Supervision and Monitoring Plan Review, 12/15/20
- HCF Building Activity Log, August 2-4, 2023
- HCF Daily Security Supervisor Report, 10/8/22a
- HCF Daily Security Supervisor Report, 10/8/22b
- HCF Daily Security Supervisor Report, 10/8/22c

Interviews:

- Agency PREA Coordinator
- Agency Director of PREA Compliance
- Regional Assistant Deputy Superintendent (ADS) PREA Compliance Manager (PCM)
- Facility PREA Compliance Manager/PREA Point Person
- Facility Warden/Superintendent
- Intermediate or Higher-Level Facility Staff
- Random Staff
- Random Inmates

Site Review Observations:

- All inmate housing areas contain at least one security staff post that is continuously monitored by staff. All areas of high inmate traffic are assigned permanent staffing positions while in operation.
- During the site review, supervisory staff were observed making routine and frequent rounds throughout the facility. All random staff interviewed did indicate that supervisory staff were available to them as needed and did routinely conduct unannounced rounds within the facility.
- During supervisory rounds, ranking officials were routinely observed reviewing required documentation completed by line staff as a function of their duty posts.
- During the on-site portion of the audit, number Chronological Housing/Building Logs were inspected at their location sites to ensure supervisory staff were conducting, and properly documenting, their unannounced rounds.
- Chronological Housing/Building Logs were also reviewed to ensure that opposite gender advisements on all three facility shifts, where appropriate, were being made and properly documented.
- Reviewed staffing plan and deviation documentation.

Standard Subsections:

(a) The New York Department of Corrections and Community Supervision (DOCCS), Hudson Correctional Facility (HCF) has developed and documented a staffing plan. Facility administrators make their best efforts to comply with said plan on a regular basis to provide for adequate levels of staffing, and, where applicable, video monitoring to protect inmates against abuse (Dir. #4001). As explicitly noted within the Staffing Plan Annual Review template, the staffing plan takes into consideration generally accepted correctional practices when determining staffing needs and the need for video monitoring. If present, the staffing plan considers any judicial, federal investigative agencies, internal, and external oversight bodies' findings of inadequacy. The Staffing Plan Annual Review template requires that the unit considers components of the facility's physical plant, composition of the inmate population, number and placement of supervisory staff, institutional programming needs, applicable state and local laws, the prevalence of substantiated and unsubstantiated incidents of sexual abuse, as well as any other relevant factors when determining staffing needs and the need for video monitoring. When asked, facility staff consistently remarked that unit administration does consider the nature of the inmate

population and current issues/trends within the inmate population when determining staffing levels. The DOCCS, HCF staffing plan was predicated consistent with average daily number of inmates assigned to the HCF for the previous year.

(b) The DOCCS and the HCF both have policies governing the minimum use of employee staffing (Dir. #4001, HCF Annual Supervision and Monitoring Plan Review, 6/29/23). If unit staffing levels are below these minimum requirements, HCF policy further requires shift administrators to properly document each occurrence. Within the past twelve months, the staffing levels of HCF have deviated from the required plan. The three most common reasons that HCF has deviated from the Staffing Plan over the last twelve months have been: housing unit closed, no trips scheduled, and holiday schedule. Sample documentation reflecting this shortage was examined to ensure adequate and timely notification of the closure was recorded.

(c) The facility conducts an annual review of the staffing plan, with the last review being finalized as of June 29, 2023. As supported by staff interviews, in completing the facility staffing plan review, the facility did coordinate with the agency PREA Coordinator, as well as the Regional and facility PREA Compliance Managers, to develop the facility staffing plan in accordance with the 115.13(a). As well, PREA staffing members were consulted regarding the use of resources necessary to commit to the staffing plan and the use of video monitoring technologies within the facility.

(d) The agency does have a policy in place to mandate unannounced rounds conducted by intermediate-level or higher-level supervisors (Dir. #4001). This policy does require that staff document those rounds. The policy requires unannounced rounds to be made on all shifts, both day and night hours. The agency also prohibits staff from alerting others that said rounds are being conducted. The timing of the site reviewed allowed the auditor to observe the facility while employees from all three shifts were on duty. The auditor did observe line and supervisory staff document said rounds as appropriate. While conducting the site review, the auditor also reviewed numerous Chronological Housing/Building Logs throughout the facility. Said documentation did reflect that not only were supervisory staff conducting unannounced rounds, but these rounds were also clearly documented. When interviewed, supervisory staff stated that they performed unannounced rounds at various times, as well as walked varying paces and routes when conducting unannounced rounds to make their presence less predictable. When interviewing random staff, all persons stated that supervisors routinely conduct unannounced rounds. Staff also noted that it was a violation of policy for supervisors to announce their rounds or for other staff to call ahead and warn their co-workers that a supervisor was conducting security rounds. When interviewing random inmates, most inmates stated that they have routinely witnessed supervisory staff conducting rounds throughout the facility. During the site review, it was further noted that inmates seemed comfortable with the presence of supervisory staff within their

	<p>housing areas; thus, further supporting that said staff are routinely present in inmate housing areas.</p> <p>Reasoning & Findings Statement:</p> <p>This standard requires the facility to ensure adequate staffing levels to promote the safety of not only all inmates assigned, but also the safety of all correctional employees, volunteers, and contractors within the institution. In the event the staffing plan is not followed, documentary evidence reflects staff adhere to policy in both noting the occurrence and justifying its reasoning. To ensure that the sexual safety of inmates assigned to the HCF is given sufficient weight in determining facility staffing needs, the HCF staffing plan is reviewed annually in coordination with all HCF PREA staffing components. Lastly, to ensure meaningful and effective correctional supervision, HCF supervisors routinely conduct and document unannounced rounds. As such, the HCF facility meets the required standard.</p>
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115.14	Youthful inmates
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>Documents:</p> <ul style="list-style-type: none"> · DIR #0057, Hudson Correctional Facility, 10/19/21 · New York Consolidated Laws Service, Correction Law, Article 4, Section 80, Adolescent Inmate Facilities <p>Interviews:</p> <ul style="list-style-type: none"> · Agency PREA Coordinator · Agency Director of PREA Compliance · Regional Assistant Deputy Superintendent (ADS) PREA Compliance Manager (PCM) · Facility PREA Compliance Manager/PREA Point Person

- Facility Warden/Superintendent

- Random Inmates

Site Review Observations:

- While conducting the on-site review, no inmates appear excessively youthful.

- In reviewing inmate documents, no inmate birthdays were noted as less than 18 years younger than the date of the on-site review.

- All inmates interviewed stated that they were at least 18 years of age and did not have any knowledge of any inmates assigned to the HCF who were not at least 18 years of age.

Standard Subsections:

(a) The State of New York has passed legislation prohibiting the placement of any inmate less than 18 years of age in an adult court system, and by extension, in adult correctional institutions. The HCF is an adult prison.

(b) As HCF does not house any inmates less than the age of 18 years, the facility most certainly has maintained an absolute sight and sound separation between youthful inmates and adult inmates.

(c) As HCF does not house any inmate less than 18 years of age, unit administration has absolutely avoided placing any adolescent inmate in isolation in order prevent said inmate from living within sight and sound of adult inmates. Hence, the HCF has not denied any adolescent inmate the ability to engage in daily large-muscle exercise or to participate in other program or work opportunities.

Reasoning & Findings Statement:

This standard requires that the agency ensure sight and sound separation between adolescent inmates and adult inmates. Alternatively, the standard requires that there is direct staff supervision when adolescent inmates and adult inmates have sight, sound, or physical contact. The State of New York has passed legislation prohibiting

	<p>the assignment of adolescent inmates to adult prisons. Hence, HCF is statutorily prohibited from receiving and subsequently housing adolescent inmates. As such, the facility has exceeded the requirements of this standard by maintaining an absolute and constant sight and sound barrier between adolescent inmates and adult inmates.</p>
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115.15 Limits to cross-gender viewing and searches	
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Documents:</p> <ul style="list-style-type: none"> · DIR #2230, Guidelines for Gender Specific Assignments for Correction Officers, 3/28/23 · DIR #4910, Control of and Search For Contraband, 8/2/22 · DIR #4001, Facility Administrative Coverage & Supervisory Rounds, 8/2/23 · HSPM #1.37, Body Cavity Search, 9/3/21 · HSPM #1.19, Health Appraisal, 9/3/21 · NYDOCCS Contraband and Frisk Training Lesson Plan, 1/15/21 · Form 1140, Report of Strip Search or Strip Frisk, 06/21 · HCF Contraband and Frisk Search Training Roster, 6/30/23 <p>Interviews:</p> <ul style="list-style-type: none"> · Agency PREA Coordinator · Agency Director of PREA Compliance · Regional Assistant Deputy Superintendent (ADS) PREA Compliance Manager (PCM) · Facility PREA Compliance Manager/PREA Point Person · Facility Warden/Superintendent · Intermediate or Higher-Level Facility Staff

- Random Staff
- Random Inmates
- Inmates Who Identify as Lesbian, Gay, Bisexual, Transgender, or Intersex

Site Review Observations:

- During the site review, staff were routinely observed making cross-gender announcements when persons of the opposite gender entered inmate housing areas.
- Supervisory staff were observed conducting routine security checks within inmate housing areas. Cross-gender announcements and supervisory rounds, both unannounced rounds and scheduled rounds, were subsequently documented on the buildings' chronical housing logs.
- HCF documentation reflects that during the past twelve months, the facility has not had any cross-gender visual or body cavity searches of inmates.
- Privacy screens were noted in all shower areas and toilet areas.
- Privacy screens were located in all strip search areas.
- Observed routine pat frisks of random inmates.

Standard Subsections:

(a) Policy (DIR #4910) prohibits cross-gender strip or visual body cavity search of inmates except in exigent circumstances or by medical practitioners. Random staff interviews confirm that staff do not engage in such activities. Furthermore, all inmates interviewed noted that they had not, nor had witnessed any other inmate, being stripped or body cavity searched by a security staff member of the opposite gender.

(b) The HCF is a male facility. As there are no biological female inmates incarcerated at this facility, security staff always refrain from conducting cross-gender pat-down searches of female inmates even in exigent circumstances. As well, the facility has never denied any female inmate access to a regularly available program or out of cell activity.

(c) The agency does have policies requiring that all cross-gender strip and visual body cavity searches are documented (DIR #4910, DIR #2230, HSPM 1.37, HSPM 1.19). The facility has not engaged in any cross-gender strip searches or cross-gender body cavity searches of its male prisoners within the audit period. However, under exigent circumstances, should the need arise, all random staff interviewed understood that such action, while extremely unlikely, would require extensive justification. As the HCF does not have biological female inmates assigned, no such inmate has ever been subject to a cross-gender search.

(d) The HCF does have policies (DIR #2230, DIR #4001, DIR #4910) in place that allow 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. The facility does have policies (DIR #2230, DIR #4001, DIR #4910) that require staff of the opposite gender to announce their presence when entering an inmate housing unit. In speaking with agency staff, all staff members were aware of the agency's prohibition against cross-gender strip and visual body cavity searches. DIR #4001, Facility Administrative Coverage & Supervisory Rounds, requires all persons of the opposite gender to announce their presence upon entering an opposed gender housing assignment. All female staff interviewed did confirm their adherence to said policy. As well, the majority of inmates interviewed confirmed this statement. To ensure inmates are afforded sufficient modesty measures while in various stages of undress, privacy screens were observed in the shower and toilet areas.

(e) The DOCCS has policies (DIR #2230, DIR #4910, HSPM 1.37, HSPM 1.19) prohibiting the search of transgender inmates designed solely to determine inmate genital status. In interviewing staff, it was clearly expressed that if the gender of an inmate is unknown, conducting a strip search of the inmate would be inappropriate. It was generally expressed that to determine gender, staff would contact the medical department, their supervisor, or simply ask the inmate.

(f) Records reflect that 100% of HCF security staff have been trained on proper policy specific to conducting cross-gender inmate frisk searches and transgender inmate frisk searches in a professional and least intrusive manner as possible consistent with security needs. All random staff interviewed did affirm their understanding of agency policy prohibiting the search of any transgender or intersex inmates for the sole purpose of determining the inmate's genital status. DOCCS Health Appraisal #1.19 (9/3/21) specifies that "a facility shall not search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. If the inmate's genital status is unknown, it may be determined during the conversations with the inmate or by reviewing medical records. A medical practitioner may conduct a full physical examination of an inmate, including a transgender inmate, when relevant to the treatment of the patient. Such

an exam is to be conducted in private and with the patient’s consent. Findings are to be recorded in the Ambulatory Health Record” (p. 1). Policy (DIR #4910) provides clear instructions on how staff will perform searches of transgender inmates assigned to male correctional facilities. As well, training documentation provides clear demonstrations of proper search methods. Random security staff interviewed confirmed their understanding of how to conduct a proper search of transgender/ intersex inmates assigned to the HCF. Facility training rosters also reflect that all correctional staff assigned to the HCF have been trained on how to conduct searches in a professional and least intrusive manner as possible. During the site review, security staff were observed conducting pat frisks on a random basis in both a professional manner and in the least obtrusive manner possible consistent with security needs.

Reasoning & Findings Statement:

This standard requires that the agency place limits on cross-gender strip or cavity searches. The DOCCS has enacted policies prohibiting said searches in the absence of exigent circumstances. During the audit time frame, the ACT has not engaged a cross-gender strip or cavity search. However, in the event exigent circumstances require cross-gender strip or cavity searches, policy subsequently requires this search to be properly documented. Agency security staff are trained on the proper procedures to conduct frisk searches on transgender or intersex inmates, which requires said searches to be performed in a professional and least intrusive manner as possible. As well, the agency requires opposite gender staff to announce their presence upon entering inmate housing areas where persons may be in a state of undress. The HCF complies with all agency policies. As such, the HCF has met the standard as required.

115.16	Inmates with disabilities and inmates who are limited English proficient
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>Documents:</p> <ul style="list-style-type: none"> · DIR #2612, Incarcerated Individuals with Sensorial Disabilities, 2/15/23 · DIR #4490, Cultural and Language Access Service, 7/29/22 · NYDOCCS Sexual Victimization Prevention Policy Manual, Section 115.16,

2-15-22

- Contract #PS67902, Language Line Services, Inc.
- Form #4021-A, Draft Receipt, 04/22
- The Prevention of Sexual Abuse in Prison, What You Need to Know, Arabic, (03/22)
- The Prevention of Sexual Abuse in Prison, What You Need to Know, Bengali, (03/22)
- The Prevention of Sexual Abuse in Prison, What You Need to Know, English, (03/22)
- The Prevention of Sexual Abuse in Prison, What You Need to Know, French, (03/22)
- The Prevention of Sexual Abuse in Prison, What You Need to Know, Haitian Creole, (03/22)
- The Prevention of Sexual Abuse in Prison, What You Need to Know, Italian, (03/22)
- The Prevention of Sexual Abuse in Prison, What You Need to Know, Korean, (03/22)
- The Prevention of Sexual Abuse in Prison, What You Need to Know, Polish, (03/22)
- The Prevention of Sexual Abuse in Prison, What You Need to Know, Russian, (03/22)
- The Prevention of Sexual Abuse in Prison, What You Need to Know, Simplified Chinese, (03/22)
- The Prevention of Sexual Abuse in Prison, What You Need to Know, Spanish, (03/22)
- The Prevention of Sexual Abuse in Prison, What You Need to Know, Urdu, (03/22)
- The Prevention of Sexual Abuse in Prison, What You Need to Know, Yiddish, (03/22)

Interviews:

- Agency Head

- Agency PREA Coordinator
- Agency Director of PREA Compliance
- Regional Assistant Deputy Superintendent (ADS) PREA Compliance Manager (PCM)
- Facility PREA Compliance Manager/PREA Point Person
- Facility Warden/Superintendent
- Intermediate or Higher-Level Facility Staff
- Random Staff
- Inmates with Disabilities
- Inmates with Limited English Proficiency (LEP)

Site Review Observations:

- Correctional staff assigned to housing areas entered each area within the building to loudly announce inmate information, to include when female staffed entered the housing area.
- Handicap accommodations were easily recognizable and accessible throughout the facility.
- PREA Notices, as well as other advisement notices, were posted in languages spoken by significant portions of the inmate population.
- PREA informational pamphlets were also available to inmates in thirteen different languages: Arabic, Bengali, English, French, Haitian Creole, Italian, Korean, Polish, Russian, Simplified Chinese, Spanish, Urdu, and Yiddish.
- Language Access Lines are available for staff to communicate with inmates who do not speak English or for who require additional accommodations for effective communication.
- Staff translators were readily available as needed.

Standard Subsections:

- (a) The DOCCS has developed agency-wide policies (DIR #2612, DIR #4490) to enhance communication efforts with disabled inmates; such as those with hearing,

vision, speech, or other physical disabilities; psychiatric or other intellectual disabilities, or those with limited English proficiency; so as to provide said inmates with 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 (Sexual Victimization Prevention Policy Manual). PREA educational information is provided in writing, verbally, as well as presented in video format. The HCF also maintains a list of employees who are fluent in languages other than English. If inmates do not speak a language common to any HCF staff, the Language Access Line is used to translate PREA, as well other vital information.

When interviewing random staff, employees were aware of the need to obtain staff interpreters for sensitive security matters, such as PREA related investigations. In the event that staff translators were not available, most staff were cognizant of the Language Assistance Line. All staff were aware that other inmates could not be used to translate for any inmate during a sexual abuse/harassment investigation or incident. When speaking with disabled and LEP inmates, these persons stated that their inability to communicate or to speak English fluently has not prevented them from participating in any facility-based services, to include the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. These inmates all stated that either DOCCS has made accommodations for their disabilities or that their disabilities did not prevent them from participating in any facility-based services, to include the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment.

(b) The PREA informational brochure is printed in thirteen different languages: Arabic, Bengali, English, French, Haitian Creole, Italian, Korean, Polish, Russian, Simplified Chinese, Spanish, Urdu, and Yiddish. As well, per the PREA Coordinator, the PREA Informational video can be seen by inmates in these languages, along with being illustrated via closed captioning in any of those same languages. The Language Access Line can translate in these languages, as well as in other, less spoken languages. The PREA information videos are also gender specific.

(c) The DOCCS has developed agency-wide policies that prohibit the use of inmate interpreters or other types of inmate-based assistance in the transmission or subsequent investigation of security sensitive information, such as PREA related matters (Sexual Victimization Prevention Policy Manual). The agency has also developed agency-wide policies to enhance communication efforts with disabled inmates; such as those with hearing, vision, speech, or other physical disabilities; psychiatric or other intellectual disabilities (DIR #2612), or those with limited English proficiency (DIR #4490); so as to provide said inmates with an equal opportunity to directly participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment without the use of inmate interpreters or other types of inmate-based assistance. HCF staff are aware of

these agency policies and do not utilize inmate interpreters for security sensitive matters.

Reasoning & Findings Statement:

This standard seeks to empower all inmates with the right to be free from sexual abuse and sexual harassment. An essential component to that requirement is the ability to access PREA information, services, and support services. Inmates with disabilities; either cognitive, physical, or cultural, may require additional assistance in achieving said access. Hence, it is necessary for the agency to provide additional measures to ensure said inmates have equal access. The DOCCS recognizes that need and has gone above and beyond those standards by providing informational brochures in not only the most common spoken inmate languages, but also in lesser common languages. The HCF maintains sufficient stocks of PREA informational brochures in all printed languages to ensure their availability should it be required. Additionally, the HCF routinely stocks PREA informational brochures, as well as broadcasts PREA informational videos, in Spanish, the most commonly spoken language inside of HCF outside of English. The PREA video is also offered in less commonly spoken languages, to include closed captioning and sign language. Staff have been trained, and are provided continuous refresher training, in the management of inmates with sensorial disabilities, as well as in cultural awareness. Lastly, it should be noted that at no time during the audit time frame has HCF used inmate interpreters to help agency staff communicate with another inmate regarding security sensitive information. For these reasons, it is more than evident that the HCF exceeds in providing inmates with disabilities, as well as those with limited English proficiency, equal access to PREA related rights and support services.

115.17	Hiring and promotion decisions
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	Documents: <ul style="list-style-type: none">· DIR #2216, Fingerprinting/Criminal History Inquiry - New Employees and Contractors, 11/1/18· DIR #2216, Attachment A, Fingerprint Processing Chart, 11/1/18· DIR #2232, Non-Competitive and Labor Class Appointments, 11/5/20

- DIR #2012, Release of Employee Personal and Payroll Information, 10/7/19
- DIR #2112, Report of Criminal Charges, 1/3/23
- DOCCS Personnel Procedure Manual, #407 Civilian Promotions, 4/29/14
- DOCCS Personnel Procedure Manual, #407 Security Promotions, 4/29/14
- Form 1253, Personal History and Interview Record (4/13)
- Fair Chance Application Revisions, 7/15/15
- NYDOCCS Personnel Procedure Manual, #406A Recruitment Process, 4/8/16
- NYDOCCS Personnel Procedure Manual, #406A.1 Recruitment Process Checklist
- NYDOCCS Personnel Procedure Manual, #406A.2 Employment Telephone Verification (4/16)
- Agency memorandum, Employee Background Checks, 8/18/15
- HCF Employee Personal History and Interview Record, 1/25/23

Interviews:

- Agency PREA Coordinator
- Regional Assistant Deputy Superintendent (ADS) PREA Compliance Manager (PCM)
- Facility PREA Compliance Manager/PREA Point Person
- Facility Warden/Superintendent
- Administrative (Human Resources) Staff

Site Review Observations:

- Review of employee files
- Review of contractor files
- Review of HCF employee PREA training tracking spreadsheet

Standard Subsections:

(a) The DOCCS has developed extensive agency-wide policies and procedures (DIR #2216, DIR #2112, DIR #2012, Personnel Manual #406A, Personnel Procedure #407) that prohibit the hiring or promotion of employees and contracted workers, as well as the use of volunteers, who have engaged in sexual abuse, been convicted of engaging or attempting to engage in a sexual activity with inmates, or been civilly or administratively adjudicated to have engaged in a sexual activity with inmates while in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution. The agency also has policies that stipulate prior to all hiring and promotional decisions of employees and contract workers, any incidents of sexual harassment will be considered. Prior to hiring any new employee or contract worker at the facility level, HCF Human Resource staff ensure that criminal background checks have been conducted on the prospective employee. As well, as required by policy, Human Resource staff ensure that all previous institutions of employment are contacted to determine if candidates have any previously substantiated claims of sexual abuse or resigned during a pending investigation of such claims. Conversely, policy also requires that the HCF cooperate with other correctional and law enforcement agencies to ensure that accurate information regarding PREA related employment laws are effectively shared between agencies. Current documentation was reviewed while the verification process was explained.

(b) DOCCS policy (Personnel Procedure #407) requires the facility to consider any incidents of sexual harassment in determining whether to hire/promote anyone who may have contact with inmates. Likewise, in speaking with the HCF Human Resource representative, agency policy requires Human Resource staff to also verify contractor employment history. Current documentation was reviewed while the verification process was explained.

(c) Before hiring new employees, policy (DIR #2216) requires the agency to perform a criminal background records check. Policy (Personnel Procedure Manual #406A) also requires the agency to conduct checks with previous employers for any applicant previously employed by a correctional facility. In the past 12 months, the HCF has received a total of 16 newly hired employees. Of those, 9 were hired at HCF, and thus the HCF was responsible for, and did perform, criminal background checks on all 9 of those prospective employees. During the on-site audit, current documentation was reviewed while the verification process was explained.

(d) Agency policy requires that prior to enlisting the services of any contractor who may have contact with inmates, the agency performs a criminal background records check on said contractor. In the past 12 months, the HCF has received a total of 21

newly hired contractor. As such, the HCF was responsible for, and did perform, a criminal background check on all 21 prospective contractors. During the on-site audit, HCF Human Resources staff provided evidence of criminal background checks being performed for these contractors.

(e) Once employed or otherwise contracted to work with the DOCCS, agency policy requires that their fingerprints are kept on file so that the agency receives automated notifications of any subsequent arrests. This allows that the agency is immediately notified if any persons employed or otherwise contracted to work with the DOCCS are suspected of having engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution. As well, employees have an affirmative duty to report any contact they may have had with other law enforcement agencies and to report any sexual misconduct they may have been found guilty of at any other institution. Employees are also made aware that failing to provide this information, or providing false information regarding sexual misconduct, is grounds for employee discipline, to include termination of employment.

(f) All applicants, as well as current employees, are required to submit a Personal History Questionnaire form. The document directly asks employees who may have contact with inmates to disclose any previous sexual misconduct that may have occurred in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution. Additionally, the DOCCS does impose a continuing affirmative duty on all employees to disclose any misconduct found within Section A of this standard.

(g) Agency policy expressly advises employees that material omissions or providing false information regarding the aforementioned misconduct is grounds for termination.

(h) Agency policy, as a function of state law (Personal Privacy Protection Law), does not allow the DOCCS to release information concerning any employment record to private employers without the employee's written consent. This information may, however, be provided to State agencies without the former employee's authorization.

Reasoning & Findings Statement:

This standard requires the agency to consider the sexual safety of inmates in all hiring and promotion decisions within the agency. The agency has numerous policies in place to ensure that end. The facility also demonstrated a series of processes that staff engage to ensure a checks and balances of policy adherence. Review of

	<p>employee and contractor files reflect that the HCF Human Resource Department is in strict compliance with agency policy. As such, the HCF clearly exceeds the requirements of this standard.</p>
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115.18	Upgrades to facilities and technologies
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Documents:</p> <ul style="list-style-type: none"> · DIR #3053, Alterations/Construction Request, 4/22/19 · Form #1612, Alterations/Construction Request (4/15) · HCF Form #1612, Alterations/Construction Request, 3/1/23 <p>Interviews:</p> <ul style="list-style-type: none"> · Agency Head · Agency PREA Coordinator · Agency Director of PREA Compliance · Regional Assistant Deputy Superintendent (ADS) PREA Compliance Manager (PCM) · Facility PREA Compliance Manager/PREA Point Person · Facility Warden/Superintendent <p>Site Review Observations:</p> <ul style="list-style-type: none"> · Observed video monitoring technologies present within the facility. <p>Standard Subsections:</p>

(a) The HCF has made modifications to the facility since its last PREA audit; namely, the expansion of the Department of Motor Vehicles Non-Drives ID Program. Per the ADS PCM, in modifying this area, specific consideration was given to ensure the sexual safety of incarcerated individuals. Review of documentation related to the modification further supports this assertion.

(b) The HCF has not installed or updated the video monitoring system or other monitoring technology since the last PREA audit. However, the aforementioned expansion project will also provide for an increase in video surveillance technology.

Reasoning & Findings Statement:

Within the audit time frame, HCF has made substantial modifications to the existing structure. In doing so, specific consideration was given to the effects of this modification for the sexual safety of incarcerated individuals. In speaking with the HCF Superintendent, the importance of modesty measures in promoting an environment of sexual safety is of critical importance. As well, it was also noted that in considering the annual staffing review, the use of video monitoring and other electronic surveillance means are continuously examined in light of how such technologies would affect the sexual safety of incarcerated individuals and staff assigned to the HCF. With this in mind, the HCF complies with this standard.

115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents:</p> <ul style="list-style-type: none"> · DIR #4027, Sexual Victimization Prevention & Response, 7/21/22 · DIR #0700, Office of Special Investigations, 9/20/22 · NYDOCCS Sexual Victimization Prevention Policy Manual, Section 115.65, 2-15-22 · New York State Sexual Assault Victim Bill of Rights

- Health Service Policy Manual #1.60, Sexual Assault, 7/22/22
- HCF FOM #6.001, Coordinated Response to Reports of Sexual Victimization, 1/31/23

Interviews:

- Agency PREA Coordinator
- Agency Director of PREA Compliance
- Regional Assistant Deputy Superintendent (ADS) PREA Compliance Manager (PCM)
- Facility PREA Compliance Manager/PREA Point Person
- Facility Warden/Superintendent
- Investigative Staff
- Random Staff
- Medical Staff
- SAFE and/or SANE Staff
- Inmates Who Reported Sexual Abuse

Site Review Observations:

- Reviewed HCF Sexual Abuse Investigations onsite.

Standard Subsections:

(a) Agency policy (NYDOCCS Sexual Victimization Prevention Policy Manual, DIR #4027, DIR #0700, HCF FOM #6.001), requires that the Office of Special Investigations follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceeds and criminal prosecutions. If needed, the New York State Police, Bureau of Criminal Investigations may also assist in criminal investigations as necessary.

(b) HCF OSI investigators and SAFE/SANE examiners in New York State hospitals utilize the U.S. Department of Justice's Office on Violence Against Women publications; namely, A National Protocol for Sexual Assault Medical Forensic Examination, Adults/Adolescents as the evidence collection protocol manual.

(c) In accordance with agency protocol, the HCF does ensure that all inmates are given access to forensic medical examinations without cost. These exams are performed at an outside facility by qualified SAFE/SANE hospital nursing staff. As SAFE/SANE hospital staff are either on duty or on call 24 hours a day, seven days a week, the examination will always be performed by a qualified medical practitioner. As its primary options, the facility utilizes the Columbian Memorial Hospital and the Samaritan Hospital. In the past 12 months, the HCF has not been required to facilitate any such forensic medical examinations.

(d) The agency does attempt to make a victim's advocate available for inmate support. Specifically, as confirmed by SAFE/SANE hospital staff, once HCF notifies the outside hospital that an inmate is in route for a forensic exam, the medical center provides a victim advocate for support services as needed.

(e) In accordance with policy, and as requested by the victim, the advocate may remain with the inmate through the forensic medical examination process and investigatory interviews. As requested, this person may provide emotional support, crisis intervention, information, and referrals.

(f) The agency is responsible for investigating allegations of sexual abuse.

(g) The auditor is not required to audit this provision.

(h) A qualified staff member may be used as a victim's advocate if no other rape crisis center advocate can be located. In this event, only a qualified agency member, who has been screened for appropriateness to serve in this role and has received education concerning sexual assault and forensic examination issues in general, may service in this capacity.

Reasoning & Findings Statement:

	<p>This standard concerns evidence protocol and forensic medical examinations. During the past 12 months, the HCF has not been required to initiate the evidence protocol and forensic medical examination process at any time. Nonetheless, the facility is very much aware of the policies and has practices in place should the need arise at some future point. As such, the HCF has met the requirements of the provisions as established within the standard.</p>
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115.22	Policies to ensure referrals of allegations for investigations
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Documents:</p> <ul style="list-style-type: none"> · DIR #4027, Sexual Victimization Prevention & Response, 7-21-22 · DIR #0700, Office of Special Investigations, 9/20/22 · NYDOCCS Sexual Victimization Prevention Policy Manual, 2-15-22 · HCF Monthly Report of Sexual Victimization Summary, 10/22 <p>Interviews:</p> <ul style="list-style-type: none"> · Agency Head · Agency PREA Coordinator · Agency Director of PREA Compliance · Regional Assistant Deputy Superintendent (ADS) PREA Compliance Manager (PCM) · Facility PREA Compliance Manager/PREA Point Person · Facility Warden/Superintendent · Investigative Staff · Medical Staff

Site Review Observations:

- Reviewed investigative files with facility staff.
- Reviewed investigative files with OSI staff.

Standard Subsections:

(a) Policy (Sexual Victimization Prevention Policy Manual, DIR #4027, DIR #700, HCF FOM #6.001) requires that administrative or criminal investigations are completed for all allegations of sexual abuse and sexual harassment. Within the last 12 months, the HCF has received a total of three (3) sexual abuse and sexual harassment allegations, with two (2) of those investigations being referred for additional criminal investigations. At the time of the audit, all three (3) of those investigations were reviewed as a function of the audit process.

(b) The DOCCS Sex Crimes Division, Office of Special Investigations (OSI), is an internal law enforcement agency with legal authority to conduct criminal investigations. The DOCCS has, in fact, published this policy, as well as the criminal investigation process, on the agency website. All referrals to the OSI are documented by the agency.

(c) In accordance with Directive #0700, Office of Special Investigations (OSI), and the DOCCS PREA Coordinator, "the Acting Commissioner of the New York State Department of Corrections and Community Supervision (DOCCS) has delegated the authority to conduct administrative and criminal investigations to the Office of Special Investigations (OSI) in accordance with Corrections Law § 112 and Directive #0700 Office of Special Investigations (OSI). OSI works cooperatively with New York State Police (NYSP), Bureau of Criminal Investigations (BCI) in the investigations of reported incidents of staff-on-inmate and inmate-on-inmate sexual abuse that may involve criminal conduct. DOCCS has not relinquished this authority to any separate activity."

(d) The auditor is not required to audit this provision.

(e) The auditor is not required to audit this provision.

	<p>Reasoning & Findings Statement:</p> <p>This standard ensures proper referrals of allegations are made for further investigations. The DOCCS does have appropriate policies in place mandating referrals in specific instances. In interviewing HCF staff, along with OSI investigators, it is clear that HCF staff refer all required investigations to OSI for further processing in accordance with policy. Additionally, both HCF and the OSI staff have provided sufficient documentation to evidence the facility's adherence to agency protocol. As such, the HCF complies in all material ways with the standard for the relevant review period.</p>
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115.31	Employee training
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>Documents:</p> <ul style="list-style-type: none"> · DIR #4027, Sexual Victimization Prevention & Response, 7-21-22 · NYDOCCS Employee Training Manual, Subject: 0.100, Frequency Training Chart and Training Bulletins, 4/15/22 · NYDOCCS Employee Training Manual, Subject 7.000, 40 Hour Orientation/Initial Employee Training, 8/19/22 · NYDOCCS Employee Training Manual, Subject 7.100, Employee Familiarization, 2/28/22 · NYDOCCS Annual Training Bulletins, 7/20/22 · NYDOCCS Memo: Policies and Standards Generally Applicable to All Employees, 7/6/22 · NYDOCCS Commissioner Email Advisement, Policy on the Prevention of Sexual Victimization (Revised), 8/19/22 · NYDOCCS Memo: Policy on the Prevention of Sexual Victimization (Revised), 8/19/22 · NYDOCCS Correction Officer, Recruit Training Catalog of Courses, 4/15/22 · NYDOCCS Preventing Sexual Misconduct and Saving Careers, PREA Refresher Training, 3/9/22

- NYDOCCS Report of Training Form: Sexual Abuse Prevention and Response, PREA (2/22)
- NYDOCCS Report of Training Form: Sexual Abuse Prevention and Response, PREA Refresher (2/22)
- NYDOCCS Report of Training Form: Sexual Abuse Prevention and Response, PREA Introduction/Transfer (2/22)
- NYDOCCS Report of Training Form: Sexual Abuse Prevention and Response, PREA Training for Medical and Mental Health Providers (2/22)
- NYDOCCS Sexual Abuse Prevention and Response, PREA Refresher Training, 1/13/20
- NYDOCCS Agency Memorandum, Sexual Abuse Prevention and Response Training, 4/8/15
- Albany Training Academy, Sexual Abuse Prevention and Response Training Materials/Slides, 8/15
- Albany Training Academy, Sexual Abuse Prevention and Response Pre/Post Test, 8/15
- NYDOCCS Sexual Abuse Prevention and Response, PowerPoint Training, Male
- NYDOCCS Sexual Abuse Prevention and Response, PowerPoint Training, Female
- HCF Training Roster, PREA Refresher, Civilians, 6-30-23
- HCF Training Roster, PREA Refresher, Correctional Officers, 6-30-23
- HCF Training Roster, PREA Refresher, Supervisors, 6-30-23
- HCF Training Roster, Preventing Sexual Abuse, Civilians, 6-30-23
- HCF Training Roster, Preventing Sexual Abuse, Correctional Officers, 6-30-23
- HCF Training Roster, Preventing Sexual Abuse, Supervisors, 6-30-23
- HCF Report of Training Form, Sexual Abuse Prevention and Response, PREA Refresher, nd
- HCF Report of Training Form, Sexual Abuse Prevention and Response, PREA Refresher, 5/22/22
- HCF Report of Training Form, Sexual Abuse Prevention and Response, PREA Refresher, 5/24/22 HCF Report of Training Form, Sexual Abuse Prevention and Response, PREA Refresher, 9/1/22
- HCF Report of Training Form, Sexual Abuse Prevention and Response, PREA Refresher, 9/7/22

Interviews:

- Agency PREA Coordinator
- Agency Director of PREA Compliance
- Regional Assistant Deputy Superintendent (ADS) PREA Compliance Manager (PCM)
- Facility PREA Compliance Manager/PREA Point Person
- Facility Warden/Superintendent
- Administrative (Human Resources Staff)
- Random Staff

Site Review Observations:

- Coordinated employee and contractor training file completion reviews with randomly selected staff, contractors, and volunteers interviewed.

Standard Subsections:

(a) Policy (DIR #4027) requires all employees to be fully trained on the agency's zero-tolerance policy for sexual abuse and sexual harassment. As verified by Human Resource staff, such training is initially performed as a function of the hiring process. This Sexual Abuse Prevention and Response training is a comprehensive analysis of state laws and PREA standards. A review of training curriculum for this class reflects the agency's zero-tolerance policy for sexual abuse and sexual harassment, and discussion on how employees may fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures. Employees are also informed that inmates have a right to be free from sexual abuse and sexual harassment, to be free from retaliation for reporting said abuse and harassment, the dynamics of sexual abuse/harassment, reactions to sexual abuse/harassment, how to detect and respond to signs of threatened and actual sexual abuse, how to avoid inappropriate relationships with inmates, how to comply with relevant mandatory reporting laws specific to reporting abuse to outside authorities, and how to communicate effectively and professionally with inmates; including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming

inmates.

(b) Training curriculum reviews demonstrate that the material is appropriate for the gender of inmates at the employees' facility. As well, agency policy (Employee Training Manual, Subject 7.100, Employee Familiarization) requires that "All transferees shall receive familiarization on compliance with PREA and the Department's Sexual Abuse Prevention and Response procedures. Such familiarization training shall be tailored to the gender of the inmates at the facility, including addressing gender dynamics for staff who are transferring from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa." A review of the HCF PREA Training Roster indicates receipt and subsequent gender-based training of all transferred staff from opposite gender units.

(c) A review of HCF employee training rosters reflects that all actively employed staff have received their initial PREA training, as well as continued training as appropriate based on agency policy (Employee Training Manual, Subject: 0.100, Frequency Training Chart and Training Bulletins). Following this initial training, subsequent refresher trainings are provided to staff at mandatory time intervals of at least every two years. This training includes viewing the agency's many PREA related training videos. A review of the HCF PREA Training Roster reflects initial training and subsequent training due dates schedules have all been maintained.

(d) All training is documented via the HCF Report of Training Form, which is specifically tailored to the training curriculum being provided.

Reasoning & Findings Statement:

This standard relates to employee training. The agency has clearly established training expectations and well-developed training curriculums. The DOCCS provides a series of well-made PREA related training videos, which are updated on a regular basis to remain relevant for staff. In fact, the DOCCS has created a new 2022 series of PREA refresher training videos that uses new curriculum and materials to address the current training needs of DOCCS staff. The HCF maintains compliance with those imperatives. All training is properly documented within employee files. During staff interviews, all employees affirmed their having received significant amounts of training as related to the PREA standards. When asked the series of questions noted within Subsection A of this standard, all staff knew and understood their responsibilities within the agency's zero-tolerance policy. Some staff readily produced their personal PREA information cards that were carried on their person as a function of their uniforms. As such, it is absolutely obvious that the agency, and by extension,

	that the HCF places a premium on employee training. Unquestionably, the HCF has exceeded the requirements of this standard.
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115.32	Volunteer and contractor training
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>Documents:</p> <ul style="list-style-type: none"> · DIR #4027, Sexual Victimization Prevention & Response, 7-21-22 · DIR #4071, Guidelines for Construction Projects, 3/10/23 · Form #4071A, Guidelines for Construction Projects, 01/21 · Employee Training Manual, #7.150, Orientation Program for Per Diem and Non-Departmental Employees, 8/19/22 · DIR #4750, Volunteer Services Program, 12/21/22 · Form #4750A, Volunteer Endorsement Letter, 12/2022 · Form #4750B, Volunteer Registration Process Chart, 06/20 · Form #4750C, Standards of Conduct for Volunteers within the New York State Department of Corrections and Community Supervision, 12/22 · Form #4750D, Required Training for Various Categories of Regular Ongoing Volunteers, 06/20 · Form #MFVS3087, Acknowledgement of Standards of Conduct for Volunteers and All Applicable Policies, 12/22 · HCF Form 4071A, Guidelines for Construction Projects, 11/22/22 · HCF Form 4071A, Guidelines for Construction Projects, 4/24/23 · HCF Form 4071A, Guidelines for Construction Projects, 6/7/23 <p>Interviews:</p> <ul style="list-style-type: none"> · Agency PREA Coordinator

- Agency Director of PREA Compliance
- Regional Assistant Deputy Superintendent (ADS) PREA Compliance Manager (PCM)
- Facility PREA Compliance Manager/PREA Point Person
- Facility Warden/Superintendent
- Administrative (Human Resources Staff)
- Medical Staff
- Contractors Who May Have Contact With Inmates

Site Review Observations:

- Review of HCF contractor worker standard of conduct training forms.
- Review of HCF PREA Training Roster for Contract Workers

Standard Subsections:

(a) Policy (DIR #4027, DIR #4750) requires that “contractors and contract employees, volunteers, and interns receive orientation and periodic in-service training consistent with their level of inmate contact relating to the prevention, detection, and response to inmate-on-inmate sexual abuse and sexual harassment.” Additionally, agency policy (DIR # 4750) states that “All applicants must acknowledge that they understand the zero-tolerance policy regarding sexual abuse and sexual harassment and how to report such incidents under DOCCS’ sexual abuse and sexual harassment prevention, detection, and response policies and procedures.” At the time of the audit, the HCF did not have any (0) volunteers working within the facility and thirty (30) contract workers who could have contact with inmates. Of those, 100% of the persons entering the facility have received appropriate PREA training dependent on their level of contact with inmates within the facility.

(b) During the on-site audit, two contractors were interviewed. When interviewed, these persons stated that they had been made aware of the agency’s zero-tolerance policy regarding sexual abuse and sexual harassment. They further stated that if the need arose, they understood the reporting process. Specifically, they could report an incident of sexual abuse or sexual harassment to their supervisors or to a security staff member.

(c) Per agency policy, volunteers and contractors are required to receive PREA training prior to their being able to volunteer/work within the facility. After receipt of training, volunteers and contractors sign an acknowledgement form indicating the date and that they understood the training that they had received. The HCF then maintains a copy of all training files belonging to both volunteers and contractors. Several such files were randomly reviewed for contractors while on-site as part of the auditing process and found to be within compliance. The HCF also maintains PREA Training Rosters for Contract Workers as a quick reference to promote scheduled and regular refresher trainings as required. As well, during interviews with contract workers, all said persons stated that they had received training specific to sexual abuse and sexual harassment of incarcerated persons prior to the start of their service at the facility. As the facility did not have any volunteers currently operating within the facility, there weren't any such training files to review specific to that category.

Reasoning & Findings Statement:

The agency requires all volunteers and contractors to receive formal training on the agency's zero-tolerance policy for sexual abuse and sexual harassment. In this, volunteers and contractors must be provided sufficient notice of the agency's zero-tolerance policy of sexual abuse and sexual harassment. As well, said persons must be informed of how to report any knowledge they may have regarding such abuse. Lastly, the standard requires that the agency maintain appropriate training records to verify that volunteers and contractors understood the training that they had received. Currently, the HCF does not have any volunteers operating within the facility. However, as with employee training, the HCF has done an excellent job of ensuring all contractors conducting business on the facility have received, and subsequently documented, their PREA trainings. In speaking with contractors present during the onsite portion of the audit, it was clear these people understood the professional boundaries between themselves and the inmates assigned to the institution. When interviewed, said contractors were also able to discuss the agency's PREA expectations as they relate to their individual roles within the prison, as well as discuss the value of the reporting process in an intelligible manner.

115.33	Inmate education
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	Documents:

- DIR #2612, Incarcerated Individuals with Sensorial Disabilities, 2/15/23
 - DIR #4027, Sexual Victimization Prevention & Response, 7-21-22
 - DIR #4021, Inmate Reception/Classification, 1/23/19
 - DIR #4490, Cultural and Language Access Services, 7/29/22
 - NYDOCCS Sexual Victimization Prevention Policy Manual, Section 115.33, 7-11-22
 - NYDOCCS Prevention of Sexual Abuse Brochures Reference Card, 6/22
 - PREA Sexual Abuse Prevention Orientation Outline, 5/5/22
 - Transitional Services, Phase I Program Manual, 2021
 - Agency Memorandum, PREA Inmate Orientation Film Implementation, 6/18/15
 - PREA Prisons and Jail Standards Compliance Checklist
- Form 4021A, Draft Receipt, 04/2022
- Form 115.33, Facility Report of Incarcerated Individual Training Participation, Prevention of Sexual Abuse – PREA, 04/22
 - DC118, Report Sexual Abuse, 06/13
 - The Prevention of Sexual Abuse in Prison, What You Need to Know, Arabic, (03/22)
 - The Prevention of Sexual Abuse in Prison, What You Need to Know, Bengali, (03/22)
 - The Prevention of Sexual Abuse in Prison, What You Need to Know, English, (03/22)
 - The Prevention of Sexual Abuse in Prison, What You Need to Know, French, (03/22)
 - The Prevention of Sexual Abuse in Prison, What You Need to Know, Haitian Creole, (03/22)
 - The Prevention of Sexual Abuse in Prison, What You Need to Know, Italian, (03/22)
 - The Prevention of Sexual Abuse in Prison, What You Need to Know, Korean, (03/22)
 - The Prevention of Sexual Abuse in Prison, What You Need to Know, Polish, (03/22)

- The Prevention of Sexual Abuse in Prison, What You Need to Know, Russian, (03/22)
- The Prevention of Sexual Abuse in Prison, What You Need to Know, Simplified Chinese, (03/22)
- The Prevention of Sexual Abuse in Prison, What You Need to Know, Spanish, (03/22)
- The Prevention of Sexual Abuse in Prison, What You Need to Know, Urdu, (03/22)
- The Prevention of Sexual Abuse in Prison, What You Need to Know, Yiddish, (03/22)
- Zero-Tolerance Poster, English, Version 1
- Zero-Tolerance Poster, Spanish, Version 1
- Zero-Tolerance Poster, English, Version 2
- Zero-Tolerance Poster, Spanish, Version 2
- Zero-Tolerance Poster, English, Version 3
- Zero-Tolerance Poster, Spanish, Version 3
- Zero-Tolerance Poster, English, Version 4
- Zero-Tolerance Poster, Spanish, Version 4
- Zero-Tolerance Poster, English, Version 5
- Zero-Tolerance Poster, Spanish, Version 5
- DC 144L, How to Report Sexual Abuse and Harassment or Get Emotional Support, English, 3/22
- DC 144L, How to Report Sexual Abuse and Harassment or Get Emotional Support, Spanish, 3/22
- HCF The Prevention of Sexual Victimization in Prison, What You Need to Know, English
- HCF The Prevention of Sexual Victimization in Prison, What You Need to Know, Spanish
- HCF Incarcerated Individual Orientation Handbook, 2023
- HCF Incarcerated Individual Orientation Handbook, 2021
- HCF PREA Catch-Up Training, 10/28/16

- HCF Form 115.33, Facility Report of Incarcerated Individual Training Participation, Prevention of Sexual Abuse - PREA, 10/21/22
- HCF Form 115.33, Facility Report of Incarcerated Individual Training Participation, Prevention of Sexual Abuse - PREA, 11/16/22
- HCF Form 115.33, Facility Report of Incarcerated Individual Training Participation, Prevention of Sexual Abuse - PREA, 2/2/23

Interviews:

- Agency PREA Coordinator
- Agency Director of PREA Compliance
- Regional Assistant Deputy Superintendent (ADS) PREA Compliance Manager (PCM)
- Facility PREA Compliance Manager/PREA Point Person
- Intake Staff
- Staff Who Perform Screening for Risk of Victimization and Abusiveness
- Random Inmates
- Inmates with Disabilities and LEP Inmates

Site Review Observations:

- Observed the inmate reception process, known as Draft Processing
- Observed the PREA Risk Screening Process
- Observed PREA informational postings in Inmate Housing, Education, Library, Law Library, and other areas of high traffic
- Observed a variety of PREA related materials and information available for inmate use within the Library and Law Library areas
- Observed education video shown to incarcerated individuals during the Draft/Orientation process.

Standard Subsections:

(a) Policy (DIR #4027, Sexual Victimization Prevention Policy Manual) requires that upon receipt into the facility, inmates shall receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment. Inmates will also be informed of reporting mechanisms to expose incidents or suspicions of sexual abuse and harassment. They will then be provided with, and must sign to receive, as copy of the Facility Inmate Orientation and a gender specific PREA Sexual Abuse Brochure. The PREA Brochure is available in thirteen different languages: Arabic, Bengali, English, French, Haitian Creole, Italian, Korean, Polish, Russian, Simplified Chinese, Spanish, Urdu, and Yiddish. Within the past 12 months, the HCF has received 278 incarcerated individuals during the Intake process. Of those inmates, 100% were provided the initial PREA screening, informational brochures, and general overview of the law. Of those 278 persons, 169 individuals remained at the facility for over 30 days. Of which, 100% received a more in-depth, comprehensive PREA training during the Inmate Orientation Process, which is conducted weekly.

(b) As noted by Intake (Draft) staff, incarcerated persons are immediately provided a brief summary of the PREA standards upon their initial arrival to the facility. Inmates are then provided a comprehensive seminar detailing key points of the process generally within one week of intake, but no more than two weeks. Every inmate transferring into HCF will participate in facility orientation, including a comprehensive component on sexual abuse and sexual harassment prevention and response. If this is the inmate's first general confinement facility following admission to New York State DOCCS, he will also participate in the Transitional Services Phase 1 Program that includes an extensive module on PREA and sexual safety. The information is given as both a video presentation and as an interactive session. As a function of this training, inmates are informed of their rights to be free from sexual abuse and sexual harassment, to be free of retaliation for reporting such actions, as well as the agency's responsibilities and procedures upon receiving notification of such allegations (DIR #4027). The Transitional Services Phase 1 module spends more time exploring these topics. The session is conducted by trained Inmate Program Associates (peer educators) in conjunction with a staff facilitator. The class uses the orientation film, a series of scenarios, and a guided discussion with the stated objectives to gain awareness and understanding of sexual abuse and sexual harassment, to understand the dynamics and prevalence of sexual abuse, and to learn key facts about sexual abuse and sexual harassment.

(c) Per the Agency PREA Coordinator, and as documented by agency memorandum (Inmate Orientation Film Implementation), beginning July 20, 2015, all inmates incarcerated within the DOCCS were required to watch the newly released PREA training video entitled Ending Sexual Abuse Behind the Walls: An Orientation (2015). This training was completed by HCF on October 28, 2016. All inmates subsequently

received into the DOCCS have been required to watch the same, or subsequent versions of said film during reception. Upon any transfer to another facility with the DOCCS, inmates are required to again watch a sexual abuse prevention video as part of a facility orientation program. The New York State DOCCS, despite having largely consistent policies across the system, requires that facility orientation, including comprehension PREA education, must be provided following each transfer. According to the Agency PREA Coordinator, this ensures that each facility can reinforce its role in supporting the Agency's zero tolerance policy toward all forms of sexual victimization. The facility also provides local information including identifying its ADS PCM and PREA Point Person, providing updated information on the Rape Crisis Hotline, and the designated local partner rape crisis program for emotional support and victim advocacy services. In this manner, all inmates currently incarcerated within the DOCCS, and certainly within the HCF, have been afforded the opportunity for a comprehensive PREA education.

(d) Similar to the PREA Brochures, the above referenced film is available in eight different languages (Chinese, English, Korean, Haitian-Creole, Italian, Polish, Russian, and Spanish), as well as with closed captioning in any of these languages. PREA informational posters are available in large print for the visually impaired. Translation services are available for inmates who don't speak any of the above languages. As well, per policy (DIR #2612, DIR #4490), the agency will provide reasonable accommodations to all inmates in need of ADA accommodations, both physical and cognitive, to ensure said inmates have equal opportunity to benefit from the PREA standards.

(e) In accordance to policy (DIR #4021), at Intake, inmates are provided with the PREA Brochure entitled: The Prevention of Sexual Abuse in a Prison. After discussing key points within the brochure, inmates are required to document their receipt of such via the #4021A Draft Receipt form. At Orientation, inmates are then required to participate in an orientation class that includes guided discussions concerning the DOCCS zero tolerance policy concerning sexual abuse and sexual harassment and uses a film specific to sexual abuse prevention to help facilitate the training. This discussion is typically led by the Regional Assistant Deputy Superintendent (ADS) PREA Compliance Manager (PCM), the PREA Point Person or, if said staff members are not unavailable, by a Transitional Services Orientation Rehabilitation Coordinator (ORC). Along with providing relatable inmate testimonies validating the use of the PREA reporting system, this video also explains how to use the PREA hotline for emotional support services. Participation in this orientation program is subsequently documented on Form #115.33, Report of Inmate Training Participation. It should further be noted that this video, tailored for either male or female inmates, is prominently available for public viewing on the New York State DOCCS web site.

(f) While inmates are provided personal copies of the DOCCS Inmate Orientation

Handbook (also available in English and Spanish) and the PREA Brochure, both of which contain a wealth of information related to rape counseling support services and the PREA standards, additional information regarding such is also available. Upon receipt into the HCF, inmates are provided a facility-based orientation handbook. Throughout the facility, as well as adjacent to all inmate phones, PREA informational posters are posted (in both English and Spanish). There are also posters providing the names and contact information for Rape Crisis Centers that provide recovery support services to incarcerated inmates. Within the General Library and the Law Library, there are additional PREA related resources available.

Reasoning & Findings Statement:

This standard works to ensure that incarcerated persons are cognizant of the agency's zero-tolerance policy toward sexual abuse and sexual harassment, as well as have subsequent access to, and can effectively utilize, the PREA reporting mechanism. PREA training is commonly available to inmates in over a dozen languages. As well, printed material is available in at least that many languages. In speaking with inmates assigned to the HCF, all inmates stated that they were aware of PREA and its purpose within the facility. While inmates were collectively aware of the policy and their rights to varying degrees, all incarcerated persons interviewed were aware of at least one, but generally more, methods by which they could report allegations of sexual abuse or sexual harassment.

115.34 Specialized training: Investigations	
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>Documents:</p> <ul style="list-style-type: none"> · OSI, Sex Crimes Division, Investigations Training PowerPoint (8/24/22) · NIC Investigating Sexual Abuse in a Confinement Setting Course Overview · Investigating Physical and Sexual Abuse in Institutional Settings Syllabus (11/14/16) · Introduction to the Forensic Experiential Trauma Interview Course Overview, 2019 · NYDOCCS Report of Training Form, Investigating Sexual Abuse in Confinement

Setting, All Agency Investigators, November 14-16, 2016

Interviews:

- Agency PREA Coordinator
- Agency Director of PREA Compliance
- Regional Assistant Deputy Superintendent (ADS) PREA Compliance Manager (PCM)
- Facility PREA Compliance Manager/PREA Point Person
- Facility Warden/Superintendent
- Administrative (Human Resources Staff)
- Investigative Staff

Site Review Observations:

- Reviewed supplemental OIS policy documentation
- Reviewed agency training records documenting OSI training curriculums
- Review numerous training certificates related to sexual abuse investigations and interview techniques

Standard Subsections:

(a) Per Investigative Staff, all Office of Special Investigations (OSI) investigators have received specialized training in excess of the generalized sexual abuse and sexual harassment training provided to other staff. Among other classes, OSI investigators participate in the National Institute of Corrections PREA Investigating Sexual Abuse in a Confinement Setting course and Forensic Experiential Trauma Interview training. In interviewing the OSI investigator, said staff confirmed participation in numerous related courses while attending the Office of Special Investigations Investigator School, as well as classes subsequent said school. Additionally, training curriculums, employee training certifications, as well as completed training rosters, provided additional documentation to support facility compliance.

(b) The training curriculums associated with additional OSI investigator classes provided at the Office of Special Investigations Investigator School reflect that OSI investigators also receive training on proper interview techniques for speaking with sexual abuse victims, the proper use of Miranda and Garrity warnings, sexual abuse evidence collection within a confinement setting, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. In August of 2019, OSI staff completed training in Introduction to the Forensic Experiential Trauma Interview, an interview methodology driven by the neurobiology of trauma and memory that provides interviewers with a framework to maximize the opportunities for information collection about an individual's high stress or traumatic experiences in a neutral, equitable, and fair manner. In speaking with OSI staff, said staff confirmed their attendance of such trainings. As well, training certifications and completed training rosters further verify that OSI staff participate in these trainings.

(c) The agency maintains documentation that agency investigators have completed the required specialized training related to sexual abuse investigations. A review of training certifications and completed training rosters confirms that such documentation is maintained within agency files for all 28 investigators currently employed by the agency.

(d) The auditor is not required to audit this provision.

Reasoning & Findings Statement:

This standard works to ensure that persons investigating allegations of sexual abuse and sexual harassment have been sufficiently trained in related procedural and due process requirements necessary for both administrative prison hearings and for federal or state judiciary proceedings. The New York DOCCS has a training schedule in effect to ensure OSI investigators receive all required trainings in a timely manner. The Office of Special Investigations Investigator School has also developed meaningful curriculum to facilitate course materials. OSI staff are required to attend both general PREA training, as well as PREA trainings specific to conducting investigations of sexual victimization in a confinement setting. In addition, DOCCS has exceeded the requirements of this standard by having multiples of their investigators certified as Police Crime Scene and Evidence Specialists, able to photograph and process a crime scene for forensic evidence. Also, DOCCS recently launched a new OSI training protocol that includes compassion for, and understanding of, victim trauma as it relates to forensic interviewing processes. OSI staff affirmed that they had received sufficient training to confidently conduct sexual abuse investigations in a confinement setting. Agency documentation verified that

	OSI staff do receive specialized training in excess of the generalized training provided to all staff, as well as additional training to promote empathy and understanding. As such, the HCF absolutely exceeds the basic requirements of this standard.
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115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>Documents:</p> <ul style="list-style-type: none"> · Employee Training Manual, Subject 7.000, 40 Hour Orientation/Initial Employee Training, 8/19/22 · Dir #7.150, Orientation Program for Per Diem and Non-Departmental Employees, 8/19/22 · MOU NY State Office of Mental Health and NYDOCCS, 9/14/16 · HCF Medical and Mental Health Providers Training Roster, 8/1/23 · HCF Report of Training Form, Sexual Abuse Prevention and Response, 2/6/20 · HCF Report of Training Form, Sexual Abuse Prevention and Response, 3/10/22 <p>Interviews:</p> <ul style="list-style-type: none"> · Agency PREA Coordinator · Agency Director of PREA Compliance · Regional Assistant Deputy Superintendent (ADS) PREA Compliance Manager (PCM) · Facility PREA Compliance Manager/PREA Point Person · Facility Warden/Superintendent · Administrative (Human Resources Staff) · Medical Staff · SAFE/SANE Hospital Staff

Site Review Observations:

- Review of facility training records
- Review of HCF PREA Training for Medical and Mental Health Staff

Standard Subsections:

(a) The New York DOCCS works corporately with the New York State Office of Mental Health (OMH) to provide mental health services to incarcerated persons within the HCF. Per a Memoranda of Understanding between the two agencies, all employees of the OMH who work inside correctional institutions must receive specialized training on how to detect and assess signs of sexual abuse and sexual harassment. In addition to the general training provided to all staff, DOCCS medical service employees also receive specialized training on how to detect and assess signs of sexual abuse and sexual harassment. Policy further requires that all full and part-time medical and mental health care practitioners receive training on how to preserve physical evidence of sexual abuse, how to respond effectively and professionally to victims of sexual abuse and sexual harassment, as well as how and to whom to report allegations or suspicions of sexual abuse and sexual harassment. Interviews with Human Resource staff, the HCF Health Administrator, and a SAFE/SANE Hospital Staff, confirm that staff have received trainings as required. A review of agency training records documents staff participation in initial and/or continuing training requirements.

(b) In accordance to the HCF Medical Staff member, medical staff at HCF do not conduct forensic medical examinations. Rather, as confirmed the SAFE/SANE Hospital Staff, incarcerated individuals are transported to a nearby public medical facility for such services.

(c) A review of training records reflects that of the 16 current Medical and Mental Health employees assigned to the HCF, 100% have received specialized training appropriate for their professional roles.

(d) As well, dependent on their professional role, a review of training records reflects medical and mental health practitioners have also received the generalize PREA training provided to all other staff, volunteers, and contractors working within a

	<p>correctional setting.</p> <p>Reasoning & Findings Statement:</p> <p>This standard works to ensure that medical and mental health staff have received specialized training in medical and mental health services provided to victims of sexual abuse and sexual harassment. The New York DOCCS has policies in place to ensure all contracted OMH staff, as well as all medical staff, are furnished this training. The HCF Health Administrator confirmed that staff have received all required and continuing education classes specific to their professional role as it applies to medical and mental health services administered when assisting victims of sexual abuse and sexual harassment. The SAFE/SANE hospital staff confirmed that all persons conducting forensic medical exams are properly certified to perform said exams. Documentation of agency training verified that said staff do receive specialized training in excess of the generalized training provided to all staff. As such, the HCF exceeds the basic requirements of this standard.</p>
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115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents:</p> <ul style="list-style-type: none"> · DIR #4027, Sexual Victimization Prevention & Response, 7-21-22 · DIR #4021, Inmate Reception/Classification, 1/23/19 · NYDOCCS Sexual Victimization Prevention Policy Manual, Section 115.41, 1/3/23 · Form 115.41M, PREA Risk Screening Form, Male Facility, 4/22 · Form 115.41M, PREA Risk Screening Form, Male Facility, 1/23 · Form 115.41GI, Gender Identify Interview, 6/20 · HCF FOM #6.002, PREA Risk Screening, 1/31/23 · HCF FOM #6.003, Transgender, GD Diagnosed, or Intersex Shower Policy – Male and Female, 1/31/23

- HCF Form 115.41M, PREA Risk Screening Form, Male Facility, 7/27/23
- HCF Form 115.41M, PREA Risk Screening Form, Male Facility, 6/21/23
- HCF Form 115.41M, PREA Risk Screening Form, Male Facility, 11/25/22
- HCF Form 115.41M, PREA Risk Screening Form, Male Facility, 12/7/22
- HCF Form 115.41M, PREA Risk Screening Form, Male Facility, 8/30/23
- HCF Form 115.41M, PREA Risk Screening Form, Male Facility, 8/24/23
- HCF Form 115.41M, PREA Risk Screening Form, Male Facility, 7/7/22
- HCF Form 115.41M, PREA Risk Screening Form, Male Facility, 8/29/22
- HCF Form 115.41M, PREA Risk Screening Form, Male Facility, 9/14/22
- HCF Form 115.41M, PREA Risk Screening Form, Male Facility, 11/4/22
- HCF Form 115.41M, PREA Risk Screening Form, Male Facility, 11/22/22
- HCF Form 115.41M, PREA Risk Screening Form, Male Facility, 12/17/22
- HCF Form 115.41M, PREA Risk Screening Form, Male Facility, 12/20/22a
- HCF Form 115.41M, PREA Risk Screening Form, Male Facility, 12/20/22b
- HCF Form 115.41M, PREA Risk Screening Form, Male Facility, 2/7/23
- HCF Form 115.41M, PREA Risk Screening Form, Male Facility, 3/2/23
- HCF Form 115.41M, PREA Risk Screening Form, Male Facility, 4/5/23
- HCF Form 115.41M, PREA Risk Screening Form, Male Facility, 4/6/23

Interviews:

- Agency PREA Coordinator
- Agency Director of PREA Compliance
- Regional Assistant Deputy Superintendent (ADS) PREA Compliance Manager (PCM)
- Facility PREA Compliance Manager/PREA Point Person
- Facility Warden/Superintendent
- Intake Staff

- Medical Staff
- Staff Who Perform Screening for Risk of Victimization and Abusiveness
- Inmates Who Identify as Lesbian, Gay, Bisexual, Transgender, or Intersex
- Disabled Inmates
- Limited English Proficient Inmates
- Random Inmates

Site Review Observations:

- Observed the Intake process
- Observed PREA screening for risk of victimization and abusiveness process
- Reviewed inmate files

Standard Subsections:

(a) Policy (DIR #4027, DIR #4021) requires that during intake, as well as upon any transfer to another facilities, all inmates are screened for their risk of being sexually abused by other inmates or for being sexually abusive toward other inmates. The HCF Intake (Draft) staff affirm the facility's adherence to agency policy. In that, it was noted that as a function of the Draft process, inmates are screened for their risk of victimization and abusiveness. This screening process was observed by the auditor.

(b) Per HCF policy (FOM #5.502), intake screenings ordinarily take place within 24 hours of inmates arriving to the facility. Per the Intake (Draft) staff, within the audit time frame, of the 268 incarcerated individuals received into the HCF who length of stay in the facility was for 72 hours or more, 100% were subsequently provided risk screening assessments for their risk of being sexually victimized or for being a sexual abuser within 72 hours of their entry into the facility.

(c) The PREA screening assessment is conducted using an objective screening instrument (Form 115.41M). A review of the ten survey questions provided to inmates does not present with either an implicit bias or leading statements. The Form 115.41M does not contain value statements, bias language, or implied negative

consequences for affirmative answers to any of the questions asked. Rather, it is a strictly utilitarian form that was witnessed by the auditor to be administered in a nonjudgmental manner. To determine an inmate's risk of sexual victimization, an inmate is asked ten questions. If the inmate answers affirmatively to five or more of the questions, then the inmate may be at high risk of sexual victimization and the Watch Commander must be promptly notified. To determine an inmate's risk of sexual abusiveness, staff must review the inmate's previous criminal and institutional history for instances of sexual abuse. If the inmate has previously committed sexual abuse, then the inmate may be at high risk of being sexually abusive and the Watch Commander must be promptly notified.

(d) HCF policy (FOM #5.502) requires the PREA Risk Screening Form be administered by a Sergeant or above. Subsequent reassessments are performed by the assigned Inmate Rehabilitation Coordinator. The PREA Risk Screening Form does consider, at a minimum, if the inmate has a mental, physical, or developmental disability. It considers the age of the inmate, the inmate's physical build, whether the inmate has previously been incarcerated, whether the inmate's criminal history is exclusively nonviolent, whether the inmate has prior convictions for sex offenses against an adult or child, whether the inmate has previously experienced sexual victimization, the inmate's own perception of vulnerability, and whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming. Inmates are explicitly asked if they are gay, lesbian, bisexual, transgender, intersex, or gender nonconforming/gender nonbinary. Inmates are then asked if others perceive them as the same. The risk screener's subjective perception regarding gender expression is also captured. It should further be noted that despite the fact the DOCCS does not detain inmates solely for immigration purposes, that question is still considered as a function of the PREA Risk Screening Form. During interviews of incarcerated individuals, most stated that they had, in fact, been asked the aforementioned questions upon their receipt into the HCF.

(e) In assessing inmates for their risk of being sexually abusive, the PREA Risk Screening Form (Form 115.41M) does consider prior acts of sexual abuse, prior convictions for violent offenses, and the history of prior institutional violence or sexual abuse. Along with physically observing the risk screening process, the auditor also reviewed thirteen PREA Risk Screening Forms completed within the auditing time frame. All forms were filled out in their entirety, with inmates having generally provided relevant answers to each of the questions asked. It should further be noted that the Intake (Draft) staff confirmed that inmates may refuse to answer any question on the survey or may refuse participation in the entire survey without the threat of negative consequences.

(f) HCF FOM #6.002 requires that inmates are reassessed by an assigned Inmate Rehabilitation Coordinator (ORC) ordinarily within 14 days of the inmate's arrival to

the facility. In speaking with ORC staff, their adherences to this policy were confirmed. Normally, reassessments are completed within one week of the initial assessment. Within the audit time frame, 169 incarcerated individuals with a length of stay in the facility for 30 days or more, were reassessed for their risk of sexual victimization or of being sexually abusive within 30 days after their arrival to the HCF. In reviewing the thirteen PREA Risk Screening Forms completed with the auditing time frame, it was noted that all thirteen reassessments occurred within 14 days of the inmate's initial HCF assessment.

(g) HCF FOM #6.002 requires that inmate risk levels are reassessed upon referral, when duly warranted, upon request, when subject to an incident of sexual abuse, or when the agency receives additional information that bears on an inmate's risk of sexual victimization or abusiveness. Both the PREA Point Person and ORC staff confirm reassessments are conducted as required. As well, in discussing reassessment processes with inmates, a few inmates stated that after having brought concerns for their safety to the attention of security personnel, they were subsequently interviewed by their ORC regarding the survey questions presented on the PREA Risk Screening Form.

(h) Policy (HCF FOM #6.002) expressly prohibits disciplinary sanctions against any inmate who refuses to answer or fails to provide complete and/or accurate answers to any of the questions noted on the PREA Risk Screening Form. When interviewed, Intake (Draft) staff and the PREA Point Person affirmed that disciplinary sanctions were not imposed against inmates for refusing or failing to answer any of the questions on the Form 115.41M.

(i) Policy (HCF FOM #6.002) requires that the screening process be performed in a private setting to provide privacy to the responding inmate. Policy further requires, as well as reinforced by specific language on the form, that facility staff must restrict the spread of information obtained as a function of the Form 115.41M to only those designated staff members with an operational need in order to inform classification, housing and work assignments, programmatic and non-programmatic activities, or any other relevant institutional activities. The PREA Point Person, Intake (Draft) staff, and ORC all affirmed the information obtained by way of Form 115.41M was considered restricted, and as such, was not distributed to unauthorized staff. Rather, per policy (HCF FOM #6.002), the distribution of information within the PREA Risk Screening Forms is limited to the Watch Commander, Assistant Deputy Superintendent PREA Compliance Manager, and the Captain/PREA Point Person. Subsequent access to completed forms is limited to the Executive Team and Guidance Staff with a business necessity to review said forms. Lastly, the auditor observed that completed PREA Risk Screening Forms were filed in Incarcerated Individual Guidance Folders, which are restricted folders maintained within a lockable file cabinet.

	<p>Reasoning & Findings Statement:</p> <p>This standard works to ensure inmates are properly screened for their risks of sexual victimization and abusiveness. Agency policy provides for an objective PREA Risk Screening Form, which is administered and scored at the facility level as a simple fact assessment. Inmates are reassessed as required by policy, to include if new information is discovered by facility staff that might warrant changes in inmates' risk status. Interviews with facility screening staff, as well as with inmates, confirm that the proper screening tool is being utilized at the HCF. As well, the information gleaned from this form is appropriately used to inform classification, housing, work, and other facility-based activities. The auditor observed the risk screening process. The auditor also observed the secured storage of the PREA Risk Screening Forms within lockable cabinets. Staff charged with administering PREA Risk Screening forms affirm the restricted nature of the information and their adherence to the facility's limited distribution list. As such, the HCF has satisfied the basic requirements of this standard and is found to meet its expectations.</p>
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115.42	Use of screening information
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>Documents:</p> <ul style="list-style-type: none"> · DIR #4027, Sexual Victimization Prevention & Response, 7-21-22 · DIR #4021, Inmate Reception/Classification, 1/23/19 · DIR #4017, Incarcerate Individual Transfer Procedure, 6/6/22 · DIR #4401, Guidance & Counseling Services, 8/21/20 · DIR #4009, Minimum Provisions for Health and Morale, 7/21/22 · NYDOCCS Sexual Victimization Prevention Policy Manual, Section 115.42, 2/15/22 · HCF PREA 115.42 Housing Policy, 6/26/23 · HCF Report of PREA Risk Screening Information, 10//8/20 · HCF Report of PREA Risk Screening Information, 4/13/21

- HCF Report of PREA Risk Screening Information, 5/24/22
- HCF Report of PREA Risk Screening Information, 7/26/22
- HCF Report of PREA Risk Screening Information, 5/5/21
- HCF PREA Risk Tracking Sheet, 10/8/20
- HCF Gender Identity Interview, 11/28/22
- HCF Gender Identity Interview, 4/6/23

Interviews:

- Agency PREA Coordinator
- Agency Director of PREA Compliance
- Regional Assistant Deputy Superintendent (ADS) PREA Compliance Manager (PCM)
- Facility PREA Compliance Manager/PREA Point Person
- Facility Warden/Superintendent
- Intermediate or Higher-Level Facility Staff
- Intake Staff
- Medical Staff
- Staff Who Perform Screening for Risk of Victimization and Abusiveness
- Random Staff
- Inmates Who Identify as Lesbian, Gay, Bisexual, Transgender, or Intersex
- Disabled Inmates
- Limited English Proficient Inmates

Site Review Observations:

- Observed the Draft Process
- Observed PREA screening for risk of victimization and abusiveness process

- Observed incarcerated individual housing and work assignments
- Observed incarcerated individual shower areas
- Reviewed incarcerated individual files

Standard Subsections:

(a) Policy (DIR #4009, DIR #4017, DIR #4021, DIR #4027, DIR #4401, HCF FOM #6.002) requires that the agency use information from the PREA Risk Screening Form to help separate inmates with a high risk of being sexually victimized from those inmates with a high risk of being sexually abusive. As such, the information gleaned from the PREA Risk Screening Form is used to inform inmate housing, bed, work, education, and program assignments. In speaking with the Intake (Draft) staff and the PREA Point Person, once an inmate is deemed as a possible high risk for sexual victimization, the Watch Commander is promptly notified. The Watch Commander will ensure that the inmate at risk is not housed in a vulnerable location with respect to other inmates who are assessed at a high risk to sexually abuse other inmates and then notify the PREA Point Person of the concern. The PREA Point Person is subsequently responsible for completing the Report of PREA Risk Screening Information (Form 115.42) to ensure this information is continuously available to other staff with an operational need for the assessment information. Facility documentation reflects this is an institutionalized process.

(b) Policy (DIR #4009, DIR #4017, DIR #4021, DIR #4027, DIR #4401, HCF FOM #6.002) requires that the facility make individualized determinations about how to ensure the safety of each incarcerated individual. In speaking with the PREA Coordinator, the Regional PCM, the HCF PREA Point Person, and the HCF Superintendent, staff affirmed that the concerns for every inmate are reviewed on an individual basis. Documentation further confirms that the views of incarcerated individuals for their own safety are considered on a case-by-case basis. In speaking with inmates currently assigned to the HCF, most stated that their own opinions regarding their personal safety are considered by HCF staff when providing housing or job assignments.

(c) In deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, agency policy (DIR #4401, DIR #4021, DIR #4017) requires that administrators consider, on a case-by-case basis, whether such a placement would ensure the inmate's health and safety and whether such a placement would present management or security problems. In deciding whether to assign a transgender or intersex inmate to a specific housing or program assignment, agency policy (DIR #4401, DIR #4021, DIR #4017) dictates that administrators consider, on a

case-by-case basis, whether such a placement would ensure the inmate's health and safety and whether such a placement would present management or security problems. In speaking with the PREA Coordinator, the Agency Director of PREA Compliance, the Regional PCM, the HCF PREA Point Person, and the HCF Superintendent, all staff affirmed that an inmate's genital status is not the sole determining factor in placing transgender or intersex inmates in male or female facilities, or in placing said inmates within specific housing or program assignments within a facility. In speaking with ORCs, agency policy allowing for inmates to request placement in alternative facilities based on their gender identification was detailed. Specifically, this request is facilitated by the completion of a Gender Identity Interview Form (Form 115.41GI). Documentation review further confirms that the views of incarcerated individuals for their own safety are considered on a case-by-case basis.

(d) Agency policy (DIR #4401) requires that the placement and programming assignments of transgender or intersex inmates are reviewed at least four times each year (quarterly) to determine any threats to safety experienced by the inmate. When interviewed, HCF ORC staff did affirm the facility's compliance with this policy.

(e) Agency policy (DIR #4401) requires that upon the routine review of the placement and programming assignments of transgender or intersex inmates, the transgender or intersex inmate's own view with respect to his or her own safety shall be given serious consideration. When interviewed, ORC staff and the HCF PREA Point Person affirmed that the facility adheres to this policy as required. Additionally, during random interviews with inmates, most stated that they believed HCF staff would consider their own views with respect to their own safety.

(f) Policy (DIR #4009) allows for transgender and intersex inmates to be given the opportunity to shower separately from other inmates. In speaking with the HCF Superintendent, it was noted that HCF has specific policy supporting this directive. In speaking with HCF random staff, the existence of alternative shower times for transgender and intersex inmates was affirmed. Specifically, HCF correctional staff stated that upon notification from a transgender inmate, staff would then ensure that the shower area was closed to all other persons and that the transgender inmate was provided privacy in showering. All transgender inmates interviewed confirmed that they were permitted separate shower times if requested. Additionally, transgender, as well as all other incarcerated individuals interviewed, to include inmates who identified as gay or bisexual, stated that they didn't feel in danger during their shower times. In short, there weren't any inmates who expressed any concerns about showering or attending to other matters of personal hygiene while at the HCF.

(g) There aren't any correctional facilities within the New York DOCCS currently subject to consent decrees, legal settlements, or legal judgments requiring any facility to be established as a dedicated facility or housing unit for lesbian, gay, bisexual, transgender, or intersex inmates. Policy (DIR #4401) expressly forbids the placement of transgender or intersex inmates to a gender-specific facility, housing unit, or program based solely on the anatomy of their external genitals. In speaking with the PREA Coordinator, the Agency Director of PREA Compliance, Regional PCM, HCF Superintendent, and HCF PREA Point Person, staff adamantly affirm that inmates who identify as transgender or intersex are not placed in a facility, or within a housing assignment, based solely on their external genital anatomy. During interviews of transgender, gay, and bisexual inmates, none stated that they had ever been housed in a facility, or in a specific housing unit within the HCF, based solely on their gender identity or sexual orientation. As well, of the random staff interviewed, all such staff affirmed that the HCF does not house transgender, intersex, gay, or bisexual inmates in any specific areas based solely on their gender identity or sexual orientation.

Reasoning & Findings Statement:

This standard works to ensure the adequate use of screening information to promote and protect inmates who may be at high risk of being sexually victimized. The DOCCS has numerous policies in place to ensure the most effective and secure use of the PREA Risk Screening Form. Inmates deemed to be at high risk are routinely monitored by their ORC, the PREA Point Person, and the Regional ADS PREA PCM. Agency policies require staff to make individualized determinations on a case-by-case basis regarding inmate safety. Interviews with the Regional PCM and the HCF PREA Point Person reflect that facility staff have discretion in managing the safety of individual inmates. The Regional PREA Compliance Manager, the HCF PREA Point Person, and ORC staff affirm their adherence to agency policies and also confirm that inmates' own views regarding their safety are given serious consideration during risk assessment reviews. Staff affirm that transgender and intersex inmates are permitted alternative shower times to the general population. Additionally, while this standard requires agency staff to perform two reviews per year specific to the placement and programming assignments of transgender and intersex inmates, DOCCS policy requires these reviews to be conducted at least four times a year. HCF complies with this agency policy. As such, the facility has exceeded the basic requirements of this standard.

115.43	Protective Custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Documents:

- DIR #4948, Protective Custody Status, 6/2/22
- Form 2168A, Sexual Victimization - Involuntary Protective Custody Recommendation, 4/22
- Form 2170A, Protective Custody Review, 04/22
- Form 4948A, Sexual Victimization Involuntary Protective Custody, 8/21

Interviews:

- Agency PREA Coordinator
- Agency Director of PREA Compliance
- Regional Assistant Deputy Superintendent (ADS) PREA Compliance Manager (PCM)
- Facility PREA Compliance Manager/PREA Point Person
- Facility Warden/Superintendent
- Designated Staff Member Charged with Monitoring Retaliation
- Incident Review Team Member
- Intermediate or Higher-Level Facility Staff
- Staff Who Supervise Inmates in Segregated Housing

Site Review Observations:

- Observed Segregated Housing Unit

Standard Subsections:

- (a) Policy (DIR #4948) mandates that agency staff refrain from placing inmates at high risk for sexual victimization in Involuntary Protective Custody housing unless an

assessment of all available alternatives has been made and a determination rendered that there are no available alternative means of separation from likely abusers. If an assessment of all available alternatives cannot be immediately made, then policy (DIR #4948) allows the facility to hold an inmate in Involuntary Protective Custody for less than 24 hours while completing the assessment using Form #2168A, Sexual Victimization - Involuntary Protective Custody Recommendation. In speaking with the Regional PCM, HCF PREA Point Person, and the HCF Superintendent, all staff confirm that there have not been any inmates placed in Involuntary Protective Custody during the audit time frame. As such, there wasn't any relevant documentation to review.

(b) Policy (DIR #4948) allows that Protective Custody inmates are afforded similar access to programmatic activities, privileges, educational activities, and work opportunities as inmates assigned to the general population. If the facility restricts access to programs, privileges, education, or work opportunities, the facility shall document this restriction on Form #4989A, Restriction of Inmate's Program-Participation. Included in this documentation, the agency must note the opportunities that have been limited, the duration of the limit, and the reasons for said limitation. In speaking with the Regional PCM, HCF PREA Point Person, and the HCF Superintendent, all staff confirm that there have not been any inmates placed in Involuntary Protective Custody for high risk of sexual victimization during the audit time frame. As such, there wasn't any relevant documentation to review.

(c) Policy (DIR #4948) mandates that Involuntary Protective Custody for inmates at a high risk of sexual victimization shall only be used until an alternative means of separation from likely abusers can be arranged. Policy (DIR #4989) further requires that the assignment shall not ordinarily exceed a period of 30 days. In speaking with the Regional PCM, HCF PREA Point Person, and the HCF Superintendent, all staff confirm that there have not been any inmates placed in Involuntary Protective Custody during the audit time frame. As such, there wasn't any relevant documentation to review.

(d) Policy (DIR #4948) requires that upon placement of an inmate into Involuntary Protective Custody, the facility must clearly document the basis of the facility's concern for the inmate's safety. Additionally, the facility must document whether a determination has been made that there is no available alternative means of separation from the likely abusers, including documentation of what alternatives were considered and assessed to be unavailable. In speaking with the Regional PCM, HCF PREA Point Person, and the HCF Superintendent, all staff confirm that there have not been any inmates placed in Involuntary Protective Custody during the audit time frame. As such, there wasn't any relevant documentation to review.

(e) Policy (DIR #4989) requires that an inmate placed in Involuntary Protective Custody due to being a high risk of sexual victimization shall have this status reviewed every seven days for the first month, and at least every 30 days thereafter. In speaking with the Regional PCM, HCF PREA Point Person, and the HCF Superintendent, all staff confirm that there have not been any inmates placed in Involuntary Protective Custody during the audit time frame. As such, there wasn't any relevant documentation to review.

Reasoning & Findings Statement:

This standard works to ensure that the use of Involuntary Protective Custody is not a de facto management solution for inmate safety concerns. Agency policy explicitly mandates that staff refrain from placing inmates at high risk for sexual victimization in Involuntary Protective Custody unless an assessment of all available alternatives has been made and there are no other available means of separation from likely abusers. In speaking with the Regional PCM, HCF PREA Point Person, and the HCF Superintendent, all staff confirm that there have not been any inmates placed in Involuntary Protective Custody during the audit time frame. As such, there wasn't any relevant documentation to review. Correctional staff routinely assigned to work within Segregated Housing were interviewed. While these staff confirmed that inmates assigned to Segregated Housing for high risk of sexual victimization would be afforded similar activities as inmates within general population, to the best of their knowledge, there have not been any such inmates assigned to Segregated Housing within the audit time frame. As such, the HCF has satisfied all component parts of this standard and found to have met its provisions.

115.51	Inmate reporting
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>Documents:</p> <ul style="list-style-type: none"> · DIR #4027, Sexual Victimization Prevention & Response, 7-21-22 · NYDOCCS Sexual Victimization Prevention Policy Manual, Section 115.65, 2/15/22 · Prevention of Sexual Abuse in Prison, What Inmates Need to Know, English, 3/22

- OSI, Report Misconduct, Inmate Phones 444
- How to Report Sexual Abuse and Harassment or Get Emotional Support, 3/22
- NYDOCCS Preventing Sexual Misconduct and Saving Careers, PREA Refresher Training, 3/9/22
- DC159L, PREA Pocket Card, 4/22
- Agency Memorandum, New York Commission of Correction agrees to be a third-party reporting sight for written complaints, 4/9/14
- NYDOCCS Employee Manual, 2019
- Notice to Auditor, Inmates Not Detained Solely for Civil Immigration
- HCF FOM #6.001, Coordinated Response to Reports of Sexual Victimization, 1/31/23
- HCF Report of Training Form, Sexual Abuse Prevention and Response, Civilians, 8/1/23
- HCF Report of Training Form, Sexual Abuse Prevention and Response, Security, 8/1/23
- HCF Report of Training Form, Sexual Abuse Prevention and Response, Supervisors, 8/1/23

Interviews:

- Agency PREA Coordinator
- Agency Director of PREA Compliance
- Regional Assistant Deputy Superintendent (ADS) PREA Compliance Manager (PCM)
- Facility PREA Compliance Manager/PREA Point Person
- Facility Warden/Superintendent
- Random Staff
- Inmates Who Disclosed Sexual Victimization During Risk Screening
- Inmates Who Reported Sexual Abuse
- Random Inmates

Site Review Observations:

- Reviewed documentation related to inmate reports of sexual abuse and sexual harassment, to include documented Inmate Grievance Referrals and OSI investigations.
- Reviewed documentation related to third-party reports of alleged sexual abuse and sexual harassment.
- Tested the PREA Hotline.
- Observed PREA Risk Screening assessments.
- Observed multiple informational posters throughout the facility advising inmates of various reporting mechanisms for allegations of sexual abuse and sexual harassment.
- Observed PREA informational video discussing various reporting mechanisms for allegations of sexual abuse and sexual harassment.
- Observed numerous PREA educational and reporting references available for inmate use within the facility Law Library.

Standard Subsections:

(a) The agency provides multiple internal ways for inmates to privately report sexual abuse and sexual harassment, as well as neglect or violations of staff responsibilities that may have contributed to such incidents. Additionally, the agency provides numerous avenues by which inmates may report any subsequent retaliatory measures experienced by inmates as a result of having reported said abuse. Upon receipt onto the facility, all inmates are provided a PREA Risk Screening and advised of their right to be free of sexual abuse and sexual harassment under the PREA standards. Inmates are provided a DOCCS informational PREA brochure, which contains contact information for internal and external reporting agencies. This brochure is available in thirteen different languages, of which, the HCF does maintain copies of each language brochure. Inmates are also provided with a HCF Inmate Orientation Handbook, which contains contact information for national, state, and local level internal and external reporting agencies and victim services organizations. According to the PREA brochure entitled The Prevention of Sexual Abuse in Prison: What Inmates Need to Know, inmates are encouraged to immediately report incidents of sexual abuse by “tell(ing) your facility’s designated PREA Compliance Manager or PREA Point Person, or any S.O.R.C., O.R.C., Chaplain, security staff person, medical staff, or any other employee. All staff must report the abuse, and they can only talk

about the abuse with officials who must know about it to do an investigation or provide you with care. You may also talk to Mental Health staff. If you report the abuse in writing first, you may write to the Superintendent, a member of the facility Executive Team, a S.O.R.C., your O.R.C., a chaplain, a security supervisor, the Inmate Grievance Program Supervisor, Central Office, the PREA Coordinator or the Department's Office of Special Investigations (OSI). If you want to report to an outside agency, you may contact the New York State Commission of Correction." In interviewing staff, all employees were aware of an inmate's right to report allegations of sexual abuse and sexual harassment and to be free from measures of retaliation for having reported said abuse. In interviewing inmates, all inmates were equally aware of their right to report allegations of sexual abuse and sexual harassment and to be free from measures of retaliation for having reported said abuse. All incarcerated individuals were also able to articulate at least one manner by which a report could be made.

(b) The facility provides multiple avenues and contact information for incarcerated individuals to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency. The primary reporting entity, the New York State Commission of Correction, can receive and immediately forward inmate reports to agency officials for their investigation. Upon an inmate's request, the New York State Commission of Correction will allow an inmate to remain anonymous. Per the agency PREA coordinator, the New York State Department of Corrections and Community Supervision does not detain inmates solely for civil immigration purposes. Nonetheless, information on how to contact relevant consular officials is available. As well, A Jailhouse Lawyer's Manual: Immigration & Consular Access Supplement is available for inmate review within all New York DOCCS Facility Law Libraries.

(c) Per policy (DIR #4027, HCF FOM #6.002), staff accept all reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties. All employees interviewed stated that they would act on any report of sexual abuse or sexual harassment regardless of how they became of that information. All inmates interviewed affirmed their right to make either verbal or written reports of sexual abuse and sexual harassment. Most inmates were aware that they could also make reports of sexual abuse and sexual harassment via third party or anonymously.

(d) Per policy (DIR #4027, New York DOCCS Employee Manual, HCF FOM #6.002), staff have an affirmative duty to report any knowledge, suspicion, or information they may have regarding sexual abuse, sexual harassment, or retaliation against inmates or staff for having reported such abuse. Staff have been provided with PREA Pocket Cards that contain written instructions of what to do if/when they receive a first-hand report of sexual abuse. Along with detailed standard operation procedures to address the situation, the pocket card also provides staff with the contact information to make

a private report of sexual abuse; specifically, as written on the PREA Pocket Card, staff are given the phone number for the DOCCS Office of Special Investigations Sex Crimes Division. When asked, generally staff were aware that they could make anonymous reports of sexual abuse and sexual harassment.

Reasoning & Findings Statement:

This standard works to ensure inmates, staff, and outside agents have the ability to report all instances of sexual abuse and sexual harassment against incarcerated individuals. The agency does have multiple avenues by which inmates may make formal reports, to include verbal, written, anonymous, and third-party reports. While inmates are not encouraged to use the PREA Support Services Hotline to make reports of sexual abuse and sexual harassment, it does serve in that capacity if needed and the inmate consents to a report being made. As such, this hotline was tested to ensure its functionality. Additionally, while inmates are not encouraged to utilize rape counseling support service centers as reporting avenues, they will also serve in this capacity if explicitly requested by the inmate. With this in mind, the auditor solicited inmate contact information from two local rape counseling centers (Crime Victims Treatment Center and St. Peter’s Crime Victim Center) and one nationally based referral service (Just Detention International). In interviewing correctional staff, all such persons were aware that inmates could report allegations of sexual abuse and sexual harassment verbally, in writing, anonymously, and through a third party. When receiving verbal reports of sexual abuse and sexual harassment, all staff recognized the need to take immediate action to protect the inmate in question and the need to document the verbal complaint as soon as possible. In speaking with incarcerated individuals, all persons were aware of their right to be free from sexual abuse and sexual harassment, as well as their right not to suffer retaliation for having reported such abuse. All inmates understood their right to make verbal and written complaints. The majority of inmates understood their right to make anonymous and third-party complaints. As such, it is evident that the HCF has exceeded all aspects of this standard.

115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents:
	· DIR #4040, Inmate Grievance Program (1/20/16)

- Agency Memo, Grievance Concerning Sexual Abuse, Sexual Harassment, or Unauthorized Relationship – Revised Procedures, 9/1/22

Interviews:

- Agency PREA Coordinator
- Agency Director of PREA Compliance
- Regional Assistant Deputy Superintendent (ADS) PREA Compliance Manager (PCM)
- Facility PREA Compliance Manager/PREA Point Person
- Facility Warden/Superintendent
- Inmate Grievance Coordinator
- Investigative Staff
- Random Inmates
- Inmates Who Reported Sexual Abuse

Site Review Observations:

- Reviewed investigative documents.

Standard Subsections:

(a) The New York DOCCS is exempt from this standard as it does not have administrative procedures to address inmate grievances regarding sexual abuse.

(b) Policy (DIR #4040) does not permit inmates to submit grievances regarding allegations of sexual abuse and sexual harassment.

(c) Policy (DIR #4040) does not permit inmates to submit grievances regarding allegations of sexual abuse and sexual harassment.

(d) Policy (DIR #4040) does not permit inmates to submit grievances regarding allegations of sexual abuse and sexual harassment.

(e) Policy (DIR #4040) does not permit inmates to submit grievances regarding allegations of sexual abuse and sexual harassment.

(f) Policy (DIR #4040) does not permit inmates to submit grievances regarding allegations of sexual abuse and sexual harassment.

(g) Policy (DIR #4040) does not permit inmates to submit grievances regarding allegations of sexual abuse and sexual harassment.

Reasoning & Findings Statement:

This standard works to ensure inmate access to courts by way of exhausting administrative remedies specific to allegations of sexual abuse and sexual harassment. Policy (DIR #4040, New York State Corrections Law Section 139) does not permit inmates to submit grievances regarding allegations of sexual abuse and sexual harassment. In speaking with the HCF PREA Point Person, the grievance referral process was explained in detail. In this, the HCF does not accept inmate grievances regarding allegations of sexual abuse and sexual harassment. Rather, any grievance regarding such is administratively closed as a grievance. For litigation purposes; namely, the Prison Litigation Reform Act, any documented complaint made by or confirmed by the inmate serves to exhaust administrative remedies. That said, the agency still investigates the allegations; it is simply done using a different mechanism. In this, the Inmate Grievance Program Supervisor will forward the allegations of sexual abuse or sexual harassment to the Watch Commander by the close of business on the same day received. The Watch Commander, in coordination with the PREA Point Person, then processes the allegations as a formal sexual abuse or sexual harassment complaint. As the submission of an inmate grievance alleging sexual abuse and sexual harassment constitutes exhaustion of administrative remedies, the HCF meets the provisions of this standard.

115.53	Inmate access to outside confidential support services
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	Auditor Overall Determination: Exceeds Standard
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Auditor Discussion

Documents:

- NYDOCCS Sexual Victimization Prevention Policy Manual, Section, 115.53, 2-15-22
- Help for Victims of Sexual Abuse in Prison, Victim Support Pamphlet, English, 3/22
- How to Report Sexual Abuse and Harassment or Get Emotional Support, 3/22
- DIR #4421, Privileged Correspondence, 6/2/16
- DIR #4423, Inmate Telephone Calls, 5/21/15
- DIR #4404, Incarcerated Individual Legal Visits, 9/18/19
- Help for Victims of Sexual Abuse in Prison, PREA Statewide Rape Crisis Hotline & Victim Advocacy and Emotional Support Partnership, April 2021
- NYSCASA Contract with Planned Parenthood of Central and Western New York, 4/29/21
- NYSCASA Contract Letter of Acceptance, 3/29/21
- State of New York Master Contract for Grants, 12/16/21
- OVS MOU CVTC and NYSCASA, 9/20/22, 9/15/22
- HCF The Prevention of Sexual Victimization in Prison: What You Need to Know, English
- HCF The Prevention of Sexual Victimization in Prison: What You Need to Know, Spanish
- HCF Incarcerated Individual Orientation Handbook, English, 2023
- HCF Incarcerated Individual Orientation Handbook, Spanish, 2021
- HCF Help for Victims of Sexual Abuse in Prison, Victim Support Pamphlet, English
- HCF Help for Victims of Sexual Abuse in Prison, Victim Support Pamphlet, Spanish

Interviews:

- Agency PREA Coordinator
- Agency Director of PREA Compliance
- Regional Assistant Deputy Superintendent (ADS) PREA Compliance Manager (PCM)
- Facility PREA Compliance Manager/PREA Point Person
- Facility Warden/Superintendent
- Medical Staff
- SAFE/SANE Hospital Staff
- Mailroom Staff
- Random Staff
- Just Detention International
- St. Peter's Crime Victim's Center
- Crime Victims Treatment Center
- Inmates Who Disclosed Sexual Victimization During Risk Screening
- Inmates Who Reported Sexual Abuse
- Random Inmates

Site Review Observations:

- Tested the PREA Statewide Rape Crisis Hotline
- Tested Agency Website for Reporting Sexual Abuse and Sexual Harassment
- Reviewed PREA Risk Screening assessment and distributed information upon HCF Draft
- Observed multiple informational posters throughout the facility advising inmate of various reporting mechanisms for allegations of sexual abuse and sexual harassment
- Observed PREA informational video discussing various reporting mechanisms for allegations of sexual abuse and sexual harassment
- Observed numerous PREA educational and reporting references available for inmate use within the facility Law Library

- Observed inmate general visitation and legal visit areas informational posters
- Observed visitation area designated for members of an approved victim advocate service
- Observed Mailroom procedures specific to correspondence between victim advocate services and inmates

Standard Subsections:

(a) Upon an inmate's assignment to the HCF, that inmate is provided a HCF Inmate Orientation Handbook, as well as an informational PREA brochure. Victim Support brochures are also widely available in many areas throughout HCF and on inmate tablets. These reference materials contain the contact information for several confidential support services. As well, contact information for confidential rape crisis support services are prolifically displayed throughout the facility and in all inmate housing areas.

Per policy (DIR #4423) telephone calls to the PREA Statewide Rape Crisis Hotline are both free of charge and considered confidential in nature. Informational signs advising of this service are posted near all inmate telephones. Policy (DIR #4404) further allows inmates to have confidential visits with rape advocacy services providers. While inspecting the Inmate Visitation Area, the rooms designated for such visits were the same rooms as those designated for other confidential legal services. Lastly, policy (DIR #4421) classifies inmate correspondence with approved support service agencies as privileged mail. In speaking with the HCF PREA Point Person, it was noted that privileged mail may be sent from the facility sealed and is not subject to inspection.

Per the agency PREA Coordinator and Agency Director of PREA Compliance, the New York State Department of Corrections and Community Supervision does not detain inmates solely for civil immigration purposes. Nonetheless, information on how to contact relevant consular officials is available. As well, A Jailhouse Lawyer's Manual: Immigration & Consular Access Supplement is available for inmate review within all New York DOCCS Facility Law Libraries. When interviewed, all inmates knew that the agency provided free rape crisis support services to incarcerated individuals. Additionally, all inmates were aware of at least one means by which they could contact rape crisis support services, with most inmates knowing that they could access those services by way of the PREA Statewide Rape Crisis Hotline.

(b) Per policy (DIR #4423) inmates may add an approved rape crisis support service organization to their approved phone call list. In doing this, policy clearly states these phone calls are to be treated as confidential. Additionally, inmates may access the PREA Statewide Rape Crisis Hotline by dialing 777 from any phone within their housing units and recreation areas. While the informational posters adjacent to most inmate phones clearly indicate that the PREA Statewide Rape Crisis Hotline is a confidential call, it further notes that the conversation is still recorded in the event of inmate misuse. Policy (DIR #4404) allows advocates assigned to approved rape crisis support service centers to have unmonitored visits with inmates in the legal visitation area. Per the Rape Crisis Program Legal Calls policy memorandum from the agency PREA Coordinator, confidential victim support and advocacy legal calls are also provided to rape crisis program staff for the provision of emotional support and victim advocacy services. Policy (DIR #4421) notifies inmates that correspondence with approved rape crisis support services is considered confidential and subject only to physical inspection in the presence of the inmate as privileged correspondence.

(c) New York State Office of Victim Services has affected a contract with the New York State Coalition Against Sexual Assault to help address the rape crisis support service needs by providing funding for seven Rape Crisis Programs to serve incarcerated individuals. The New York Office of Victim Services and the New York Office for the Prevention of Domestic Violence has affected a contract to facilitate the PREA Statewide Rape Crisis Hotline available to all inmates incarcerated within the DOCCS. The HCF does maintain and did supply agency and/or facility-based contracts for review. The HCF does maintain a relationship with a local rape crisis center, St. Peter's Crime Victim Center, for use by incarcerated individuals assigned to the HCF.

Reasoning & Findings Statement:

This policy works to ensure that inmates assigned to the HCF have access to outside confidential rape crisis support services and that access is provided in the most confidential manner as possible. The DOCCS has gone significantly above and beyond in meeting the minimum expectations of this standard. Incarcerated inmates within the DOCCS have free, frequent, and extensive access to rape crisis and support service advocates. Inmates are granted confidential phone calls, visits, and correspondence privileges with community service providers. While the minimum standards of this provision simply require agency staff to document their attempts at reaching memorandums of understanding with community providers, the DOCCS has actually entrenched itself with numerous service providers at the local and state levels. When interviewed, all employees and inmates knew that the agency provided free emotional support services to inmates upon request. As well, most inmates knew that they could initiate access to those services by way of calling the PREA Statewide Rape Crisis Hotline. As such, the DOCCS, and by extension, the HCF, far exceeds the minimum standards of this provision.

115.54 Third-party reporting

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents:

- DIR #4027, Sexual Victimization Prevention & Response, 7-21-22
- NYDOCCS Sexual Victimization Prevention Policy Manual, 2-15-22
- DOCCS Home Page, PREA, 8/19/22

Interviews:

- Agency PREA Coordinator
- Agency Director of PREA Compliance
- Regional Assistant Deputy Superintendent (ADS) PREA Compliance Manager (PCM)
- Facility PREA Compliance Manager/PREA Point Person
- Facility Warden/Superintendent
- Investigative Staff
- External Reporting Entities
- Random Inmates

Site Review Observations:

- Review NY DOCCS website specific to PREA and third-party reporting methods
- Tested Agency Website for Reporting Sexual Abuse and Sexual Harassment
- Observed the Inmate Visitation Area informational posters
- Observed informational postings and other publications throughout the inmate housing areas

Standard Subsections:

(a) Policy (DIR #4027, NYDOCCS Sexual Victimization Prevention Policy Manual) allows for the use of third-party reporting on allegations of sexual abuse and sexual harassment. During the onsite review, signage throughout the facility encouraged inmates to third-party report if needed. As well, public notices on PREA reporting, specifically third-party reporting, were available for review by inmate family and friends via the facility's Inmate Visitation Room. Additionally, public notice on third party PREA reporting is available to the general public on the agency's website. The HCF PREA Point Person confirmed that the facility would receive, and subsequently process, all third-party complaints.

Reasoning & Findings Statement:

This standard works to ensure a publicly available third-party reporting mechanism exists for claims of sexual abuse and sexual harassment being inflicted upon inmates. In accordance to policy (DIR #4027, NYDOCCS Sexual Victimization Prevention Policy Manual), the HCF promotes the use of third-party reporting via informational posters and brochures spread out across the facility and within the Inmate Visitation Area. Electronic contact information is freely distributed on the agency's website in order to allow the general public direct access to reporting information. To ensure the functionality of the DOCCS site, all electronic links were tested and found to be operating as required. To ensure the functionality of the OSI online third-party reporting system, a test submission was performed. As well, PREA informational posters, brochures, and training videos also provide inmates with a plethora of agency telephone numbers and electronic contact methods. While inmates themselves should not be able to access Internet resources, they can communicate this reference information to their family, friends, and personal advocates. Inmates themselves are provided numerous state and advocacy addresses to submit third-party correspondence. As well, inmates may also make a third-party party complaint via any staff member, through the State Commission of Correction, or by way of the PREA Statewide Rape Crisis Hotline. When interviewed, all staff were aware that the facility would accept and investigate third-party complaints of sexual abuse and sexual harassment from inmate advocates. A majority of inmates were also aware of their right to file a third-party complaint on behalf of another inmate. As the concept of third-party reporting is clearly institutionalized across staff and inmate cultures, the HCF has met the provisions of this standard.

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents:

- DIR #4027, Sexual Victimization Prevention & Response, 7/21/22
- DIR #1.01, Incarcerated Individual Orientation to Health Care Services, 8/9/21
- NYDOCCS Sexual Victimization Prevention Policy Manual, 2/15/22
- MOU New York State Office of Mental Health and DOCCS, 9/14/16
- NYDOCCS Employee Manual, 2019
- HCF FOM #6.001, Coordinated Response to Reports of Sexual Victimization, 1/31/23
- HCF Training Roster, PREA Refresher, Civilians, 6-30-23
- HCF Training Roster, PREA Refresher, Correctional Officers, 6-30-23
- HCF Training Roster, PREA Refresher, Supervisors, 6-30-23
- HCF Training Roster, Preventing Sexual Abuse, Civilians, 6-30-23
- HCF Training Roster, Preventing Sexual Abuse, Correctional Officers, 6-30-23
- HCF Training Roster, Preventing Sexual Abuse, Supervisors, 6-30-23
- HCF Medical and Mental Health Providers Training Roster, 8/1/23

Interviews:

- Agency PREA Coordinator
- Agency Director of PREA Compliance
- Regional Assistant Deputy Superintendent (ADS) PREA Compliance Manager (PCM)
- Facility PREA Compliance Manager/PREA Point Person
- Facility Warden/Superintendent
- Investigative Staff

- Medical Staff
- Random Staff
- Random Inmates

Site Review Observations:

- Employee training records

Standard Subsections:

(a) Policy (DIR #4027, NYDOCCS Sexual Victimization Prevention Policy Manual, DOCCS Employee Manual) mandates that all employees must immediately report all knowledge, suspicion, or information of any sexual abuse or sexual harassment that has occurred within the correctional institution. As well, staff have an affirmative duty to report all knowledge, suspicion, or information regarding retaliation against inmates or staff for having reported an incident of sexual abuse and sexual harassment. Staff also have an affirmative duty to report any negligence or violation of responsibilities that may have contributed to an incident of sexual abuse, sexual harassment, or retaliation. A review of employee training records, as well as training curriculum records, reflects that, of the staff records reviewed, all staff had received initial PREA training, including acknowledge of their affirmative duty responsibilities. When interviewed, all staff confirmed their obligation to immediately report any information they might have regarding allegations of sexual abuse and sexual harassment.

(b) Policy (DIR #4027, NYDOCCS Sexual Victimization Prevention Policy Manual) mandates reports of sexual abuse and sexual harassment are confidential in nature. As such, employees are cautioned to share reported information only with authorized staff. Random staff interviews confirm that facility employees are aware of the sensitive and confidential nature of said complaints. In speaking with the PREA Point Person, the totality and reasoning surrounding the confidential investigatory process was clearly explained.

(c) Policy (MOU between the New York State Office of Mental Health and the New York DOCCS) requires that medical and mental health practitioners have a duty to disclose their mandatory reporting status, including limitations of confidentiality, and to obtain informed consent, whenever possible, prior to providing medical or mental

health services. During the medical staff interview, the need for medical staff to inform inmates (at the initiation of professional services) of their duty to report, as well as to their limitations of confidentiality, was affirmed.

(d) As required by state law, all inmates incarcerated within the HCF are legally classified as adults. Furthermore, New York statutory law; specifically, the New York Consolidated Laws, Social Services Law, Section 488-497, removed incarcerated persons from the state's Vulnerable Person's Central Register. As such, the DOCCS is exempt from this provision.

(e) Policy (DIR #4027, NYDOCCS Sexual Victimization Prevention Policy Manual) mandates that all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, are referred to the agency's Office of Special Investigations, Sex Crime Division. When interviewing random facility staff, all employees affirmatively responded that any reports of sexual abuse and sexual harassment received by them would be immediately referred to supervisory and/or other entities appropriate for further investigations.

Reasoning & Findings Statement:

This standard works to ensure mandatory staff and agency reporting requirements. Both agency and facility policies mandate staffs' duty to report all allegations of sexual abuse and sexual harassment. Policy further stresses the importance of confidentiality as it applies to reported incidents of sexual abuse and sexual harassment. Lastly, policy requires that all medical and mental health staff disclose their limits of confidentiality and obtain informed consent prior to the initiation of services. In interviewing correctional staff, both uniformed and non-uniformed, all employees expressed an understanding of policy. Training records and course curriculums document correctional staff training specific to mandatory reporting requirements. In interviewing HCF medical staff, the processes of limited confidential and informed consent were explained in detail. As well, training records and course curriculums for the specialized training of medical staff document an understanding of mandatory reporting requirements. As such, the HCF meets the provisions established within this standard.

115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Documents:

- DIR #4948, Protective Custody Status, 6/2/22
- DIR #4027, Sexual Victimization Prevention & Response, 7/21/22
- Form 2168A, Sexual Victimization - Involuntary Protective Custody Recommendation, 4/22
- HCF FOM #6.001, Coordinated Response to Reports of Sexual Victimization, 1/31/23

Interviews:

- Agency PREA Coordinator
- Agency Director of PREA Compliance
- Regional Assistant Deputy Superintendent (ADS) PREA Compliance Manager (PCM)
- Facility PREA Compliance Manager/PREA Point Person
- Facility Warden/Superintendent
- Designated Staff Member Charged with Monitoring Retaliation
- Incident Review Team Member
- Intermediate or Higher-Level Facility Staff
- Investigative Staff
- Intake Staff
- Staff Who Perform Screening for Risk of Victimization and Abusiveness
- Medical Staff
- Random Staff
- Inmates Who Disclosed Sexual Victimization During Risk Screening
- Inmates Who Reported Sexual Abuse
- Random Inmates

	<p>Site Review Observations:</p> <ul style="list-style-type: none"> · Review of inmate protection investigations. · Review of retaliation monitoring documentation. <p>Standard Subsections:</p> <p>(a) Per policy (DIR #4948, DIR #4027), when the HCF learns that an inmate is subject to a substantial risk of imminent sexual abuse, agency officials have an affirmative duty to take immediate action to protect the inmate. In speaking with the HCF PREA Point Person, HCF Superintendent, HCF ORC staff, and random staff, a plethora of possible options were discussed specific to inmate protection measures. As the HCF did not determine within the audit time frame that any inmates assigned to the facility were at a substantial risk of sexual abuse, the facility had no documentation for review. Likewise, no protective actions were required.</p> <p>Reasoning & Findings Statement:</p> <p>This standard works to actualize the processes of inmate protection. Both agency policy (DIR #4027) and HCF policy (FOM #3.501) require staff to take immediate action to ensure the safety of inmates who are at a high risk of sexual victimization. Provided there are no other alternative options available to ensure the inmate’s safety, policy (DIR #4849) further allows the facility to immediately increase the safety of the at-risk inmate by placing said inmate in Voluntary Protective Custody, Involuntary Protective Custody, or Sexual Victimization Involuntary Custody. During the audit time frame, the HCF did not determine any inmates were at a substantial risk of sexual abuse. In interviewing random staff, all persons were asked specifically what actions would be taken if an inmate presented as a high risk for sexual victimization. Unequivocally, all staff responded that they would take immediate action to protect the potential victim. Additionally, supervisory staff were questioned as to their role in this potentially dangerous situation. While supervisory staff did provide a more technical and inclusive response, they too, were centrally focused on protecting the inmate. Hence, the HCF has realized the provisions of this standard.</p>
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115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents:

- NYDOCCS Sexual Victimization Prevention Policy Manual, Section 115.63, 8/24/22
- PREA Standard 115.63 Report of Sexual Abuse, 8/22
- HCF PREA Standard 115.63 Report of Sexual Abuse - Received, 12/19/22
- HCF PREA Standard 115.63 Report of Sexual Abuse - Sent, 6/2/23
- HCF PREA Standard 115.63 Report of Sexual Abuse - Sent, 7/24/23
- HCF PREA Standard 115.63 Report of Sexual Abuse - Sent, 1/4/23
- HCF PREA Standard 115.63 Report of Sexual Abuse - Sent, 4/26/23
- HCF PREA Standard 115.63 Report of Sexual Abuse - Sent, 12/14/22

Interviews:

- Agency Head
- Agency PREA Coordinator
- Agency Director of PREA Compliance
- Regional Assistant Deputy Superintendent (ADS) PREA Compliance Manager (PCM)
- Facility PREA Compliance Manager/PREA Point Person
- Facility Warden/Superintendent

Site Review Observations:

- Review of facility-to-facility referrals

Standard Subsections:

(a) DOCCS standard operating procedures; namely, NYDOCCS Sexual Victimization Prevention Policy Manual, Section 115.63, require that when a facility receives notice regarding allegations of sexual abuse and sexual harassment occurring at another facility, the receiving facility must provide written notice of these allegations to the Superintendent of the destination facility within 72 hours. A review of documents for the past twelve months reflects that there were five (5) such referrals made by the HCF and one (1) referral made to the HCF. All referrals were reviewed during the onsite portion of the audit.

(b) Per DOCCS standard operating procedures, written notice of the aforementioned allegations must be provided as soon as possible, but not more than 72 hours after learning of the allegations. The HCF superintendent confirmed that all notices are sent by the Superintendent's Office to the destination facility as soon as possible, usually within 24 hours, but certainly within 72 hours. As well, all reviewed notices received by the Superintendent's Office within the past twelve months had been sent to the HCF within 72 hours of the inmate presenting allegations of sexual abuse and/or sexual harassment to agency staff.

(c) The HCF documents this notification through the use of e-mail Form 115.63. The Office of Special Investigations must also be provided a notice of the allegations.

(d) Upon receipt of said allegations, the Superintendent of the destination facility must then process the allegations in accordance agency policy. In this, the Office of Special Investigations associated with the destination unit will be responsible for conducting the investigation, as well as providing subsequent notification to the destination facility in accordance to policy.

Reasoning & Findings Statement:

This policy works to ensure agency staff are provided sufficient due process with respect to the timely notification of inmate allegations involving sexual abuse and sexual harassment. Within the last 12 months, the HCF has received one (1) incoming allegation of sexual abuse and sexual harassment from inmates who reported such at another DOCCS facility. Within the last 12 months, the HCF has submitted five (5) outgoing allegations of sexual abuse or sexual harassment from inmates who reported said allegations once they were reassigned to the HCF. Outgoing notifications from the HCF to other facilities were reviewed for timely submissions. In this, it was noted that all outgoing notifications sent by HCF completed within 72 hours of agency staff learning about the alleged abuse. Accordingly, agency policy,

	staff comments, and collaborative documentation all reflect that the HCF has satisfied the provisions of this standard.
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115.64	Staff first responder duties
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Documents:</p> <ul style="list-style-type: none"> · NYDOCCS Sexual Victimization Prevention Policy Manual, Section 115.65, 2/15/22 · DIR #4027, Sexual Victimization Prevention & Response, 7/21/22 · Watch Commander Quick Reference Chart, 8/29/22 · Watch Commander Sexual Abuse Tracking Sheet, 1/22 · PREA Pocket Card, 4/22 · HCF FOM #6.001, Coordinated Response to Reports of Sexual Victimization, 1/31/23 · HCF Training Roster, PREA Refresher, Civilians, 6-30-23 · HCF Training Roster, PREA Refresher, Correctional Officers, 6-30-23 · HCF Training Roster, PREA Refresher, Supervisors, 6-30-23 · HCF Training Roster, Preventing Sexual Abuse, Civilians, 6-30-23 · HCF Training Roster, Preventing Sexual Abuse, Correctional Officers, 6-30-23 · HCF Training Roster, Preventing Sexual Abuse, Supervisors, 6-30-23 · HCF Medical and Mental Health Providers Training Roster, 8/1/23 <p>Interviews:</p> <ul style="list-style-type: none"> · Agency PREA Coordinator · Agency Director of PREA Compliance

- Regional Assistant Deputy Superintendent (ADS) PREA Compliance Manager (PCM)
- Facility PREA Compliance Manager/PREA Point Person
- Facility Warden/Superintendent
- Investigative Staff
- Intermediate or Higher-Level Facility Staff
- Random Staff
- First Responder
- Inmates Who Reported Sexual Abuse

Site Review Observations:

- Review of employee training records
- Review of OSI narrative case files

Standard Subsections:

(a) Policy (HCF FOM #6.001) requires the first responding security staff member to immediately separate the alleged victim and abuser. After ensuring the safety of the victim, policy (DIR #4027, NYDOCCS Sexual Victimization Prevention Policy Manual, HCF FOM #6.001) requires staff to preserve and protect the crime scene until evidence collection is possible. If the first responder learns that the victim has been sexually abused, and the abuse occurred within a time period that still allows for the collection of physical evidence, the first responder should 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. Once the first responder learns that an inmate has been sexually abused, and the abuse occurred within a time period that still allows for the collection of physical evidence, the first responder should 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. In interviewing HCF security staff who had previously been first-responders, the actions taken were consistent with policy. Within the past twelve months, HCF has received two (2) allegations from inmates who claim to have been victims of sexual abuse. In one such instance, the facility received the report in

a time period that would still allow for the collection of physical evidence. As such, that individual was offered the opportunity for a SAFE/SANE exam, of which, he declined.

(b) Policy (DIR #4027, NYDOCCS Sexual Victimization Prevention Policy Manual, HCF FOM #6.001) requires that non-security first responders contain and assess the situation, notify their immediate supervisor or the Watch Commander, instruct the participants not to take any action that could destroy physical evidence, and report the specific details, in writing, to the Watch Commander as soon as possible, and no later than the end of the day. In speaking with non-uniformed staff who had previously been first-responders, their understanding of this requirement was expressed.

Reasoning & Findings Statement:

This standard works to determine whether facility staff understand their role when responding to inmate allegations of sexual abuse and sexual harassment. Of primary importance is separating and securing the alleged victim and abuser. Of this, all staff interviewed absolutely articulated that point. The majority of staff then articulated the need to preserve any evidence possibly remaining at the crime scene and on the alleged victim. A review of employee training records and class curriculums reflect staff have received required training specific to the preservation of evidence regarding allegations of sexual abuse and sexual harassment. It is also noted that the agency has provided all employees with a PREA response pocket card (Form DC159L). This pocket card outlines the critical steps including removing, separating, and isolating the reported victim, abuser, and witnesses; assessing the situation to determine if immediate on-site medical care is necessary; immediate notification to their supervisor or the Watch Commander; steps to be taken to preserve physical evidence on the person of the participants; securing of the crime scene; and completing a follow-up written report to the Watch Commander. It is also noted that immediate notification to a security supervisor and the Watch Commander provides assurance that all critical steps will be followed. This information, combined with agency policy, staff interviews, and facility training documentation sufficiently supports the expectations required by this standard.

115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Documents:

- NYDOCCS Sexual Victimization Prevention Policy Manual, Section 115.65, 2/15/22
- DIR #4027, Sexual Victimization Prevention & Response, 7/21/22
- Health Service Policy Manual #1.60, Sexual Assault, 7/22/22
- HCF FOM #6.001, Coordinated Response to Reports of Sexual Victimization, 1/31/23

Interviews:

- Agency PREA Coordinator
- Agency Director of PREA Compliance
- Regional Assistant Deputy Superintendent (ADS) PREA Compliance Manager (PCM)
- Facility PREA Compliance Manager/PREA Point Person
- Facility Warden/Superintendent
- Designated Staff Member Charged with Monitoring Retaliation
- Incident Review Team Member
- Intermediate or Higher-Level Facility Staff
- Investigative Staff
- Medical Staff
- SAFE/SANE Hospital Staff
- Random Staff
- Random/Targeted Inmates

Site Review Observations:

- Review of agency policies

	<ul style="list-style-type: none"> · Review of departmental level facility processes <p>Standard Subsections:</p> <p>(a) The HCF has developed a written institutional plan; namely, HCF FOM #6.001, to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership in response to incidents of sexual abuse.</p> <p>Reasoning & Findings Statement:</p> <p>This provision works to coordinate facility efforts so that victims of sexual abuse and sexual harassment receive adequate support services. The HCF FOM #6.001, details the coordinated response plan to an incident of inmate sexual abuse. In this, the roles of all facility staff are discussed and, perhaps even more importantly, the manner in which those roles interact with one another is outlined. This policy is a conveniently written overview of departmental responsibilities, equipped with notification and referral reminders. When asked, various departmental staff were able to articulate their role in the response process. As well, during inmate interviews, many were able to articulate the responsibilities of responding staff; thus demonstrating this process has been institutionalized within the facility. As such, the HCF has met all provisions within this standard.</p>
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115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents:</p> <ul style="list-style-type: none"> · NYDOCCS Sexual Victimization Prevention Policy Manual, 2/15/22 · DIR #4027, Sexual Victimization Prevention & Response, 7/21/22 · DIR #2110, Employee Discipline-Suspension from Duty During the Continuation of Disciplinary Proceedings, 3/24/21

- DIR #2114, Functions of the Bureau of Labor Relations, 7/10/19
- Contract: Professional, Scientific, and Technical Services Unit (2019-2023)
- Contract: Institutional Services Unit (2016-2021)
- Contract: Operational Services Unit (2016-2021)
- Contract: Security Supervisors Unit (2009-2016)
- Contract: Security Supervisors Unit (2016-2023)
- Contract: Administrative Services Unit (2016-2021)
- Union Contracts, Continuation After Expiration

Interviews:

- Agency Head
- Agency Contract Administrator
- Agency PREA Coordinator
- Agency Director of PREA Compliance
- Regional Assistant Deputy Superintendent (ADS) PREA Compliance Manager (PCM)
- Facility PREA Compliance Manager/PREA Point Person
- Facility Warden/Superintendent
- Administrative (Human Resources Staff)

Site Review Observations:

- Reviewed agency labor contracts

Standard Subsections:

- (a) Both the agency, as well as any other governmental entity responsible for

collective bargaining on the agency's behalf, are 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.

Reasoning & Findings Statement:

This provision allows the agency to protect inmates from having contact with sexual abusers and sexual harassers. Policy (DIR #2110, DIR #2114, DIR #4027) allows for employees to be suspended from duty pending the outcome of a sexual abuse or sexual harassment investigation. In speaking with OSI staff, the process of suspending or separating an employee from employment as a function of a negative sexual abuse or sexual harassment investigation was explained. It was also noted that the DOCCS has no reservations about discharging employees for engaging in sexual abuse and sexual harassment. Hence, the HCF has satisfactorily met all provisions within this standard.

115.67	Agency protection against retaliation
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>Documents:</p> <ul style="list-style-type: none"> · NYDOCCS Sexual Victimization Prevention Policy Manual, Section 115.67, 8/24/22 · DIR #4027, Sexual Victimization Prevention & Response, 7/21/22 · NYDOCCS Employees Manual, 2019 · Retaliation Monitoring Form, Incarcerated Individual, 8/22 · Retaliation Monitoring Form, Staff, 8/22 · PREA Monitoring, Protection from Retaliation, Incarcerated Individuals, 2/22 · HCF Retaliation Monitoring Form Inmate, 10/29/22 · HCF Retaliation Monitoring Form Inmate, 5/2/22

- HCF Retaliation Monitoring Form Inmate, 4/7/22
- HCF Retaliation Monitoring Form Inmate, 4/27/23
- HCF Retaliation Monitoring Form Inmate, 6/26/23
- HCF Retaliation Monitoring Form Inmate, 6/9/23
- HCF Retaliation Monitoring Form Inmate, 3/19/23
- HCF Retaliation Monitoring Form Inmate, 4/13/23
- HCF Retaliation Monitoring Form Inmate, 2/17/23
- HCF Retaliation Monitoring Form Inmate, 1/18/23
- HCF Retaliation Monitoring Form Inmate, 4/27/23
- HCF Retaliation Monitoring Form Inmate, 1/23/23

Interviews:

- Agency PREA Coordinator
- Agency Director of PREA Compliance
- Regional Assistant Deputy Superintendent (ADS) PREA Compliance Manager (PCM)
- Facility PREA Compliance Manager/PREA Point Person
- Facility Warden/Superintendent
- Designated Staff Member Charged with Monitoring Retaliation
- Random Staff
- Random Inmates
- Inmates Who Reported Sexual Abuse

Site Review Observations:

- Reviewed retaliation monitoring forms (staff/inmate)
- Reviewed retaliation monitoring log

Standard Subsections:

(a) The agency has numerous policies (Employee Manual, Sexual Victimization Prevention Policy Manual) that prohibit the retaliation for reporting sexual abuse or sexual harassment and for cooperating with a sexual abuse and sexual harassment investigations. In accordance to these policies, the facility's Assistant Deputy Superintendent PREA Compliance Manager and the facility PREA Point Person jointly monitor to prevent retaliation. The HCF complies with agency policy.

(b) Per policy (Sexual Victimization Prevention Policy Manual), each facility shall 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.

(c) Per policy (Sexual Victimization Prevention Policy Manual), for a minimum of four (4) months following a report of sexual abuse or sexual harassment, the facility shall monitor the conduct and treatment of:

- a. An inmate, including an incarcerated individual or releasee who reported an incident of sexual abuse or sexual harassment (including a third-party reporter)
- b. An inmate, including an incarcerated individual or releasee who was reported to have suffered sexual abuse or sexual harassment; and
- c. A staff member who reported an incident of sexual abuse or sexual harassment of an inmate.
- d. In accordance with policy (DIR #4027, Sexual Victimization Prevention Policy Manual), the Office of Special Investigations, Sex Crimes Division, shall be notified promptly of any complaint or evidence of retaliation.
- e. The complaint or evidence shall be reviewed by OSI for investigation or for further direction. Upon consultation with OSI, the facility shall act promptly to remedy any such retaliation. Monitoring to prevent retaliation shall continue for an additional period of at least four (4) months if the previous period of monitoring indicates a continuing need. Documentation during the audit time frame did include at least one instance of HCF staff performing regularly scheduled retaliation monitoring for a period of seven months.
- f. Within the audit time frame, the HCF has not had a reported incident of retaliation.

(d) Per policy (Sexual Victimization Prevention Policy Manual), in the case of inmates, such monitoring shall also include periodic in-person status checks approximately every 30 days.

(e) Per policy (Sexual Victimization Prevention Policy Manual), if any other individual (staff, volunteer, contractor, inmate, adolescent inmate, resident, etc.) who cooperates with an investigation expresses a fear of retaliation, the facility and agency shall take appropriate measures to protect that individual against retaliation as well.

(f) The auditor is not required to audit this provision.

Reasoning & Findings Statement:

This standard works to prevent retaliation against employees and inmates for reporting sexual abuse and sexual harassment or for having cooperated with an investigation into such. Agency policy, specifically, Sexual Victimization Prevention Policy Manual, provides a comprehensive overview of agency protection against sexual abuse and sexual harassment. In speaking with inmates, none noted that they had ever experienced retaliation for participating in a sexual abuse or sexual harassment related investigation. In speaking with agency staff, there weren't any recorded instances of retaliation noted within the audit time frame. In this, both the Regional ADS PCM and the HCF PREA Point Person provided a detailed explanation of the monitoring process. The auditor also observed the system currently in place at the HCF, which requires that incarcerated individuals who have filed claims of sexual abuse or sexual harassment are monitored for a minimum of 120 days following receipt of all claims that are not unfounded. Given the totality of the policies provided, staff knowledge regarding the process, and a demonstration of the HCF monitoring process, the HCF has exceeded the basic provisions of this standard.

115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents:

- DIR #4948, Protective Custody Status, 6/2/22
- Form 2168A, Sexual Victimization - Involuntary Protective Custody Recommendation, 4/22

Interviews:

- Agency PREA Coordinator
- Agency Director of PREA Compliance
- Regional Assistant Deputy Superintendent (ADS) PREA Compliance Manager (PCM)
- Facility PREA Compliance Manager/PREA Point Person
- Facility Warden/Superintendent
- Designated Staff Member Charged with Monitoring Retaliation
- Random Staff
- Staff Who Supervise Inmates in Segregated Housing
- Random Inmates

Site Review Observations:

- Observed the Segregated Housing Unit

Standard Subsections:

(a) Policy (DIR #4948) prohibits placing inmates who allege sexual abuse or to be at a high risk of sexual abuse, in involuntary segregated housing unless an assessment of all other available alternatives has been made and a subsequent determination concludes that there are no available alternatives means of separation from likely abusers. Within the past twelve months, the HCF has not placed any (0) inmates who have suffered sexual abuse in involuntary segregated housing pending completion of their assessment.

	<p>Reasoning & Findings Statement:</p> <p>Agency policy strictly prohibits the use of involuntary segregated housing as a de facto response to inmate safety concerns. Rather, as explained by the Regional PCM, the use of involuntary segregated housing should be considered only as the last available option, and even at that, as only a temporary measure. Within the reporting time frame, HCF administration did not utilize involuntary segregated housing for any inmate who had alleged sexual abuse. While conversations with the Regional PCM and the HCF Superintendent did indicate that if absolutely necessary, inmates would be placed in involuntary segregated housing, it would be their absolute last option. As such, the HCF has satisfied the requirements of this provision.</p>
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115.71	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents:</p> <ul style="list-style-type: none"> · DIR #0700, Office of Special Investigations, 9/20/22 · DIR #4027, Sexual Victimization Prevention & Response, 7/21/22 · NYDOCCS Sexual Victimization Prevention Policy Manual, Section 115.89, 7/11/22 · NYSP Implementation of the PREA Standards (5/2/14) · NY State Law, Criminal Procedure, Section 160.45, Prohibition against polygraph tests · NYSDOCCS OSI Manual Email, 4/19/23 · OSI Policy and Procedure – Table of Contents and Excerpts from Chapters 12, 21, & 32, 8/27/21 <p>Interviews:</p> <ul style="list-style-type: none"> · Agency PREA Coordinator

- Agency Director of PREA Compliance
- Regional Assistant Deputy Superintendent (ADS) PREA Compliance Manager (PCM)
- Facility PREA Compliance Manager/PREA Point Person
- Facility Warden/Superintendent
- Investigative Staff
- Inmates Who Reported Sexual Abuse

Site Review Observations:

- Reviewed supplement agency policy documentation
- Reviewed OSI training certifications
- Reviewed agency training records documenting OSI training curriculums
- HCF reviewed three (3) investigation files in full during onsite audit

Standard Subsections:

(a) Policy (DIR #4027, DIR #0700, Sexual Victimization Prevention Policy Manual) requires that the Office of Special Investigations (OSI) conduct prompt, thorough, and objective investigations in all instances of reported staff-on-inmate sexual abuse, sexual harassment, or retaliation concerning such an incident; as well as inmate-on-inmate sexual abuse, sexual harassment, or retaliation concerning such an incident. In conducting said investigations, agency policy requires that third-party and anonymous reports are also investigated. Interviews with both staff and incarcerated individuals confirmed that the facility would investigate all allegations of sexual abuse and sexual harassment regardless of how the facility became aware of such.

(b) Per policy (DIR #0700, OSI Policy Manual, Sexual Victimization Prevention Policy Manual), all Office of Special Investigations (OSI) investigators have received specialized training in excess of the generalized sexual abuse and sexual harassment training provided to other staff. Among other classes, OSI investigators participate in the National Institute of Corrections PREA Investigating Sexual Abuse in a Confinement Setting course. In interviewing an OSI investigator, said staff confirmed participation in numerous related courses while attending the Office of Special

Investigations Investigator School. Additionally, training curriculums, employee training certifications, as well as completed training rosters, provided additional documentation to support facility compliance.

The training curriculums associated with additional OSI investigator classes provided at the Office of Special Investigations Investigator School reflect that OSI investigators also receive training on proper interview techniques for speaking with sexual abuse victims, the proper use of Miranda and Garrity warnings, sexual abuse evidence collection within a confinement setting, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. In August of 2019, OSI staff completed training in Introduction to the Forensic Experiential Trauma Interview, an interview methodology driven by the neurobiology of trauma and memory that provides interviewers with a framework to maximize the opportunities for information collection about an individual's high stress or traumatic experiences in a neutral, equitable, and fair manner. In speaking with OSI staff, said staff confirmed their attendance of such trainings. As well, training certifications and completed training rosters further verify that OSI staff participate in these trainings.

(c) Per policy (DIR #4027, DIR #0700, OSI Policy Manual, Sexual Victimization Prevention Policy Manual) OSI investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data. Policy (DIR #0700) allows that OSI investigators interview alleged victims, suspected perpetrators, and witnesses. Investigators are also required to review prior reports and complaints of sexual abuse involving the suspected perpetrator.

(d) Policy (OSI Policy Manual) allows OSI investigators to compel interviews only after approval to do so is obtained by the prosecutor, as well as the Deputy Chief Investigator or the Assistant Deputy Chief Investigator. In speaking with the OSI Senior Investigator, the use of compelled interviews requires approval as they may pose a concern in subsequent judicial hearings.

(e) Per OSI Training Curriculums, agency investigators must 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 an inmate or staff member. In accordance to the Laws of New York, Criminal Procedure, Section 160.45, Prohibition Against Polygraph Tests, no district attorney, police officer or employee of any law enforcement agency shall request or require any victim of a sexual assault crime to submit to any polygraph test or psychological stress evaluator examination. During inmate interviews, no one claimed to have been subjected to a polygraph test, or other truth telling devices, as a function of any OSI investigation.

(f) Policy (DIR #4027, OSI Policy Manual, Sexual Victimization Prevention Policy Manual) requires administrative investigations to consider whether staff actions or failures to act contributed to the sexual abuse and sexual harassment. All administrative investigations are documented in written reports. As a function on that documentation, these reports should include a description of the physical evidence and testimonial evidence, the reasoning behind credible assessments, as well as investigative facts and findings. A review of files maintained by OSI specific to this facility provided detailed written report of both the allegations and the subsequent investigation.

(g) Policy (OSI Policy Manual, Sexual Victimization Prevention Policy Manual) requires that all criminal investigations be documented in written reports. As a function on that documentation, these reports should include a description of the physical evidence, testimonial evidence, and documentary evidence. A review of files maintained by OSI specific to this facility provided detailed written report of both the allegations and the subsequent investigation.

(h) As noted by OSI Investigative staff, all substantiated allegations of conduct that appear to be criminal are referred for prosecution.

(i) Policy (OSI Policy Manual, Sexual Victimization Prevention Policy Manual) requires that physical (paper) case records of the OSI be retained for a minimum of seven years. The electronic case file, including copies of the investigative report and other critical documents, shall be permanently retained.

(j) Policy (DIR #0700) mandates that employee investigations into administrative or criminal misconduct will continue through completion, regardless of whether the employee remains employed with the agency.

(k) The auditor is not required to audit this provision.

(l) Policy (DIR #0700, DIR #4027, DOCCS Website PREA page) requires facility and OSI staff to cooperate with outside investigators and endeavor to remain informed about the progress of the investigation.

	<p>Reasoning & Findings Statement:</p> <p>The Office of Special Investigation is the law enforcement branch operating inside of the DOCCS. As such, the DOCCS is authorized to conduct its own investigations into allegations of sexual abuse and sexual harassment. To work as a criminal investigator within the OSI, personnel must have law enforcement credentials. As well, OSI investigators must meet additional training requirements for working within a confinement setting. OSI staff do have the authority to investigate both criminal and administrative cases, to include collecting evidence, as well as interviewing victims, suspected perpetrators, and witnesses. OSI investigators have been trained on the standards of evidence required to support a finding of guilt in both criminal and administrative cases. As well, OSI investigators have been trained on due process and procedural requirements of both criminal and administrative cases. Lastly, as confirmed through interviews with OSI investigators, DOCCS and OSI investigative staff work corporately under a memorandum of understanding with members of the New York State Police and Bureau of Criminal Investigations in accomplishing mutually agreed upon objectives. This considered, the HCF has certainly met the provisions of the standard.</p>
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115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents:</p> <ul style="list-style-type: none"> · DIR #0700, Office of Special Investigations, 9/20/22 · DIR #4027, Sexual Victimization Prevention & Response, 7/21/22 · NYDOCCS Sexual Victimization Prevention Policy Manual, 2/15/22 · NYSDOCCS OSI Manual Email, 4/19/23 · OSI Policy and Procedure – Table of Contents and Excerpts from Chapters 12, 21, & 32, 8/27/21 <p>Interviews:</p> <ul style="list-style-type: none"> · Agency PREA Coordinator

- Agency Director of PREA Compliance
- Regional Assistant Deputy Superintendent (ADS) PREA Compliance Manager (PCM)
- Facility PREA Compliance Manager/PREA Point Person
- Facility Warden/Superintendent
- Investigative Staff

Site Review Observations:

- OSI Complete Policy Manual
- HCF reviewed three (3) investigation files in full during onsite audit

Standard Subsections:

(a) Policy (Office of Special Investigations Policy Manual) requires that OSI investigators not impose a standard of proof higher than that of the preponderance of evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. Policy clearly establishes the standard of proof required to substantiate claims of sexual abuse and sexual harassment. Specifically, the allegations are determined substantiated, unsubstantiated, or unfounded based on the preponderance of the evidence. For substantiated claims, the weight of the evidence must indicate that the allegation is more likely to be true than not true.

Reasoning & Findings Statement:

Agency policy requires that the OSI establish a standard of proof no higher than a preponderance of the evidence when determining whether allegations of sexual abuse or sexual harassment are substantiated. When interviewed, OSI staff confirmed that standard of proof to be slightly more than half. As well, the OSI Manual, issued by the OSI Deputy Commissioner, further confirms the required standard of proof. During the current audit time frame, OSI, along with PREA staff assigned to Hudson, have investigated three (3) sexual abuse and sexual harassment cases associated with the HCF. Using all of those cases as models, OSI explained the investigatory and disposition process, to ultimately include prosecutorial reviews, in great depth. Lastly, it should be noted that during the audit time frame, there have not been any cases

	sent to the District Attorney’s Office for prosecution. The HCF has satisfied all material provisions for this standard.
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115.73	Reporting to inmates
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Documents:</p> <ul style="list-style-type: none"> · DIR #0700, Office of Special Investigations, 9/20/22 · DIR #4027, Sexual Victimization Prevention & Response, 7/21/22 · NYDOCCS Sexual Victimization Prevention Policy Manual, 2/15/22 · NYSDOCCS OSI Manual Email, 4/19/23 · OSI Policy and Procedure – Table of Contents and Excerpts from Chapters 12, 21, & 32, 8/27/21 <p>Interviews:</p> <ul style="list-style-type: none"> · Agency PREA Coordinator · Agency Director of PREA Compliance · Regional Assistant Deputy Superintendent (ADS) PREA Compliance Manager (PCM) · Facility PREA Compliance Manager/PREA Point Person · Facility Warden/Superintendent · Designated Staff Member Charged with Monitoring Retaliation · Investigative Staff · Inmates Who Reported Sexual Abuse <p>Site Review Observations:</p>

- OSI Complete Policy Manual
- HCF reviewed three (3) investigation files in full during onsite audit

Standard Subsections:

(a) Policy (DIR #0700, OSI Policy Manual, Sexual Victimization Prevention Policy Manual) clearly establishes the standard of proof required to substantiate claims of sexual abuse and sexual harassment. Specifically, the allegations are determined substantiated, unsubstantiated, or unfounded based on a preponderance of the evidence. For substantiated claims, the weight of the evidence must indicate that the allegation is more likely to be true than not true. Following the complaint's disposition, a Notification of Investigative Determination will be sent to the complainant via Privileged Mail. Interviews with OSI staff confirm the facility's compliance with said policy when appropriate.

(b) Agency investigations are conducted by the Office of Special Investigations, Sex Crimes Division. As such, DOCCS possess all relevant information from the investigative agency so as to properly inform the inmate of its disposition. However, as noted by OSI staff, if the agency did not conduct an investigation, agency staff would request the relevant information from the investigative agency in order to inform the inmate. Interviews with OSI staff confirm the facility's compliance with said policy when appropriate.

(c) Policy (OSI Policy Manual, Sexual Victimization Prevention Policy Manual) requires that when an inmate has filed allegations of sexual abuse against an employee, unless those allegations are determined unfounded, the agency must notify the inmate whenever that staff member is no longer posted in the inmate's housing unit, no longer employed at the facility, the agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility, or when the agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility. Interviews with OSI staff confirm the facility's compliance with said policy when appropriate.

(d) Policy (OSI Policy Manual, Sexual Victimization Prevention Policy Manual) requires that when an inmate has filed allegations of sexual abuse against another inmate, the agency must notify the inmate whenever the alleged abuser has been indicted on a charge related to sexual abuse within the facility and whenever the agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility. Interviews with OSI staff confirm the facility's compliance with said

policy when appropriate.

(e) Policy (OSI Policy Manual, Sexual Victimization Prevention Policy Manual) requires that the agency document all such notifications or attempted notifications. Interviews with OSI staff confirm the facility's compliance with said policy when appropriate.

(f) Auditor is not required to audit this provision.

Reasoning & Findings Statement:

Agency policy requires administrative staff to provide inmates with dispositions for all claims of sexual abuse and sexual harassment. While all sexual abuse and sexual harassment claims are addressed by the OSI, in the event that an outside law enforcement agency conducts the investigation into an inmate's allegations, agency staff would remain actively engaged in that investigation. Agency policy provides that all inmates who have filed a previous sexual abuse and sexual harassment claim against agency staff or another inmate, receive notification upon a change in housing status for the inmate and a change in job status for the employee. Lastly, policy requires these notifications to be documented. Within the audit time frame, OSI staff have provided notifications to all known inmates who were assigned to the HCF at the time of notification. Notifications to HCF inmates were provided in written format. Documentation reflecting proper notifications were reviewed and in compliance with policy. As such, the HCF is complying with all parts of this provision.

115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: <ul style="list-style-type: none">· DIR #0700, Office of Special Investigations, 9/20/22· DIR #4027, Sexual Victimization Prevention & Response, 7/21/22· DIR #2111, Report of Employee Misconduct, 1/11/23· NYDOCCS Sexual Victimization Prevention Policy Manual, 2/15/22

- NYSDOCCS OSI Manual Email, 4/19/23
- OSI Policy and Procedure – Table of Contents and Excerpts from Chapters 12, 21, & 32, 8/27/21
- NYDOCCS Employee Manual, 2019
- PREA Presumptive Disciplinary Sanction for Staff Sexual Misconduct, 2/5/16

Interviews:

- Agency PREA Coordinator
- Agency Director of PREA Compliance
- Regional Assistant Deputy Superintendent (ADS) PREA Compliance Manager (PCM)
- Facility PREA Compliance Manager/PREA Point Person
- Facility Warden/Superintendent
- Investigative Staff
- Random Staff

Site Review Observations:

- OSI Complete Policy Manual
- HCF reviewed three (3) investigation files in full during onsite audit

Standard Subsections:

(a) Policy (DIR #4027) clearly advises staff that incarcerated individuals do not have the legal ability to consent to sexual relations while incarcerated. As such, any person who engages in sexual conduct with an inmate is committing a crime and will be prosecuted to the fullest extent of the law. Policy (NYDOCCS Employee Manual) further states, any perpetrator of a sexual abuse incident, sexual harassment, or act of staff voyeurism will be dealt with severely through discipline or prosecution to the fullest extent permitted by law. Interviews with OSI staff, as well as HCF facility

administration, confirm their adherence to agency policy specific to employee disciplinary and termination processes for any employee found to be engaging in acts of sexual abuse or sexual harassment.

(b) Policy (DIR #4027, DIR #2111) continues by noting that any perpetrator of a sexual abuse or sexual harassment will be dealt with severely through discipline or prosecution to the fullest extent permitted by law. Policy (Memorandum: Presumptive Disciplinary Sanction for Staff Sexual Misconduct) notes that termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual abuse of an inmate. Disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) shall continue to be 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. Again, interviews with OSI staff, as well as HCF facility administration, confirm their adherence to agency policy specific to employee disciplinary and termination processes for any employee found to be engaging in acts of sexual abuse or sexual harassment. During the audit time frame, there have not been any (0) employees assigned to the HCF who have been disciplined and terminated (or resigned prior to termination) for violating agency sexual abuse or sexual harassment policies.

(c) Policy (DIR #4027, DIR #2111) notes that any perpetrator of a sexual abuse or sexual harassment incident will be dealt with severely through discipline or prosecution to the fullest extent permitted by law. Policy (DIR #2111) states when the OSI receives a report of staff sexual misconduct, they shall evaluate the facts and circumstances of the report together with any other available information and consult with the appropriate Bureau of Labor Relations representative regarding appropriate action, including removal of the employee from contact with any inmates pending the outcome of an investigation. During the audit time frame, the HCF has not had any (0) staff who have been disciplined, short of termination, for any violation of agency sexual abuse or sexual harassment policies.

(d) Policy (OSI Policy Manual) notes that 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, are reported to law enforcement agencies. Also, 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, are reported to the relevant licensing bodies. During the audit time frame, there have not been any (0) staff reported to law enforcement or licensing boards following their termination.

	<p>Reasoning & Findings Statement:</p> <p>These standards work to ensure agency staff understand the gravity and the criminal nature of having sexual relations with incarcerated persons. The State of New York has certainly made the consequences of engaging in such behavior exceptionally clear. It should also be noted that during the audit time frame, there have not been any staff members assigned to the HCF who have violated agency sexual abuse or sexual harassment policies. Consequently, the HCF has not be required to discipline, short of termination, any employees or report any such persons to law enforcement agencies or relevant licensing bodies. As such, the HCF has satisfied the provisions of this standard.</p>
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115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents:</p> <ul style="list-style-type: none"> · DIR #4027, Sexual Victimization Prevention & Response, 7/21/22 · DIR #2111, Report of Employee Misconduct, 1/11/23 · DIR #4750, Volunteer Services Program, 7/21/20 · Form #4750C, Standards of Conduct for Volunteers within the New York State Department of Corrections and Community Supervision, 6/20 · Form #MFVS3087, Acknowledgement of “Standards of Conduct for Volunteers” and All Applicable Policies, 12/18 · Policy on the Prevention of Sexual Victimization (Revised), 8/19/22 <p>Interviews:</p> <ul style="list-style-type: none"> · Agency Contract Administrator · Agency PREA Coordinator · Agency Director of PREA Compliance

- Regional Assistant Deputy Superintendent (ADS) PREA Compliance Manager (PCM)
- Facility PREA Compliance Manager/PREA Point Person
- Facility Warden/Superintendent
- Investigative Staff
- Administrative (Human Resources Staff)
- Contractors Who May Have Contact With Inmates

Site Review Observations:

- Review contractor files

Standard Subsections:

(a) Policy (Form #4750C) advises volunteers that while they are working with inmates on a regular basis, a professional relationship must be maintained. In this, care should be taken to avoid becoming emotionally involved with inmates. DOCCS has zero tolerance for sexual abuse and sexual harassment as sexual abuse and sexual harassment violate Department rules and threaten security. All allegations of sexual abuse, sexual harassment, or retaliation for reporting such an incident or participating in an investigation will be thoroughly investigated. It is a crime for a volunteer or intern, who provides direct services to inmates in a state correctional facility, to engage in a sexual act with an inmate or parolee assigned to that facility, even if the inmate or parolee willingly participates in the act. Furthermore, any perpetrator of a sexual abuse or sexual harassment incident will be dealt with severely through discipline or prosecution to the fullest extent permitted by law and will be reported to any relevant licensing bodies.

(b) Policy (DIR #4027) notes that any perpetrator of a sexual abuse or sexual harassment incident will be dealt with severely through discipline or prosecution to the fullest extent permitted by law. Policy (DIR #2111) states when the OSI receives a report of staff sexual misconduct, the facts and circumstances of the report, together with any other available information, shall be evaluated in consultation with the appropriate Bureau of Labor Relations representative regarding appropriate action, including removal of the employee from contact with any inmates pending the outcome of the investigation. During the audit time frame, the HCF did not have any

	<p>(0) volunteers working within the facility. During the audit time frame, the HCF did not have any (0) contractors who violated the agency’s sexual abuse or sexual harassment policy.</p> <p>Reasoning & Findings Statement:</p> <p>Policy expressly states that contactors and volunteers who engage in sexual abuse with inmates will be removed from contact with inmates pending the outcome of the investigation. Contractors or volunteers who engage in sexual abuse will be reported to law enforcement and to any relevant licensing body. These persons will also be subject to criminal sanctions. During the audit time frame, the HCF has not had any volunteers working within the facility. Additionally, there were not any contractors who engaged in sexual abuse or sexual harassment of any incarcerated individuals. During the HCF contractor interviews, both the prohibition against sexual abuse and sexual harassment of inmates, as well as the consequences of having engaged such, were clearly known. Hence, the provisions of this standard have been met and HCF is in compliance with such.</p>
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115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents:</p> <ul style="list-style-type: none"> · DIR #4027, Sexual Victimization Prevention & Response, 7/21/22 · DIR #4932, Chapter V, Standards Behavior & Allowances, 10/2/18 · DIR #4401, Guidance & Counseling Services, 8/21/20 · DIR #6910, Criminal Prosecution of Incarcerated Individuals, 6/3/22 · NYDOCCS Memorandum, Policy on the Prevention of Sexual Victimization (Revised), 8/19/22 · NYDOCCS The Prevention of Sexual Abuse in Prison, What You Need to Know, English, (03/22) · NYDOCCS Hearing Officer Reference Book, 4/1/17 · NYDOCCS Hearing Officer Sanction Guidelines, 7/22

Interviews:

- Agency PREA Coordinator
- Agency Director of PREA Compliance
- Regional Assistant Deputy Superintendent (ADS) PREA Compliance Manager (PCM)
- Facility PREA Compliance Manager/PREA Point Person
- Facility Warden/Superintendent
- Investigative Staff
- Medical/Mental Health Staff
- Random Staff
- Random Inmates

Site Review Observations:

- Review of inmate files

Standard Subsections:

(a) Policy (Dir #4932) provides the standards associated with all disciplinary hearings. Policy (Hearing Officer Reference Book) further notes that following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, said inmate is subject to disciplinary sanctions pursuant to formal disciplinary processes. During the audit time frame, the HCF has not had any (0) administrative findings of inmate-on-inmate sexual abuse or any criminal findings of inmate-on-inmate sexual abuse.

(b) Policy (Hearing Officer Reference Book, Appendix B & Appendix C) ensures that disciplinary sanctions imposed 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. Specifically,

sanctions consider aggravating and mitigating factors. To promote fairness, the sanctions can be read as an objective grid.

(c) When considering an inmate's disciplinary sanctions, policy (Hearing Officer Reference Book) does consider how an inmate's mental disabilities or mental illness contributed to his behavior.

(d) Per policy (DIR #4401), the agency offers a Sex Inmate Counseling and Treatment Program for inmates who are convicted sex inmates, as well as other inmates that the Department identifies as likely to benefit from sex inmate counseling and treatment. A finding of guilt at a tier hearing for a sexually abusive and/or assaultive act will qualify an inmate for this program. An inmate identified as needing the Sex Inmate Counseling and Treatment Program will be transferred to facilitate participation.

(e) Per policy, (DIR #4027, DIR #6910), any incident of sexual assault on staff by an inmate or parolee will be immediately reported to the Office of Special Investigations and handled in accordance with established Department policy for investigation and criminal prosecution of the inmate.

(f) Per policy (DIR #4027), inmates will not be subject to retaliation of any kind for good faith reporting of sexual abuse, sexual harassment, or sexual threats. A report made in good faith based upon a reasonable belief that the alleged conduct did occur does not constitute falsely reporting an incident or lying for the purpose of disciplinary action, even if the investigation does not establish evidence sufficient to substantiate the allegations.

(g) Per policy (DIR #4027), inmate-on-inmate sexual abuse is defined as when one or more inmates engage in sexual conduct, including sexual contact, with another inmate against his or her will or by use of threats, intimidation, or other coercive actions.

Reasoning & Findings Statement:

The inmate disciplinary process is a formal means to address institutional misconduct. The HCF uses a progressive disciplinary system, which allows for consideration of aggravating and mitigating factors. Within the audit time frame, the HCF has not processed any administrative findings of guilt for inmate-on-inmate

	<p>sexual abuse or any criminal findings of guilt regarding inmate-on-inmate sexual abuse that occurred at the facility. In considering agency policies, facility procedures, staff interviews, and inmate comments, HCF is compliant with the disciplinary standards.</p>
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115.81	Medical and mental health screenings; history of sexual abuse
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Documents:</p> <ul style="list-style-type: none"> · NYDOCCS Sexual Victimization Prevention Policy Manual, Section 115.41, 2/15/22 · DIR #4101, Inmate Suicide Prevention, 7/25/19 · DIR #4301, Mental Health Satellite Services and Commitments to CNYPC, 8/3/22 · Health Services Manual Policy (HSMP) #1.44, Health Screening of Inmates, 1/4/23 · HCF FOM #6.002, PREA Risk Screening, 1/31/23 · Form #3278, PREA Screening for Reception/Classification, Transfers or SHU/RRRU/SDP/RMHU/TBU/BHU/CAR/Diversion Unit Admissions, 6/22 · HCF DOCCS - Mental Health Referral, 7/23/23 · HCF Form 115.41M, PREA Risk Screening Form, 7/23/23 · HCF DOCCS - Mental Health Referral, 4/28/23a · HCF DOCCS - Mental Health Referral, 4/28/23b · HCF DOCCS - Mental Health Referral, 8/2/22 · HCF DOCCS - Mental Health Referral, 1/23/23 · HCF DOCCS - Mental Health Referral, 6/1/23 · HCF Form #3278, PREA Screening for Reception/Classification, Transfers or SHU/RRRU/SDP/RMHU/TBU/BHU/CAR/Diversion Unit Admissions, 3/20/23 · HCF Form #3278, PREA Screening for Reception/Classification, Transfers or SHU/RRRU/SDP/RMHU/TBU/BHU/CAR/Diversion Unit Admissions, 6/23/23

- HCF Form #3278, PREA Screening for Reception/Classification, Transfers or SHU/RRRU/SDP/RMHU/TBU/BHU/CAR/Diversion Unit Admissions, 7/19//23

Interviews:

- Agency PREA Coordinator
- Agency Director of PREA Compliance
- Regional Assistant Deputy Superintendent (ADS) PREA Compliance Manager (PCM)
- Facility PREA Compliance Manager/PREA Point Person
- Intake Staff
- Medical Staff
- Staff Who Perform Screening for Risk of Victimization and Abusiveness
- Inmates Who Reported Sexual Victimization During Risk Screening

Site Review Observations:

- Observed Medical Department
- Review PREA screening tools

Standard Subsections:

(a) Policy (DIR #4101, HSMP #1.44) notes that upon arrival at a DOCCS facility, every newly received or transferred inmate will receive a health screening by a Registered Nurse (RN). This screening will include an inquiry into the inmate's current and past health, mental health, and PREA history, as well as an immediate referral of any inmate to a health provider if indicated. During the audit time frame, 100% of inmates received at the HCF who disclosed prior victimization during screening were offered a follow-up meeting with a medical or mental health practitioner.

(b) Per policy (DIR #4301), regular mental health referrals are addressed within a

timeframe consistent with the nature of the referral and within 14 days in accordance with the OMH Central New York Psychiatric Center (CNYPC) Corrections Based Operations (CBO) Policy #1.3. During the audit time frame, 100% of inmates received at the HCF who had previously perpetrated sexual abuse, as indicated during the screening, were offered a follow-up meeting with a mental health practitioner.

(c) Per policy (DIR #4301), regular mental health referrals are addressed within a timeframe consistent with the nature of the referral and within 14 days in accordance with CNYPC Corrections Based Operations (CBO) Policy #1.3.

(d) Per HSMP #1.44, in accordance with the Prison Rape Elimination Act (PREA) Standards, 28 C.F.R. 115.81, any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by federal, state, or local laws. Medical and mental health practitioners shall obtain informed consent (HIPAA release) 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. Informed consent/HIPAA release is not required for a referral to the Office of Mental Health. In speaking with Medical and Mental Health staff, adherence to this requirement is strictly observed.

(e) Per HSMP #1.44, in accordance with the Prison Rape Elimination Act (PREA) Standards, 28 C.F.R. 115.81, any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by federal, state, or local laws. Medical and mental health practitioners shall obtain informed consent (HIPAA release) 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 years. Informed consent/HIPAA release is not required for a referral to the Office of Mental Health. In speaking with Medical and Mental Health staff, adherence to this requirement is strictly observed. It is further noted that the HCF is an adult facility and does not incarcerate persons under the age of 18 years.

Reasoning & Findings Statement:

During the audit time frame, 100% of inmates who had disclosed prior victimization during risk screening were offered a follow-up meeting with a medical or mental health practitioner. As well, during the audit time frame, 100% of inmates who had

	<p>previously perpetrated sexual abuse as indicated during risk screening were offered a follow-up meeting with a medical or mental health practitioner. The HCF is providing routine and regular medical screens and other health services as required by policy. Documentation specific to the PREA Screening for Reception/Classification reflects the appropriate use of the screening tool to determine qualified housing and medical needs. Hence, the facility is meeting all the provisions as established in this standard.</p>
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115.82	Access to emergency medical and mental health services
	<p>Auditor Overall Determination: Exceeds Standard</p> <p>Auditor Discussion</p> <p>Documents:</p> <ul style="list-style-type: none"> · DIR #4027, Sexual Victimization Prevention & Response, 7/21/22 · HSMP #1.60, Sexual Assault, 7/22/22 · HSMP #1.12B, Incarcerated Individual Bloodborne Pathogens Exposure Protocol, 12/3/21 · NYDOCCS Medical Quick Reference Chart for Sexual Abuse/Sexual Harassment Related Complaints, 8/29/22 · NY Public Health Law, Section 2807-c, General Hospital Inpatient Reimbursement, 4/1/14 · NY State SAFE/SANE Hospitals, 3/15/17 · HCF FOM #6.001, Coordinated Response to Reports of Sexual Victimization, 1/31/23 · HCF DOCCS - Mental Health Referral, 1/26/23 · HCF Incarcerated Individual Injury Report, 1/23/23 <p>Interviews:</p> <ul style="list-style-type: none"> · Agency PREA Coordinator · Agency Director of PREA Compliance

- Regional Assistant Deputy Superintendent (ADS) PREA Compliance Manager (PCM)
- Facility PREA Compliance Manager/PREA Point Person
- Medical Staff
- SAFE/SANE Hospital Staff
- Security Staff and/or Non-Security Staff Who Have Acted As First Responders
- Inmates Who Reported Sexual Abuse

Site Review Observations:

- Observed Medical Department
- Reviewed medical screening tools

Standard Subsections:

(a) In accordance to the coordinated response to a sexual assault protocol, HCF FOM #6.001 allows either Health Services Staff or the on-duty Physician to initiate the proper procedures as outlined in Health Services Policy Manual #1.60, Sexual Assault. This medical evaluation assists in determining if referrals to an outside hospital emergency department are medically indicated based on evidence collection or physical trauma. During interviews with medical and mental health personnel, staff affirmed that said services are provided in accordance to the professional judgement of qualified practitioners.

(b) HCF FOM #6.001 allows for a possible schedule of events where there are only part time or no full time Medical or Mental Health staff present at the facility. To this effect, yes; security staff may assist in addressing the inmate's emergency needs pending qualified mental health/medical assistance.

(c) HCF FOM #6.001 requires that after responding to an emergency scene, security shall immediately and separately escort each inmate involved in the incident to the Medical Department regardless of when the incident is alleged to have occurred. Medical staff will be advised of the reported involvement of each participant. As there is a 2-hour optimum window to initiate medical post exposure prophylactic treatment,

time is of the essence to have participants seen by medical staff as soon after the incident as is possible.

(d) New York Public Health Law, Section 2807-c states that no general hospital shall refuse to provide hospital services to a person presented or proposed to be presented for admission to such general hospital by a representative of a correctional facility. Additionally, in speaking with the Medical Staff, the auditor was informed that at no time would the Medical Department ever refuse to see an inmate due to the inmate's inability to pay. Inmates in New York DOCCS custody are not charged a co-pay or other fee in connection with the provision of medical or mental health care. Interviews with relevant incarcerated individuals noted that a fee had not been assessed to any person for medical statement pursuant to a PREA analysis.

Reasoning & Findings Statement:

This standard is designed to provide inmates access to emergency medical and mental health services. In this, facility staff are meeting all the provisions within this standard. Policy (HCF FOM #6.001) allows that upon receipt of an inmate into the Medical Department, Medical staff shall determine the inmate's course of treatment; specifically, what is medically indicated based on evidence collection or physical trauma. Lastly, during the audit period, there have been instances where inmates required access to emergency medical and mental health services as a result of sexual abuse allegations. In all such cases, inmates were provided proper access to said facilities. Documentation reflecting access to medical and mental health care, to include outside services, was reviewed. In reviewing the totality of the information provided, the HCF has met the minimums provisions of this standard via emergency (24-hour) access to qualified medical staff. The HCF has also exceeded the minimums provisions of this standard by not only providing timely access to mental health services, but also by ensuring that a qualified mental health practitioner is available 24-hours a day.

115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	Documents:

- DIR #4101, Inmate Suicide Prevention, 7/25/19
- HSMP #1.60, Sexual Assault, 7/22/22
- HSMP #1.12B, Incarcerated Individual Bloodborne Pathogens Exposure Protocol, 12/3/21
- NYDOCCS Medical Quick Reference Chart for Sexual Abuse/Sexual Harassment Related Complaints, 8/29/22
- NY Public Health Law, Section 2807-c, General Hospital Inpatient Reimbursement, 4/1/14
- NY State SAFE/SANE Hospitals, 3/15/17
- OMH MOU Excerpt, Standard 115.83
- HCF FOM #6.001, Coordinated Response to Reports of Sexual Victimization, 1/31/23

Interviews:

- Agency PREA Coordinator
- Agency Director of PREA Compliance
- Regional Assistant Deputy Superintendent (ADS) PREA Compliance Manager (PCM)
- Facility PREA Compliance Manager/PREA Point Person
- Medical Staff
- Mental Health Staff
- SAFE/SANE Hospital Staff
- Inmates Who Reported Sexual Abuse

Site Review Observations:

- Observed Medical Department
- Review medical screening tools

Standard Subsections:

(a) HSPM #1.60 requires that all allegations of sexual assault must be evaluated immediately by the facility health staff.

(b) HSPM #1.60 notes that the victim of an alleged sexual assault will be medically evaluated regardless of whether or not the allegation has been independently verified prior to the victim's presentation for treatment. As a function of the medical evaluation for all involved inmates, the immediate completion and submission of a DOCCS Mental Health Referral, Form 3150, to Mental Health staff is required.

(c) HSPM #1.60 notes that in accordance with the PREA Standards 115.21 and 115.82, all victims of sexual abuse shall be afforded access to forensic medical examinations at an outside facility, without financial cost, where evidentiary or medically appropriate. All 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 according to their professional judgment. If not referred to an outside hospital emergency department, the inmate is admitted to the infirmary after evaluation by a primary care provider or, if none on site, after consultation with the on-call physician. Each case will be discussed and documented in the Ambulatory Health Record. Any necessary post exposure testing and treatment will be initiated. Emergency contraception is available from a contracted pharmacy services vendor. The immediate completion and submission of a DOCCS Mental Health Referral, Form 3150, to Mental Health staff is required.

(d) During the audit time frame, HCF did not house any biological females who could suffer sexually abuse by way of vaginal penetration resulting in pregnancy. As such, pregnancy tests would not be medically necessary.

(e) During the audit time frame, HCF did not house any biological females who could suffer sexually abuse by way of vaginal penetration resulting in pregnancy. As such, timely and comprehensive information about, and timely access to, all lawful pregnancy-related medical services would not be medically necessary.

(f) HSPM #1.60 indicates that when medically appropriate, HIV prophylactic medications will be offered prior to transportation to the emergency department. The optimal time frame for post exposure prophylaxis (PEP) is within 2 hours post

exposure.

(g) HSPM #1.60 notes that all treatment, including outside hospital services, will be provided to inmates without financial liability and regardless of whether the inmate cooperates in any investigation arising from the incident. Inmate interviews confirm that a fee is not assessed for medical treatment related to sexual abuse.

(h) HSPM #1.60 requires that for all involved inmates, immediate completion and submission of a DOCCS Mental Health Referral, Form 3150, to Mental Health staff is required. HSPM #1.44 further requires that any subsequent mental health evaluation is conducted within 60 days of learning of such abuse history. Interviews with mental health staff confirm adherence to this policy.

Reasoning & Findings Statement:

This standard is designed to ensure ongoing medical and mental health care for sexual abuse victims and abusers. The HCF offers qualified and coordinated medical and mental health care regardless of an inmate's ability to pay for said services. As appropriate, inmates are provided the opportunity to attend follow-up treatments. As the medical services provided are consistent with the community level of care, the HCF Medical and Mental Health Department has satisfied every aspect of the provisions and is in compliance with the standards. Additionally, because this level of care is coordinated to ensure that inmates receive every aspect of sexual abuse treatment, addressing both medical and mental health needs on a regular and timely basis, without regard to cost, the opportunity for treatment received in this institutional setting far exceeds that of individuals seeking similar treatments within the community. It should also be noted that care is automatically continued following transfer to or placement in other NYDOCCS facilities. As well, upon release from the DOCCS, facility staff will coordinate with service providers in the community to ensure medical and mental health care is continued even beyond the prison walls. Accordingly, the HCF Medical and Mental Health Departments have collectively exceeded the provisions of this standard.

115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents:

- DIR #4027, Sexual Victimization Prevention & Response, 7/21/22
- NYDOCCS Sexual Victimization Prevention Policy Manual, 2/15/22
- Policy Memorandum: Prison Rape Elimination Act Procedural Enhancement (5/9/14)
- HCF Incident Review Tracking Sheet, 2022
- HCF Sexual Abuse Incident Review Checklist, 12/19/22

Interviews:

- Agency PREA Coordinator
- Agency Director of PREA Compliance
- Regional Assistant Deputy Superintendent (ADS) PREA Compliance Manager (PCM)
- Facility PREA Compliance Manager/PREA Point Person
- Facility Warden/Superintendent
- Incident Review Team Member
- Random Inmate Interviews

Site Review Observations:

- Reviewed Incident Review documents

Standard Subsections:

(a) In accordance to the DOCCS Prison Rape Elimination Act Procedural Enhancement memo, as well as the NYDOCCS Sexual Victimization Prevention Policy Manual, sexual abuse incident reviews are required under section 115.86 of the PREA Standards following the completion of the investigation by the Office of Special Investigations. A review must be conducted within 30 days of the conclusion of every

investigation, unless the allegation is determined to be unfounded. During the audit time frame, the HCF has conducted one Sexual Abuse Incident Review of an alleged sexual abuse. Relevant documentation was reviewed. In that, it is noted that HCF conducts these reviews within 30 days of the conclusion of every investigation. In speaking with the Regional ADS PREA Compliance Manager, the HCF PREA Point Person, and the HCF Superintendent, each person explained their role within the Incident Review process.

(b) In accordance to the DOCCS Prison Rape Elimination Act Procedural Enhancement memo, as well as the NYDOCCS Sexual Victimization Prevention Policy Manual, an Incident Review must be conducted within 30 days of the conclusion of the investigation, unless the allegation is determined to be unfounded. Relevant documentation was reviewed. In that, it is noted that HCF conducts these reviews within 30 days of the conclusion of every investigation. In speaking with the Regional ADS PREA Compliance Manager, HCF PREA Point Person, and the HCF Superintendent, each person explained their role within the Incident Review process.

(c) In accordance to the DOCCS Prison Rape Elimination Act Procedural Enhancement memo, as well as the NYDOCCS Sexual Victimization Prevention Policy Manual, the PREA Standards require the review team to include upper-level facility management officials, with input from line supervisors, investigators, and medical or mental health practitioners. The chair of the review team will be the Assistant Deputy Superintendent PREA Compliance Manager (ADS/PREA). For those facilities that do not currently have an ADS/PREA, policy requires that an ADS/PREA from a nearby facility or one of the Correctional Facility Operations Specialists (CFOS) in the Sexual Abuse Prevention & Education Office, to participate and be responsible for coordinating the review and completing the review form. A Captain, typically the PREA Point Person, will be the security representative on the review team. A third member of the multi-disciplinary review team shall be designated by the Superintendent for each review. The designee must be Salary Grade 22 or equivalent, or higher. During the audit time frame, HCF did conduct one (1) Incident Review in accordance to policy. Relevant documentation was reviewed. In speaking with the Regional ADS PREA Compliance Manager, HCF PREA Point Person, and the HCF Superintendent, each person explained their role within the Incident Review process.

(d) In accordance to the DOCCS Prison Rape Elimination Act Procedural Enhancement memo, as well as the NYDOCCS Sexual Victimization Prevention Policy Manual, a standardized form is utilized to capture the review and any recommendations of the review team; namely, the Sexual Abuse Incident Review template. This template considers whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse. It considers whether the incident or allegation was motivated by race, ethnicity, gender identity, sexual orientation, gang affiliation, an inmate's status or

perceived status within any of the aforementioned categories, as well as other group dynamics at the facility. In conducting incident reviews, the review team does consider adequacy of staffing levels in the area during different shifts, whether physical barriers in the area may enable abuse, and whether monitoring technology should be deployed or augmented to supplement supervision by staff. Following consideration, the review team prepares a report of its findings, including recommendations for improvement, and submits said report to the Superintendent and the PREA Coordinator. During the audit time frame, HCF conducted one (1) such Incident Review. In speaking with the Regional ADS PREA Compliance Manager, HCF PREA Point Person, and the HCF Superintendent, each person explained their role within the Incident Review process.

(e) Upon completion of the incident review report, the facility is required to either implement the recommendations for improvement or to document its reasons for not doing so.

Reasoning & Findings Statement:

During the audit time frame, HCF has conducted criminal and administrative investigations of alleged sexual abuse. Once investigations are completed, their conclusions are generally followed by a Sexual Abuse Incident Review. If recommendations are given as a function of the review, the HCF Superintendent noted that staff are required to make disposition on any such recommendations in a timely manner. During the audit time frame, the HCF did conduct one (1) such Incident Review. Given the totality of the information reviewed, policies, documented evidence, staff and inmate interviews, it is apparent that the HCF maintains compliance with each of the aforementioned provisions and is thus in compliance with the entire standard.

115.87	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: <ul style="list-style-type: none"> · DIR #4027, Sexual Victimization Prevention & Response, 7/21/22 · NYDOCCS Sexual Victimization Prevention Policy Manual, Section 115.87, 2/15/

22

- NYDOCCS Office of Program Planning Research and Evaluation PREA Data Collection, Review, Retention and Publication Manual, 5/12/21

- Bureau of Justice Statistics, 2020 Survey of Sexual Victimization Data Submission Confirmation Page

Interviews:

- Agency PREA Coordinator
- Agency Director of PREA Compliance
- Regional Assistant Deputy Superintendent (ADS) PREA Compliance Manager (PCM)
- Facility PREA Compliance Manager/PREA Point Person
- Facility Warden/Superintendent

Site Review Observations:

- Monthly Sexual Abuse/Threat Incident Summary reviews
- Extensive review of agency website/PREA section

Standard Subsections:

(a) Policy (DIR #4027, Sexual Victimization Prevention Policy Manual) mandates that the Deputy Superintendent for Security of each correctional facility shall be responsible for maintaining a Monthly Sexual Abuse/Threat Incident Summary that shall be a chronological listing of each sexual abuse, sexual harassment, threat incident, or complaint that occurs during a given month. This information will be collected using Form #2103SAll, Attachment A.

(b) Per Policy (DIR #4027, Sexual Victimization Prevention Policy Manual), at the end of each month, the summary shall be forwarded to the Deputy Commissioner for Correctional Facilities and the Associate Commissioner for Prison Rape Elimination Act (PREA) Compliance.

(c) Per the PREA Data Collection, Review, Retention and Publication Manual, the confidential incident-based data includes all information necessary to answer all questions from the most recent version of the Survey of Sexual Violence (SSV) conducted by the Bureau of Justice Statistics.

(d) Per the PREA Data Collection, Review, Retention and Publication Manual, this includes, but is not limited to Office of Special Investigations, Sex Crime Division data, sexual abuse incident review information, unusual incidents, personnel records, confidential security information, inmate records, disciplinary data, and the inmate locator system. As a result of comprehensive data collection and review, the PREA Analyst maintains separate incident-based data from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews and ensures that said data is securely retained.

(e) Since the passage of S4118 in 2007, the State of New York does not confine inmates in private, or otherwise for-profit, correctional institutions.

(f) Per the PREA Data Collection, Review, Retention and Publication Manual, an annual report is prepared that includes identifying possible or potential problem areas, as well as corrective action for each facility and the agency as a whole. The annual report includes a comparison of the current year's data and corrective actions with those from prior years, thus providing an assessment of progress in addressing sexual abuse. The report is provided in compliance with PREA Standards §115.87 Data Collection and § 115.88 Data Review for Corrective Action and approved by the Associate Commissioner/PREA Coordinator and the Commissioner. Before making aggregated sexual abuse data publicly available, the agency removes all personal identifiers. The report is then made available to the public through the DOCCS website.

Reasoning & Findings Statement:

This standard works to ensure that specific data relative to promoting sexual safety within a correctional institution is collected on a monthly basis. That data is then aggregated and made available for public review. The HCF has complied with the timely collection of said data, subsequently furnishing it to appropriate entities as required. Hence, the HCF has met all provisional requirements and is in compliance with this standard.

115.88 Data review for corrective action

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents:

- NYDOCCS Sexual Victimization Prevention Policy Manual, Section 115.88, 7/11/22
- PREA Data Collection, Review, Retention, and Publication Manual, 5/12/21
- DOCCS Website, 8/19/22
- NYDOCCS Annual Report on Sexual Victimization, 2015-2019, Published 2022

Interviews:

- Agency Head
- Agency PREA Coordinator
- Agency Director of PREA Compliance
- Regional Assistant Deputy Superintendent (ADS) PREA Compliance Manager (PCM)
- Facility PREA Compliance Manager/PREA Point Person
- Facility Warden/Superintendent

Site Review Observations:

- Extensive review of agency website/PREA section

Standard Subsections:

- (a) Per the PREA Data Collection, Review, Retention and Publication Manual, the PREA Analyst prepares and aggregates data collected in coordination with the Sexual

Abuse Prevention & Education Office and the Office of Special Investigations Sex Crimes Division in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices and training throughout the year. An annual report is prepared that includes identification of problem areas, as well as corrective action for each facility and the agency as a whole.

(b) Per the PREA Data Collection, Review, Retention and Publication Manual, the annual report includes a comparison of the current year's data and corrective actions with those from prior years, thus providing an assessment of progress in addressing sexual abuse. The report is provided in compliance with PREA Standards §115.87 Data Collection and § 115.88 Data Review for Corrective Action. The report is approved by the Associate Commissioner/PREA Coordinator and the Commissioner. Before making aggregated sexual abuse data publicly available, the agency removes all personal identifiers.

(c) Per the PREA Data Collection, Review, Retention and Publication Manual, following approval by the Associate Commissioner/PREA Coordinator and the Commissioner, the report is then made available to the public through the DOCCS website. A review of the DOCCS website finds agency PREA reports publicly available:

<https://doccs.ny.gov/final-audit-reports>

(d) Title 28, Judicial Administration, Subpart A - Standards for Adult Prisons and Jails, Section 115.88, subsection (d) states that the agency may redact specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility; however, the agency must then indicate the nature of the material redacted. In speaking with the agency PREA Coordinator, the auditor was ensured that legislative and procedural restraints would be applied should the agency need to redact specific information other than publicly identifying statistics. However, as noted by the Regional PREA Compliance Manager, the DOCCS, and by extension, the HCF, prepares its annual report in a manner that does not require redaction.

Reasoning & Findings Statement:

This standard works to determine if agency, and by extension, facility base staff use aggregated data to promote the overall safety and security of the facility. In speaking with the agency-wide PREA Coordinator, the Director of PREA Compliance, the Regional ADS PREA Compliance Manager, the HCF PREA Point Person, and the HCF Superintendent, the auditor was informed on how each staff member utilized the data, based on their role within the agency, to improve overall institutional safety. The HCF has demonstrated clear compliance with each of the provisions, and as such,

has reached the goal of the standard.

115.89 Data storage, publication, and destruction

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents:

- NYDOCCS Sexual Victimization Prevention Policy Manual, Section 115.89, 7/11/22
- PREA Data Collection, Review, Retention, and Publication Manual, 5/12/21
- DOCCS Website, 8/19/22

Interviews:

- Agency PREA Coordinator
- Agency Director of PREA Compliance
- Regional Assistant Deputy Superintendent (ADS) PREA Compliance Manager (PCM)
- Facility PREA Compliance Manager/PREA Point Person
- Facility Warden/Superintendent

Site Review Observations:

- Extensive review of agency website/PREA section

Standard Subsections:

- (a) Per the PREA Data Collection, Review, Retention and Publication Manual, as well

as the Sexual Victimization Prevention Policy Manual, in accordance with §115.89, all data collected is securely retained by the Office of Special Investigations and the PREA Analyst pursuant to §115.87.

(b) Per the PREA Data Collection, Review, Retention and Publication Manual, as well as the Sexual Victimization Prevention Policy Manual, aggregated sexual abuse data is made readily available to the public through its website.

(c) Per the PREA Data Collection, Review, Retention and Publication Manual, as well as the Sexual Victimization Prevention Policy Manual, before making aggregated sexual abuse data publicly available, the agency removes all personal identifiers. The report is then made available to the public through the DOCCS website.

(d) Per the PREA Data Collection, Review, Retention and Publication Manual, as well as the Sexual Victimization Prevention Policy Manual, the DOCCS retains all sexual abuse data collected pursuant to §115.87 for at least 10 years after the date of the initial collection.

Reasoning & Findings Statement:

This standard works to ensure both public availability and agency integrity in the presentation of aggregated sexual abuse data. In reviewing agency documents and speaking with staff, it is more than apparent that both the NY DOCCS PREA Coordinator, the Director of PREA Compliance, and the administration of the HCF, operate with transparency in government. The facility has clearly obtained each provision, and thus, satisfactorily achieve overall compliance.

115.401	Frequency and scope of audits
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	Documents:
	· NYDOCCS Sexual Victimization Prevention Policy Manual, 2/15/22

- PREA Data Collection, Review, Retention, and Publication Manual, 5/12/21
- DOCCS Website, 8/19/22

Interviews:

- Agency PREA Coordinator
- Agency Director of PREA Compliance
- Regional Assistant Deputy Superintendent (ADS) PREA Compliance Manager (PCM)
- Facility PREA Compliance Manager/PREA Point Person
- Contracted staff
- Inmates

Site Review Observations:

- Onsite review of the entire HCF
- Review of documentation available via the NY DOCCS PREA website

Standard Subsections:

(a) As noted by the Director of PREA Compliance, PREA Audits have been completed at all DOCCS Correctional Facilities in accordance to schedule to ensure that at least one-third of each facility type operated by the Agency was and is scheduled to be audited during each audit year.

(b) This is Audit Year 1 of Cycle 4.

(h) The auditor had full access to all areas of the facility.

	<p>(a) All documents requested by the auditor were received in a timely manner.</p> <p>(a) The auditor was permitted to conduct private interviews with inmates.</p> <p>(b) Inmates were permitted to correspond with the auditor using privileged mail processes.</p> <p>Reasoning & Findings Statement:</p> <p>Both the Regional PREA PCM and the HCF Administration were fantastically prepared for this review. The auditor was provided the PAQ well in advance of arriving to the facility. The auditor was given unrestricted access to the institution and provided with all reference materials requested. The auditor was provided with an efficient location from which to interview both employees and staff. Agency staff ensured that the flow of interview traffic was never restricted and that the auditor was able to attend all requested inmate functions throughout the facility as needed. The auditor did not experience any significant barriers, in any stage of the audit, that were under the control of either the agency or the HCF.</p>
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115.403	Audit contents and findings
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>Documents:</p> <ul style="list-style-type: none"> · NYDOCCS Sexual Victimization Prevention Policy Manual, 2/15/22 · PREA Data Collection, Review, Retention, and Publication Manual, 5/12/21 · DOCCS Website, 8/19/22 <p>Interviews:</p> <ul style="list-style-type: none"> · Agency PREA Coordinator

- Agency Director of PREA Compliance
- Regional Assistant Deputy Superintendent (ADS) PREA Compliance Manager (PCM)
- Facility PREA Compliance Manager/PREA Point Person

Site Review Observations:

- Online review of the NY DOCCS website, PREA

Standard Subsections:

(a) The New York DOCCS has developed an exceptionally informative PREA section on their agency website! Truly, the NY DOCCS PREA section is the model by which all other correctional agencies should judge their own efforts.

Reasoning & Findings Statement:

The function of this standard is to promote transparency in government by ensuring that all facility audits are available for public review, by way of, for example, the agency's website. In this case, the NYDOCCS does have an agency website and has made all facility PREA reports conveniently accessible to the public. In addition, the DOCCS provides a plethora of related, but unrequired information in an effort to truly make the use of the agency's PREA program as effective and productive as possible. In doing this, the New York DOCCS has developed an exceptionally useful, and rather functional, PREA resource on their agency website!

Appendix: Provision Findings		
115.11 (a)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
115.11 (b)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
	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
115.11 (c)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	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
	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
115.12 (a)	Contracting with other entities for the confinement of inmates	
	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
115.12 (b)	Contracting with other entities for the confinement of inmates	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure	yes

	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.)	
115.13 (a)	Supervision and monitoring	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into	yes

	consideration: Any applicable State or local laws, regulations, or standards?	
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes
115.13 (b)	Supervision and monitoring	
	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
115.13 (c)	Supervision and monitoring	
	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
	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
	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
115.13 (d)	Supervision and monitoring	
	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
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	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

115.14 (a)	Youthful inmates	
	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).)	na
115.14 (b)	Youthful inmates	
	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).)	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).)	na
115.14 (c)	Youthful inmates	
	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).)	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).)	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).)	na
115.15 (a)	Limits to cross-gender viewing and searches	
	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
115.15 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	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 if the	na

	facility does not have female inmates.)	
115.15 (c)	Limits to cross-gender viewing and searches	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	yes
115.15 (d)	Limits to cross-gender viewing and searches	
	Does the facility have policies 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
	Does the facility have procedures 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
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
115.15 (e)	Limits to cross-gender viewing and searches	
	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
	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
115.15 (f)	Limits to cross-gender viewing and searches	
	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
	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

115.16 (a)	Inmates with disabilities and inmates who are limited English proficient	
	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
	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
	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
	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
	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
	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
	Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing?	yes
	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
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication	yes

	with inmates with disabilities including inmates who: Have intellectual disabilities?	
	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
	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
115.16 (b)	Inmates with disabilities and inmates who are limited English proficient	
	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
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
115.16 (c)	Inmates with disabilities and inmates who are limited English proficient	
	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
115.17 (a)	Hiring and promotion decisions	
	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
	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
	Does the agency prohibit the hiring or promotion of anyone who	yes

	may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	
	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
	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
	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 two bullets immediately above?	yes
115.17 (b)	Hiring and promotion decisions	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes
115.17 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	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
115.17 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes

115.17 (e)	Hiring and promotion decisions	
	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
115.17 (f)	Hiring and promotion decisions	
	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
	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
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
115.17 (g)	Hiring and promotion decisions	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
115.17 (h)	Hiring and promotion decisions	
	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
115.18 (a)	Upgrades to facilities and technologies	
	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
115.18 (b)	Upgrades to facilities and technologies	

	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
115.21 (a)	Evidence protocol and forensic medical examinations	
	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
115.21 (b)	Evidence protocol and forensic medical examinations	
	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
	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
115.21 (c)	Evidence protocol and forensic medical examinations	
	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
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	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

	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.21 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	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? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
115.21 (e)	Evidence protocol and forensic medical examinations	
	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
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
115.21 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency 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.)	na
115.21 (h)	Evidence protocol and forensic medical examinations	
	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 always makes a victim advocate from a rape crisis center available to victims.)	yes
115.22 (a)	Policies to ensure referrals of allegations for investigations	

	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes
115.22 (b)	Policies to ensure referrals of allegations for investigations	
	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
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
115.22 (c)	Policies to ensure referrals of allegations for investigations	
	If a separate entity is responsible for conducting criminal investigations, does the policy 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).)	na
115.31 (a)	Employee training	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	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
	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
	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
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes

	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	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
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	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
	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
115.31 (b)	Employee training	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	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
115.31 (c)	Employee training	
	Have all current employees who may have contact with inmates received such training?	yes
	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
	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
115.31 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.32 (a)	Volunteer and contractor training	

	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
115.32 (b)	Volunteer and contractor training	
	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
115.32 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
115.33 (a)	Inmate education	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
115.33 (b)	Inmate education	
	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
	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
	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
115.33 (c)	Inmate education	
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes

	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
115.33 (d)	Inmate education	
	Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?	yes
115.33 (e)	Inmate education	
	Does the agency maintain documentation of inmate participation in these education sessions?	yes
115.33 (f)	Inmate education	
	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
115.34 (a)	Specialized training: Investigations	
	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 receive 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
115.34 (b)	Specialized training: Investigations	
	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
	Does this specialized training include proper use of Miranda and	yes

	Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	
	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
	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
115.34 (c)	Specialized training: Investigations	
	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
115.35 (a)	Specialized training: Medical and mental health care	
	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? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	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? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	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? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	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	yes

	suspicious of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	
115.35 (b)	Specialized training: Medical and mental health care	
	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 or the agency does not employ medical staff.)	na
115.35 (c)	Specialized training: Medical and mental health care	
	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? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.35 (d)	Specialized training: Medical and mental health care	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)	yes
	Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)	yes
115.41 (a)	Screening for risk of victimization and abusiveness	
	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
	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
115.41 (b)	Screening for risk of victimization and abusiveness	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
115.41 (c)	Screening for risk of victimization and abusiveness	
	Are all PREA screening assessments conducted using an objective	yes

	screening instrument?	
115.41 (d)	Screening for risk of victimization and abusiveness	
	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
	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
	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
	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
	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
	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
	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
	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
	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
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10)	yes

	Whether the inmate is detained solely for civil immigration purposes?	
115.41 (e)	Screening for risk of victimization and abusiveness	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?	yes
115.41 (f)	Screening for risk of victimization and abusiveness	
	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
115.41 (g)	Screening for risk of victimization and abusiveness	
	Does the facility reassess an inmate's risk level when warranted due to a referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a request?	yes
	Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes
115.41 (h)	Screening for risk of victimization and abusiveness	
	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
115.41 (i)	Screening for risk of victimization and abusiveness	
	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	yes

	information is not exploited to the inmate's detriment by staff or other inmates?	
115.42 (a)	Use of screening information	
	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
	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
	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
	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
	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
115.42 (b)	Use of screening information	
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
115.42 (c)	Use of screening information	
	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
	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	yes

	present management or security problems?	
115.42 (d)	Use of screening information	
	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
115.42 (e)	Use of screening information	
	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
115.42 (f)	Use of screening information	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes
115.42 (g)	Use of screening information	
	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? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	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? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	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? (N/A if the agency has a dedicated facility, unit, or wing	yes

	solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)	
115.43 (a)	Protective Custody	
	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
	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
115.43 (b)	Protective Custody	
	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
	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
	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
	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
	If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
115.43 (c)	Protective Custody	

	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
	Does such an assignment not ordinarily exceed a period of 30 days?	yes
115.43 (d) Protective Custody		
	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
	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
115.43 (e) Protective Custody		
	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
115.51 (a) Inmate reporting		
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	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
	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
115.51 (b) Inmate reporting		
	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
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain	yes

	anonymous upon request?	
	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? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	na
115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.51 (d)	Inmate reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a)	Exhaustion of administrative remedies	
	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
115.52 (b)	Exhaustion of administrative remedies	
	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
	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
115.52 (c)	Exhaustion of administrative remedies	
	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	yes

	this standard.)	
	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
115.52 (d)	Exhaustion of administrative remedies	
	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
	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
	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
115.52 (e)	Exhaustion of administrative remedies	
	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
	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
	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
115.52 (f)	Exhaustion of administrative remedies	

	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
	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
	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
	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
	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
	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
	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
115.52 (g)	Exhaustion of administrative remedies	
	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
115.53 (a)	Inmate access to outside confidential support services	
	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
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers,	na

	including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)	
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
115.53 (b)	Inmate access to outside confidential support services	
	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
115.53 (c)	Inmate access to outside confidential support services	
	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
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
115.54 (a)	Third-party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes
115.61 (a)	Staff and agency reporting duties	
	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
	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
	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	yes

	abuse or sexual harassment or retaliation?	
115.61 (b)	Staff and agency reporting duties	
	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
115.61 (c)	Staff and agency reporting duties	
	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
	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
115.61 (d)	Staff and agency reporting duties	
	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
115.61 (e)	Staff and agency reporting duties	
	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
115.62 (a)	Agency protection duties	
	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
115.63 (a)	Reporting to other confinement facilities	
	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
115.63 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes

115.63 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes
115.63 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
115.64 (a)	Staff first responder duties	
	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
	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
	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
	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
115.64 (b)	Staff first responder duties	
	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
115.65 (a)	Coordinated response	
	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	yes

	response to an incident of sexual abuse?	
115.66 (a)	Preservation of ability to protect inmates from contact with abusers	
	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 limit 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
115.67 (a)	Agency protection against retaliation	
	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
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.67 (b)	Agency protection against retaliation	
	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
115.67 (c)	Agency protection against retaliation	
	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 or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	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
	Except in instances where the agency determines that a report of	yes

	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?	
	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
	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
	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
	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
	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
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
115.67 (d)	Agency protection against retaliation	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
115.67 (e)	Agency protection against retaliation	
	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
115.68 (a)	Post-allegation protective custody	
	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
115.71 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations	yes

	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).)	
	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
115.71 (b)	Criminal and administrative agency investigations	
	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
115.71 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
115.71 (d)	Criminal and administrative agency investigations	
	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
115.71 (e)	Criminal and administrative agency investigations	
	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
	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
115.71 (f)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes

	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
115.71 (g)	Criminal and administrative agency investigations	
	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
115.71 (h)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.71 (i)	Criminal and administrative agency investigations	
	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
115.71 (j)	Criminal and administrative agency investigations	
	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
115.71 (l)	Criminal and administrative agency investigations	
	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
115.72 (a)	Evidentiary standard for administrative investigations	
	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
115.73 (a)	Reporting to inmates	
	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

115.73 (b)	Reporting to inmates	
	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.)	na
115.73 (c)	Reporting to inmates	
	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 inmate 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
	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
	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
	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
115.73 (d)	Reporting to inmates	
	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
	Following an inmate's allegation that he or she has been sexually	yes

	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?	
115.73 (e)	Reporting to inmates	
	Does the agency document all such notifications or attempted notifications?	yes
115.76 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
115.76 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes
115.76 (c)	Disciplinary sanctions for staff	
	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
115.76 (d)	Disciplinary sanctions for staff	
	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
	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
115.77 (a)	Corrective action for contractors and volunteers	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes

	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.77 (b)	Corrective action for contractors and volunteers	
	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
115.78 (a)	Disciplinary sanctions for inmates	
	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
115.78 (b)	Disciplinary sanctions for inmates	
	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
115.78 (c)	Disciplinary sanctions for inmates	
	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
115.78 (d)	Disciplinary sanctions for inmates	
	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
115.78 (e)	Disciplinary sanctions for inmates	
	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
115.78 (f)	Disciplinary sanctions for inmates	
	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	yes

	evidence sufficient to substantiate the allegation?	
115.78 (g)	Disciplinary sanctions for inmates	
	If the agency prohibits all sexual activity between inmates, 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
115.81 (a)	Medical and mental health screenings; history of sexual abuse	
	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? (N/A if the facility is not a prison).	yes
115.81 (b)	Medical and mental health screenings; history of sexual abuse	
	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
115.81 (c)	Medical and mental health screenings; history of sexual abuse	
	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? (N/A if the facility is not a jail).	na
115.81 (d)	Medical and mental health screenings; history of sexual abuse	
	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
115.81 (e)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior	yes

	sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	
115.82 (a)	Access to emergency medical and mental health services	
	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
115.82 (b)	Access to emergency medical and mental health services	
	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
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes
115.82 (c)	Access to emergency medical and mental health services	
	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
115.82 (d)	Access to emergency medical and mental health services	
	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
115.83 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	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
115.83 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	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
115.83 (c)	Ongoing medical and mental health care for sexual abuse	

	victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
115.83 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
115.83 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	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. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
115.83 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.83 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	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
115.83 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	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 jail.)	yes

115.86 (a)	Sexual abuse incident reviews	
	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
115.86 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.86 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
115.86 (d)	Sexual abuse incident reviews	
	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
	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
	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
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	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
115.86 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes

115.87 (a)	Data collection	
	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
115.87 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.87 (c)	Data collection	
	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
115.87 (d)	Data collection	
	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
115.87 (e)	Data collection	
	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
115.87 (f)	Data collection	
	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
115.88 (a)	Data review for corrective action	
	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
	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
	Does the agency review data collected and aggregated pursuant	yes

	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?	
115.88 (b)	Data review for corrective action	
	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
115.88 (c)	Data review for corrective action	
	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
115.88 (d)	Data review for corrective action	
	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
115.89 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
115.89 (b)	Data storage, publication, and destruction	
	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
115.89 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.89 (d)	Data storage, publication, and destruction	
	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
115.401 (a)	Frequency and scope of audits	

	During the prior three-year audit period, 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? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes
115.401 (b)	Frequency and scope of audits	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	yes
	If this is the second year of the current audit cycle, 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 during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	na
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	na
115.401 (h)	Frequency and scope of audits	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
115.401 (i)	Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
115.401 (m)	Frequency and scope of audits	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
115.401 (n)	Frequency and scope of audits	
	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
115.403	Audit contents and findings	

(f)		
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. 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, there has never been a Final Audit Report issued.)	yes