

Prison Rape Elimination Act (PREA) Audit Report Lockups

Interim Final

Date of Interim Audit Report: 12/1/2021

Date of Final Audit Report: 2/26/2022

Auditor Information

Name Amy J Fairbanks

Email: fairbaa@comcast.net

Company Name: AJF, Correctional Consulting & Auditing, L.L.C.

Mailing Address: 3105 S. Martin Luther King Jr.
Blvd. #236

City, State, Zip Lansing, MI 48910

Telephone: (517) 303-4081

Date of Lockup Visit: November 4 & 5, 2021

Agency Information

Name of Agency: Dukes County Sheriff's Office

Governing Authority or Parent Agency (If Applicable):

Physical Address: 149 Main Street

City, State, Zip: Edgartown, MA 02539

Mailing Address: P. O. Box 252

City, State, Zip: Edgartown, MA 02539

The Agency Is:

Military

Private for Profit

Private not for Profit

Municipal

County

State

Federal

Agency Website with PREA Information: <https://www.dukescountysheriff.com/prea>

Agency Chief Executive Officer

Name: Robert W. Ogden

Email: rogden@dcsoma.org

Telephone: (508) 338-7580

Agency-Wide PREA Coordinator

Name: Gregory Arpin, Major

Email: garpin@dcsoma.org

Telephone: (508) 627-5173

PREA Coordinator Reports to:

Assistant Superintendent

Number of Compliance Managers who report to the PREA Coordinator

1

Lockup Information

Name of Lockup: Dukes County Sheriff's Office Regional Lockup

Physical Address: 149 Main Street

City, State, Zip: Edgartown, MA 02539

Mailing Address (if different from above):
P. O. Box 252

City, State, Zip: Edgartown, MA 02539

The Lockup Is:

Military

Private for Profit

Private not for Profit

Municipal

County

State

Federal

Lockup Website with PREA Information: <https://www.dukescountysheriff.com/prea>

Has the lockup been accredited within the past 3 years? Yes No

If the lockup has been accredited within the past 3 years, select the accrediting organization(s) – select all that apply (N/A if the lockup has not been accredited within the past 3 years):

ACA

NCCHC

CALEA

Other (please name or describe: [Click or tap here to enter text.](#))

N/A

If the lockup has completed any internal or external audits other than those that resulted in accreditation, please describe:
Massachusetts Department of Corrections conducts internal audits twice yearly

Sheriff/Chief/Director

Name: Robert W. Ogden

Email: rogden@dcsoma.org

Telephone: (508) 338-7580

Lockup PREA Compliance Manager

Name: Kayla Pachico, Major

Email: kpachico@dcsoma.org

Telephone: (774) 549-6093

Lockup Characteristics

Designated Lockup Capacity:

20

Current Population of Lockup:

1

Average daily population for the past 12 months:

1

| | |
|---|---|
| Has the lockup been over capacity at any point in the past 12 months? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Which population(s) does the lockup hold? | <input type="checkbox"/> Females <input type="checkbox"/> Males <input checked="" type="checkbox"/> Both Females and Males |
| Age range of population: | 18 and above |
| Average length of stay or time under supervision | 1-2 days |
| Lockup security levels/detainee custody levels | Maximum |
| Are detainees held overnight? | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| Number of detainees who were held overnight at the lockup during the past 12 months: | 273 |
| Does the lockup hold juveniles or youthful detainees? | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| Number of juveniles and youthful detainees held in the lockup during the last 12 months: (N/A if the lockup never holds juvenile or youthful detainees) | 4 <input type="checkbox"/> N/A |
| Does the audited lockup hold detainees for one or more other agencies (e.g. a State correctional agency, U.S. Marshals Service, Bureau of Prisons, U.S. Immigration and Customs Enforcement)? | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| Select all other agencies for which the audited lockup holds detainees: Select all that apply (N/A if the audited lockup does not hold detainees for any other agency or agencies): | <input type="checkbox"/> Federal Bureau of Prisons <input type="checkbox"/> U.S. Marshals Service <input type="checkbox"/> U.S. Immigration and Customs Enforcement <input type="checkbox"/> Bureau of Indian Affairs <input type="checkbox"/> U.S. Military branch <input type="checkbox"/> State or Territorial correctional agency <input type="checkbox"/> County correctional or detention agency <input type="checkbox"/> Judicial district correctional or detention facility <input checked="" type="checkbox"/> City or municipal correctional or detention facility (e.g. police lockup or city jail) <input type="checkbox"/> Private corrections or detention provider <input type="checkbox"/> Other - please name or describe: Click or tap here to enter text. <input type="checkbox"/> N/A |
| Number of staff currently employed by the lockup who may have contact with detainees: | 22 |
| Number of staff hired by the lockup during the past 12 months who may have contact with detainees: | 3 |
| Number of contracts in the past 12 months for services with contractors who may have contact with detainees: | 0 |
| Number of individual contractors who have contact with detainees, currently authorized to enter the lockup: | 0 |
| Number of volunteers who have contact with detainees, currently authorized to enter the lockup: | 0 |

Physical Plant

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|---|--|
| <p>Number of buildings:</p> <p>Auditors should count all buildings that are part of the lockup, whether detainees are formally allowed to enter them or not. In situations where temporary structures have been erected (e.g., tents) the auditor should use their discretion to determine whether to include the structure in the overall count of buildings. As a general rule, if a temporary structure is regularly or routinely used to hold or house detainees, or if the temporary structure is used to house or support operational functions for more than a short period of time (e.g., an emergency situation), it should be included in the overall count of buildings.</p> | 1 |
| <p>Number of housing units or holding areas:</p> <p>DOJ PREA Working Group FAQ on the definition of a housing unit: How is a "housing unit" defined for the purposes of the PREA Standards? The question has been raised in particular as it relates to facilities that have adjacent or interconnected units. The most common concept of a housing unit is architectural. The generally agreed-upon definition is a space that is enclosed by physical barriers accessed through one or more doors of various types, including commercial-grade swing doors, steel sliding doors, interlocking sally port doors, etc. In addition to the primary entrance and exit, additional doors are often included to meet life safety codes. The unit contains sleeping space, sanitary facilities (including toilets, lavatories, and showers), and a dayroom or leisure space in differing configurations. Many facilities are designed with modules or pods clustered around a control room. This multiple-pod design provides the facility with certain staff efficiencies and economies of scale. At the same time, the design affords the flexibility to separately house detainees of differing security levels, or who are grouped by some other operational or service scheme. Generally, the control room is enclosed by security glass, and in some cases, this allows detainees to see into neighboring pods. However, observation from one unit to another is usually limited by angled site lines. In some cases, the facility has prevented this entirely by installing one-way glass. Both the architectural design and functional use of these multiple pods indicate that they are managed as distinct housing units.</p> | 3 |
| <p>Number of single detainee cells, rooms, holding areas, or other enclosures:</p> | 1 |
| <p>Number of multiple occupancy cells, rooms, holding areas, or other enclosures:</p> | 4 |
| <p>Are juvenile or youthful detainees held separately from the adult population? (N/A if the lockup never holds juvenile or youthful detainees)</p> | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |
| <p>Does the lockup have a video monitoring system, electronic surveillance system, or other monitoring technology (e.g. cameras, etc.)?</p> | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| <p>Has the lockup installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology in the past 12 months?</p> | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| <h3>Medical and Mental Health Services and Forensic Medical Exams</h3> | |
| <p>Are medical services provided on-site?</p> | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| <p>Are mental health services provided on-site?</p> | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

| | |
|--|---|
| <p>Where are sexual assault forensic medical exams provided? Select all that apply.</p> | <input type="checkbox"/> On-site <input checked="" type="checkbox"/> Local hospital/clinic <input type="checkbox"/> Rape Crisis Center <input type="checkbox"/> Other (please name or describe: Click or tap here to enter text.) |
|--|---|

Investigations

Criminal Investigations

| | |
|---|----------|
| <p>Number of investigators employed by the agency or its lockups who are responsible for conducting CRIMINAL investigations into allegations of sexual abuse or sexual harassment:</p> | <p>1</p> |
|---|----------|

| | |
|---|---|
| <p>When the lockup received allegations of sexual abuse or sexual harassment (whether staff-on-detainee or detainee-on-detainee), CRIMINAL INVESTIGATIONS are conducted by: Select all that apply.</p> | <input checked="" type="checkbox"/> Facility investigators <input type="checkbox"/> Agency investigators <input checked="" type="checkbox"/> An external investigative entity |
|---|---|

| | |
|---|---|
| <p>Select all external entities responsible for CRIMINAL INVESTIGATIONS: Select all that apply (N/A if no external entities are responsible for criminal investigations)</p> | <input type="checkbox"/> Local police department <input type="checkbox"/> Local sheriff's department <input checked="" type="checkbox"/> State police <input type="checkbox"/> A U.S. Department of Justice component <input type="checkbox"/> Other (please name or describe: Click or tap here to enter text.) <input type="checkbox"/> N/A |
|---|---|

Administrative Investigations

| | |
|---|----------|
| <p>Number of investigators employed by the agency or its lockups who are responsible for conducting ADMINISTRATIVE investigations into allegations of sexual abuse or sexual harassment?</p> | <p>1</p> |
|---|----------|

| | |
|--|--|
| <p>When the lockup receives allegations of sexual abuse or sexual harassment (whether staff-on-detainee or detainee-on-detainee), ADMINISTRATIVE INVESTIGATIONS are conducted by: Select all that apply</p> | <input checked="" type="checkbox"/> Facility investigators <input type="checkbox"/> Agency investigators <input type="checkbox"/> An external investigative entity |
|--|--|

| | |
|---|---|
| <p>Select all external entities responsible for ADMINISTRATIVE INVESTIGATIONS: Select all that apply (N/A if no external entities are responsible for administrative investigations)</p> | <input type="checkbox"/> Local police department <input type="checkbox"/> Local sheriff's department <input type="checkbox"/> State police <input type="checkbox"/> A U.S. Department of Justice component <input type="checkbox"/> Other (please name or describe: Click or tap here to enter text.) <input checked="" type="checkbox"/> N/A |
|---|---|

Audit Findings

Audit Narrative (including Audit Methodology)

On November 4 & 5, 2021, an audit was conducted at the Dukes County Sherriff's Office Regional Lockup to determine compliance with the Prison Rape Elimination Act standards finalized August 2012. An audit was simultaneously conducted at the Jail and House of Correction operation located in the same building. The auditor was present at the facility from 7:30am to 5:30pm Thursday, and 7:45am to 1:30pm Friday. This is the facility's first PREA Audit. There were no barriers to completing the audit. The auditor was selected to complete the audit by responding to an informal request, submitting a contract proposal, and being selected to complete the audit.

Audit Methodology:

The PREA Resource Audit Instrument used for Adult Prisons and Jails is furnished by the National PREA Resource Center. This tool includes the following: A) Pre-Audit Questionnaire (PAQ), B) the Auditor Compliance Tool; C) Instructions for the PREA Audit Tour; D) the Interview Protocols; E) the Auditor's Summary Report; F) the Process Map; and G) the Checklist of Documentation. In addition, the Auditor Handbook 2021 was used to guide the audit process.

Pre-audit:

The facility reported that posters announcing the audit with the auditor's name and address were placed throughout the facility on September 21, 2021, announcing the audit and identifying the auditor's address in English and Spanish. The posters indicated that any correspondence sent to the auditor would be confidential and not disclosed unless required by law. The exceptions in the law were noted. No confidential correspondence letters were received in response to the posters announcing the audit.

The PAQ and corresponding documentation was received in September 2021. Documentation was provided to support compliance which was reviewed prior to the on-site audit.

The Agency website was reviewed. It states, *The Dukes County Sheriff's Office is committed to Zero Tolerance prevention and elimination of sexual abuse perpetrated against inmates by staff members or other inmates. Meeting the objectives set forth within the Prison Rape Elimination Act of 2003 is an important priority for the Sheriff's Office and an ongoing focus for staff efforts at all levels of our organization.*

The auditor reviewed the mandatory reporting laws, laws regarding where and how juveniles are housed and laws regarding vulnerable adults for the Commonwealth of Massachusetts prior to the audit.

The auditor researched the Internet and found no concerning articles related to this operation, nor any evidence of Department of Justice (DOJ) involvement. Contact was made with Just Detention International, Inc. (JDI) and Prison Legal Services for Massachusetts. No specific information was provided regarding any concerns they have about the facility.

One week prior to visiting the audit, the auditor sent a list of documentation that would be required to conduct the random and targeted interviews in accordance with the Auditor Handbook as well as requests for randomly selected documentation which would demonstrate the practice of the requirements.

On-site audit:

Entrance Meeting

A brief informal meeting was held with the PREA Coordinator, and the PREA Compliance Manager the first day of the audit. The following items were reviewed: purpose of audit, goals, and expectations. Tentative schedules were developed regarding the tour, arrangements made for interviews and review of addition documentation. Rosters of staff were provided. No detainees were housed in the lockup during the audit. A plan for interviews was developed.

Facility Tour

A complete tour of the facility was conducted on November 4, 2021. The following areas and operations were visited and observed: administrative areas, holding cells, medical operations, food service area, bail processing room, laundry and intake processing. All areas of the facility were visited that have detainee access. Camera monitoring operations were observed. Supervision practices, blind spots, shower/bathroom facilities, and placement and number of telephones were observed. Cross-gender announcements were made prior to the opposite gender auditor entering the living units. Posters announcing the audit were observed throughout the facility.

Staff Interviews

In accordance with the requirements of the Auditor Handbook and the auditor's request, formal staff interviews were conducted with the following:

- Sheriff
- Superintendent/Special Sheriff
- Assistant Superintendent
- PREA Coordinator
- PREA Compliance Manager who conducts retaliation monitoring
- Medical staff, RN
- Mental health staff - contractual
- Human Resources staff
- Two Supervisors – Captain, Lieutenant (conducts unannounced rounds)
- Twelve corrections officers/sergeants/lieutenants from all areas of the facility and each shift
- One investigator (incident review team)
- Volunteer Coordinator
- Grievance Coordinator
- Education Supervisor
- Union representative

Staff interviews were conducted in private offices. After review of documentation and informal questions throughout the on-site audit, it was concluded that no staff had conducted a cross-gender strip search, no staff has acted as a first responder.

Detainee Interviews

A review of inmate records was conducted with the assistance of the PREA Coordinator to identify inmates/detainees as required by the Auditor Handbook. A total of five inmates who were detainees at the Lockup were selected to be interviewed; this represented all inmates/detainees housed in the facility at the time of the audit. None declined to be interviewed. No youthful offenders are housed at this facility. No targeted detainees/inmates were available to be interviewed. Inmate/detainee interviews were held in a private room (attorney visit room).

PREA Investigations

Investigations are conducted by a trained investigator at the facility who also oversees Internal Affairs. The facility reported no investigations had been conducted as no allegations of sexual abuse/harassment were received in the previous 12 months. Additionally, the auditor was provided documentation of critical incidents occurring in the previous 12 months to support that no allegations of sexual abuse/harassment has occurred.

Exit meeting

An Exit meeting was held with the PREA Coordinator and PREA Compliance Manager to review audit experiences, observations and preliminary findings. The auditor reported that she was allowed free access to all areas of the facility, access to interview inmates and staff selected randomly and intentionally, and to see or retain any documentation requested. It was noted that a preliminary report should be expected within forty-five (45) days. Areas needing correction or change per recommendations were reviewed and noted in the report.

Post on-site audit:

Documentation gathered was reviewed for compliance with the standards. Corrective action was identified and sent to the facility on an interim report. Evidence/documentation was received demonstrating compliance with the corrective action and is noted throughout the report.

Lockup Characteristics

Dukes County Jail & House of Correction, and Regional Lock-Up for all six Martha's Vineyard towns is located on the Island of Martha's Vineyard, Upper Main Street in Edgartown, MA, less than one mile from the Edgartown District Court. The facility's original design dates back to the 1870s. It is comprised of a three-story structure. The front of the building contains administrative offices on the first and third floor. The second floor contains a medical treatment room, education room and additional administrative offices. The Lockup consists of a booking area, a male holding cell, a female holding cell and a segregation unit. The male holding cell contains four bunks, a toilet and a sink. The female holding cell contains two bunks, a toilet and a sink with a privacy wall. Segregation is a 3-cell unit, which consists of two double bunked cells and a single bunk cell for health/volatile detainees. Each of the cells contain a toilet and a sink. There are two phones located in the lockup in the booking area and the segregation hallway. The facility houses a maximum of 20 detainees held pending a bond hearing. Count on the day of the audit was zero. Juveniles are held in an are separated from the holding cells under direct supervision of staff until release to an appropriate guardian is secured. All staff reported they are maintained under direct supervision at all times by staff. It was reported that by law they can only be detained up to six hours.

On-site medical services are provided by Dukes County Sheriff's Office Health Services Unit. A medical intake is performed on every pre-trial detainee and inmate who is placed in the Sheriff's custody. Additional medical and mental health services are contractual.

Corrections officers provide supervision through frequent rounds and video monitoring 24 hours a day. They work three shifts, eight hours unless staffing needs mandate that they convert to 12-hour shifts. They supervise the Jail and House of Correction and Regional Lockup operations simultaneously.

Summary of Audit Findings

Standards Exceeded

Number of Standards Exceeded: 0
List of Standards Exceeded:

Standards Met

Number of Standards Met: 35

Standards Not Met

Number of Standards Not Met: 0
List of Standards Not Met:

PREVENTION PLANNING

Standard 115.111: Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

115.111 (a)

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

115.111 (b)

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

Auditor Overall Compliance Determination

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

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020
- Interview with the PREA Coordinator
- Interview with the PREA Compliance Manager
- Memo appointing the PREA Coordinator October 2020
- Memo appointing the PREA Manager October 2020
- Organization Chart- Dukes County Sheriff's Office
- Interview with the Sheriff
- Interview with the Special Sheriff/superintendent
- Observations during the audit
- Frequently Asked Questions - Clarification of Application to PREA Standards Provisions (FAQ)

County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020 addresses the agency's commitment to zero tolerance prevention and elimination of sexual abuse. It requires all employees, contractors and volunteers to immediately report to the shift supervisor any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in any facility. It notes that retaliation is also to be reported. It addresses the following:

Prevention

- training and education
- identification, report and screening during admission
- inmate education
- public education
- classification

Data Collection and Analysis

Intervention

It provides procedures on how this is to be accomplished.

The policy directs Investigation of complaints

Retaliation

Disciplinary

Case Records

Grievances

Incident Reviews

Attachments include the following:

PREA Assessment/Transfer Form 30-day review

Risk Assessment

PREA Incident check list – shift commander, medical, superintendent

County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020 defines the PREA Coordinator as follows: *A person assigned/appointed by the Sheriff who coordinates the DCSO's compliance with the Department of Justice's (DOJ) Rule on the National Standards to Prevent, Detect and Respond to Prison Rape pursuant to the Prison Rape Elimination Act of 2003 (PREA).*

The letter appointing the PREA Coordinator to his role affirms support by the Assistant Superintendent. This person also maintains the position of major for the facility operations. During the interview with the PREA Coordinator, he affirmed that he has the time and authority to ensure such efforts are met. The interview with the PREA Coordinator and Assistant Superintendent confirmed to the auditor that he is given authority to work directly with the Assistant Superintendent, security, medical/mental health staff and investigators on any PREA issues that arise in his role as the PREA Coordinator. The Dukes County Sheriff's Office organizational chart confirms the PREA Coordinator/Major reports directly to the Assistant Superintendent. This was evident to the auditor during the on-site audit. In accordance with the FAQ clarification, issued by the DOJ, the PREA Coordinator does have access to the Sheriff, Superintendent, and Assistant Superintendents.

The Memo appointing the PREA Manager October 2020 confirms that this agency ensures that compliance with the PREA standards is met for both operations by appointing a PREA Manager. Operationally, the auditor observed that compliance for the Jail and House of Corrections and Regional Lockup is addressed simultaneously by PREA Compliance Manager. The interview with the PREA Compliance Manager demonstrated to the auditor that she has the time and authority to manage and ensure compliance with the standards. She holds the position of major overseeing the Human Services Division which includes education, medical/dental and mental health needs of the inmates. The Dukes County Sheriff's Office organizational chart confirms the PREA Compliance Manager/Major reports directly to the Assistant Superintendent. She indicated that she has participated in the PREA 101

course offered through the PREA Resource Center and that the agency has been working with the VERA Institute of Justice and Impact Justice to outline operations consistent with compliance.

Finding of compliance is based on the following:

Interviews with the Sheriff, Special Sheriff/Superintendent and Assistant Superintendent, PREA Coordinator and PREA Compliance Manager all demonstrate a commitment to compliance with all PREA standards. Observations made during the audit process which include the interaction with all levels of staff by the PREA Coordinator and PREA Compliance Manager and with the inmate population showed that the PREA Coordinator and PREA Manager are diligently involved with the overall operations of the jail. Policy supports compliance with the standard as quoted earlier. The auditor finds sufficient evidence to support a finding of compliance.

Standard 115.112: Contracting with other entities for the confinement of detainees

115.112 (a)

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

115.112 (b)

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

Auditor Overall Compliance Determination

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

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- PAQ
- Statement from the PREA Coordinator

The PAQ indicated that there is no contract for the confinement of inmates since the last PREA audit. The PREA Coordinator confirmed this. The auditor found no reason to dispute this during the audit process. Therefore, this standard is deemed not applicable, compliant.

Standard 115.113: Supervision and monitoring

115.113 (a)

- Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect detainees against sexual abuse? Yes No
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The physical layout of the lockup? Yes No
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the detainee population? Yes No
- 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 No
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors? Yes No

115.113 (b)

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

115.113 (c)

- In the past 12 months, has the lockup assessed, determined, and documented whether adjustments are needed to the staffing plan established pursuant to paragraph (a) of this section? Yes No
- In the past 12 months, has the lockup assessed, determined, and documented whether adjustments are needed to prevailing staffing patterns? Yes No
- In the past 12 months, has the lockup assessed, determined, and documented whether adjustments are needed to the lockup's deployment of video monitoring systems and other monitoring technologies? Yes No
- In the past 12 months, has the lockup assessed, determined, and documented whether adjustments are needed to the resources the lockup has available to commit to ensure adequate staffing levels? Yes No

115.113 (d)

- If vulnerable detainees are identified pursuant to the screening required by § 115.141, does security staff provide such detainees with heightened protection, to include: Continuous direct sight and sound supervision? Yes No
- If vulnerable detainees are identified pursuant to the screening required by § 115.141, does security staff provide such detainees with heightened protection, to include: Single-cell housing or placement in a cell actively monitored on video by a staff member sufficiently proximate to intervene, unless no such option is determined to be feasible? Yes No

Auditor Overall Compliance Determination

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

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020
- Policy Directive Lockup Detainee Processing
- Staffing analysis
- Interview with the Superintendent
- Interview with the PREA Coordinator
- Critical Staffing Contingency Plan
- Staffing agreement with the Union
- Monthly staffing review minutes
- Randomly requested staffing rosters
- Interviews with Supervisors
- Review of documentation of rounds and supporting video evidence
- Random staff interviews
- Observations during the onsite audit

The PAQ indicates that the average daily population since the last PREA audit is 23. The staffing plan is predicated on an inmate population of 7, the average daily population for the facility.

The interview with the Special Sheriff/Superintendent and review of the staffing plan confirmed the following:

- (1) The facility operates on sound correctional practices which are audited twice a year by the Massachusetts Department of Correction. The last two audit reports were provided to the auditor for review. Additionally, the Commonwealth of Massachusetts Public Health department audits regularly.
- (3) There are no findings of inadequacy from Federal investigative agencies;
- (4) There are no findings of inadequacy from internal or external oversight bodies; from the federal entity to ensure standards are met.
- (5) All components of the facility's physical plant are reviewed. Video monitoring is used; specific information regarding placement of cameras was reviewed during the audit.
- (6) The composition of the inmate population has been the same for several years

- (7) The number and placement of supervisory staff has been reviewed and determined to be adequate. Review of rounds and staffing occur regularly.
- (8) Institution programs occurring on a particular shift has a detailed evaluation of the time and days of the programs occurring.
- (9) Any applicable State or local laws, regulations, or standards are reviewed. Staff discuss with the Auditor that changes that were implemented with the 2018 Crime Reform Act that affected restrictive housing, medication administration for substance abusers, treatment of transgenders and other areas.
- (10) The prevalence of substantiated and unsubstantiated incidents of sexual abuse are addressed. This is additionally analyzed in the Annual Report.
- (11) No other relevant factors have been identified.

The facility indicated on the PAQ that the main reasons for deviating from the staffing plan was staffing shortage, and the coronavirus pandemic. To further review compliance, the auditor randomly requested and received staffing rosters for all three shifts for the 6th of each month for the previous three months. Review of the rosters confirmed that use of overtime to fill positions and adjusting staffing to 12-hour shifts was documented through the Critical Staffing Contingency Plan and Staffing Agreement with the Union.

Additionally, monthly staffing review minutes January to September 2021 were provided to the auditor for review. These demonstrate that staffing reviews are conducted regularly to ensure that operations of the facility are met.

Policy, interviews with the Special Sheriff/Superintendent and the PREA Coordinator confirmed that a staffing plan review is conducted. Review of the staffing plan addressed organizational structure, lock up staffing and female detainee considerations, shift minimums, supervisory coverage and designation, youthful detainee considerations and confirmed that video monitoring, number and placement of supervisors, prevalence of substantiated and unsubstantiated incidents of sexual abuse, and resources are reviewed.

A detailed staff plan was provided to the auditor which demonstrated review of the physical plant, review of which agencies use the Regional Lock Up facility, staffing needs and budget requirements. As confirmed by interviews, there have been no allegations of sexual abuse for the prior year.

Finding of compliance is based on the following: Review of the policy, staffing plan, and random selection of rosters support compliance. Interviews with staff such as corrections officers, supervisors, Special Sheriff/Superintendent and PREA Coordinator all supported a finding of compliance. Overall observations during the audit process did not lead to any evidence that would indicate non-compliance.

Standard 115.114: Juveniles and youthful detainees

115.114 (a)

- Are juveniles and youthful detainees held separately from adult detainees? (N/A if the lockup does not hold juveniles or youthful detainees (detainees <18 years old).) Yes No NA

Auditor Overall Compliance Determination

Exceeds Standard (*Substantially exceeds requirement of standards*)

Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

Does Not Meet Standard (*Requires Corrective Action*)

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- Policy Directive Lockup Detainee Processing
- Observations
- Interviews with security staff
- PAQ

Policy Directive Lockup Detainee Processing states that juveniles shall not be booked at the same time as adult arrestees. Juveniles shall be housed separated from sight and sound from any inmates in the Jail or House of Corrections. The PAQ reported that two detainees, under the age of 18 yrs. old were held in the previous 12 months. It additionally indicated that zero juvenile/youthful detainees were held in the same cell as adults in this facility. The auditor was shown the area where a youthful detainee is held; it is separate from the main Regional Lock Up and the Jail and House of Corrections. All staff interviewed confirmed that they are held separate from adults. All staff relayed that legally youthful detainees can only be held for six hours. The auditor found the information consistent from staff to staff and therefore credible. The auditor requested and the facility provided an updated policy to reflect more detailed handling of detainees under the age of 18 yrs. old. Therefore, the auditor considers this facility compliant with this standard.

Standard 115.115: Limits to cross-gender viewing and searches

115.115 (a)

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

115.115 (b)

- Does the lockup document all cross-gender strip searches and cross-gender visual body cavity searches? Yes No

115.115 (c)

- Does the lockup have policies that enable detainees to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks? Yes No
- Does the lockup have procedures that enable detainees to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts,

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

- Does the lockup require staff of the opposite gender to announce their presence when entering an area where detainees are likely to be showering, performing bodily functions, or changing clothing? Yes No

115.115 (d)

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

115.115 (e)

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

Auditor Overall Compliance Determination

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

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020
- County Correctional Facilities Searches
- Dukes County Sheriff's Office Policy Directive Lockup Detainee Processing
- Dukes County Sheriff's Office Policy Directive Lockup Detainment of Prisoners and Bail Procedures
- Interviews with random staff
- Interviews with random inmates
- Observations
- PAQ

- Frequently Asked Questions - Clarification of Application to PREA Standards Provisions (FAQ)

The PAQ indicates that there has been no cross-gender strip or cross-gender visual body cavity searches of inmates, no cross-gender strip or cross-gender visual body cavity searches of inmates that did not involve exigent circumstances or were performed by non-medical staff.

County Correctional Facilities Searches confirms the following requirements:

- Strip searches private, personnel of the same sex except in an emergency
- Pat searches personnel of the same sex, if possible
- Body cavity searches only by medically trained staff

County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020

PREA Policy:

Cross gender searches strip shall not be conducted except in exigent circumstances and shall be documented. Security staff shall be trained accordingly.

Cross gender pat searches may be conducted by a female Officer on a male inmate, however Male Officers shall not conduct a pat search on a female inmate except in exigent circumstances and shall be documented.

Inmates shall be able to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia except in exigent circumstances which shall be documented in OMS. Shower doors are designed to prevent casual viewing of inmates showering, performing bodily functions and changing clothes.

Staff of the opposite gender shall have their presence announced when entering an inmate housing area.

Cross gender strip searches shall not be conducted except in exigent circumstances and shall be documented in the OMS. Security staff shall be trained accordingly.

Cross gender pat searches may be conducted by a female Officers on a male inmate, however Male Officers shall not conduct a pat search on a female inmate except in exigent circumstances and shall be documented in OMS.

The Command Staff, Captains, Lieutenants and/or Sergeants shall make unannounced rounds to identify and deter sexual misconduct and sexual abuse on all three shifts. Staff will not alert staff of such unannounced rounds. These rounds will be documented in the electronic inmate management system after they have been conducted.

Transgender and intersex inmates shall be given the opportunity to shower separately from other inmates.

The Sheriff's Office shall not physically exam a transgender or intersex inmate for the sole purpose of determining the inmate's genital status unless it is done as part of a broader medical examination conducted in private by a medical practitioner.

Dukes County Sheriff's Office Policy Directive Lockup Detainee Processing confirms that searches shall be conducted by trained staff of the same sex as the detainee to include use of the local police department. Additionally, this policy confirms that female arrestees shall not be booked at the same time as male arrestees, and females shall be housed separate from sight and sound from any inmates in the Jail and House of Corrections.

Dukes County Sheriff's Office Policy Directive Lockup Detainment of Prisoners and Bail Procedures further reinforces that monitoring of detainees of the opposite sex shall be done with respect to the detainee's privacy rights within the limits of facility security. It states, female staff shall supervise female detainees when detainment is for an extended period of time. The auditor was directed to the holding cell where a female would be placed. It provided privacy from other detainees and did not have video

monitoring. Staff informed the auditor that detainment would be only until the bond hearing; at that time if further detainment was required, the female detainee would be transferred to another jail where females are housed. The auditor found this credible.

Policy states inmates shall be able 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 which shall be documented. Shower doors are designed to prevent casual viewing of inmates showering, performing bodily function and changing clothes. Staff of the opposite gender are to announce their presence when entering an inmate housing unit.

During the tour, the auditor observed the showers located in the individual housing units. As stated in the Facility Description, the showers have curtains to provide privacy but maintain the ability to view sufficiently to ensure safety. Additionally, during the tour the auditor observed the area where strip searches are conducted in Intake. It provided appropriate privacy for the detainee during this process. During the tour, the auditor and escort team was announced prior to entering the unit; this did not appear to be odd based on the observations of the inmates in the unit at the time.

The auditor viewed the monitoring station for the camera system and found no view that afforded a female staff to view male inmates unclothed, nor a male staff to view female inmates unclothed.

PREA Policy:

The Sheriff's office shall not physically examine a transgender or intersex inmate for the sole purpose of determine the inmate's genital status unless it is done as part of a broader medical examination conducted in private by a medical practitioner.

All staff interviews supported that they were knowledgeable regarding this requirement of the standard and this has not occurred at this facility. The auditor reviewed the training curriculum for pat searches. It addresses when searches are to be conducted, searches of transgender/intersex inmates are to be professional, respectful and in the least intrusive manner possible, consistent with security needs, techniques for conducting cross-gender searches, noting a second officer should be present, re-emphasis of not conducting cross-gender pat searches unless there is an exigent circumstance, a female officer searching a male inmate, and a male officer searching a female inmate. The Training Curriculum additionally states, *Operationally, three options are in current practice for searches of transgender or intersex inmates/residents/detainees: 1) searches conducted only by medical staff; 2) searches conducted by female staff only, especially given there is no prohibition on the pat-searches female staff can perform (except in juvenile facilities); and 3) asking inmates/residents/detainees to identify the gender of staff with whom they would feel most comfortable conducting the search.* This supports compliance with the FAQ issued December 2016 which indicates clarification for searches of transgender/intersex inmates.

Training records provided demonstrate that staff have received this training. All staff interviews support attendance at the training, knowledge and compliance of the techniques provided in training.

Finding of compliance is based on the following: Policies which support compliance, staff interviews demonstrated knowledge of these requirements from training received, the training curriculum, training records, and overall observations made during the audit process. In accordance with FAQ clarifications, policy was updated to allow a transgender/intersex incarcerated individual to designate the gender of the staff to pat search in accordance with the inmates preferred gender. Interviews all confirmed that they have been appropriately trained regarding how to search transgender/intersex persons and cross-gender pat searches. The auditor is finding this facility is compliant with this standard.

Standard 115.116: Detainees with disabilities and detainees who are limited English proficient

115.116 (a)

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

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

115.116 (b)

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

115.116 (c)

- Does the agency always refrain from relying on detainee interpreters, detainee readers, or other types of detainee assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the detainee's safety, the performance of first-response duties under §115.164, or the investigation of the detainee's allegations? Yes No

Auditor Overall Compliance Determination

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

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020
- Observations during the tour
- Interview with the Sheriff
- Interviews Inmates LEP
- Random staff interviews
- PAQ
- Google Translate
- PREA Posters English and Portuguese

County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020

PREA Policy:

The Sheriff's Office shall take appropriate steps to ensure that inmates with disabilities and limited English proficiency have an equal opportunity to participate in or benefit from all aspects of the Sheriff's Office efforts to prevent, detect and respond to sexual abuse and sexual harassment. Steps include but are not limited to providing inmates with disabilities and limited English proficiency access to the ADS of Human Service as determined during the intake process as well as interpretive services.

Use of inmate interpreters, inmate readers, or other types of inmate assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of medical duties or investigation of the inmate's allegation.

Interview with the Sheriff confirmed they would use community partners for needs that could not be met with the listed resources.

The PAQ reports that there have been no instances where an inmate was used to interpret during a PREA investigation in the previous 12 months. The auditor found no reason to dispute this fact during the audit process. All staff interviews confirmed that another inmate would not be used to interpret for an inmate making a PREA allegation or any part of the PREA requirements (intake, investigation, etc).

The interview with the Sheriff supported compliance for ensuring that detainees with disabilities or who are limited English proficient will have an equal opportunity to benefit from all efforts to prevent, detect, and respond to sexual abuse and sexual harassment. The audit of the Jail and House of Correction supported that the staff utilize google translate immediately or as indicated by the Sheriff, reach out to community resources. Posters regarding detainees' rights were visible during the audit and were in both English and Spanish.

Based on policy, observations interview with the Sheriff and experiences from the auditor of the Jail and House of Corrections, the auditor finds sufficient evidence to support a finding of compliance.

Standard 115.117: Hiring and promotion decisions

115.117 (a)

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

- Does the agency prohibit the enlistment of services of any contractor who may have contact with detainees who: Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse? Yes No
- Does the agency prohibit the enlistment of services of any contractor who may have contact with detainees who: Has been civilly or administratively adjudicated to have engaged in the activity described in the question immediately above? Yes No

115.117 (b)

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

115.117 (c)

- Before hiring new employees, who may have contact with detainees, does the agency: Perform a criminal background records check? Yes No
- Before hiring new employees, who may have contact with detainees, does the agency: Make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse? Yes No

115.117 (d)

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

115.117 (e)

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

115.117 (f)

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

- Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct? Yes No

115.117 (g)

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

115.117 (h)

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

Auditor Overall Compliance Determination

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

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- County Correctional Facilities Selection and Hiring 9/21/2021
- Background Authorization form
- Staff background checks - four total
- Personal Statement form
- Observations
- Interviews Assistant Superintendent for Personnel and the Employee and Public Relations Assistant
- Employment Application
- Release and Certification form
- Documents - Personnel files of those hired or promoted in the past 12 months
- Documentation randomly requested confirmation of background checks
- PAQ

The PAQ indicates that three staff have been hired who may have contact with detainees in the previous twelve months, zero contractors who might have contact with detainees hired in the past 12 months.

County Correctional Facilities Selection and Hiring 9/21/2021 confirms the following:

- *Pre employment background checks*

- *The Duke's County Sheriff's Office shall not hire or promote anyone who may have contact with inmates, and shall not enlist the services of any contractor who may have contact with inmates, who—*
 - (1) *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);*
 - (2) *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; or*
 - (3) *Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (a)(2) of this section.*
- *The Duke's County Sheriff's Office shall consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor who may have contact with inmates*
- *Before hiring new employees who may have contact with inmates, the Duke's County Sheriff's Office shall:*
 - (1) *Perform a criminal background records check; and*
 - (2) *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.*
- *The Duke's County Sheriff's Office shall also perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates.*
- *The Duke's County Sheriff's Office shall either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates.*
- *The agency shall ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (1) of this section in written applications or interviews for hiring or promotions and in any interviews or written self-evaluations conducted as part of reviews of current employees. The agency shall also impose upon employees a continuing affirmative duty to disclose any such misconduct.*
- *Material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination.*
- *Duke's County Sheriff's Office shall 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.*

The policy requires that all candidates, new applications, or promotional, are asked these questions. The auditor reviewed the application process. Documentation for the most recent newly hired staff demonstrated that the three questions were asked. The Interview with the Assistant Superintendent for Personnel and the Employee and Public Relations Assistant indicated that they had not had a candidate with a history of sexual harassment which required consideration.

The Release and Certification form confirms that applicants sign authorizing the following: previous work records, employment records, education, certification, professional licenses, driver's license and history, professional references and other necessary information. Additionally, this forms requires that candidates confirm the following: *I certify under the pains and penalties of perjury that all statements made by me on this application are true and complete to the best of my knowledge and that I have withheld nothing, which, if disclosed, would affect the application unfavorably. I understand that any false statements, omissions or answers made by me on this application can result in my immediate termination.* The auditor reviewed the application process which includes employment history, reference checks, security clearance request form noting that the Criminal Offender Record

Information (CORI) check will be conducted, noting refusal or failure to answer all questions or to provide accurate information will result in the application being denied. The following are checked: National Crime Information Center (NCIC) check, Criminal Justice Information system (CJIS), Board of Probation (BOP) – Massachusetts, Driver’s License history, warrant check , fingerprints and criminal history. The interview with the investigator, who conducts backgrounds checks, confirmed these checks. The auditor reviewed the background check for the most recently hired staff during the onsite audit. There has been no new recently hired contractual staff for this facility.

The auditor was provided a copy of the Personal Statement form completed by candidates. It requests employment history education, training/experience and previous addresses. It includes a section for the applicant to address the questions noted in provision (a). the statement acknowledged after answering the questions is as follows: *I hereby certify that I have answered the above questions honestly and accurately. I understand that I have a continuing, affirmative duty to immediately report in writing to the dukes County Sheriff’s Office any such misconduct during the time I am employed by contract with, or volunteer for the Dukes County Sheriff’s Office. I understand that material omissions regarding sch misconduct, or the provision of materially false information, shall be grounds for termination/dismissal.*

Th auditor randomly requested and reviewed background documentation for four staff with the last name beginning with D (2), M & T.

These questions are asked of applicants as observed on the application process documentation. There have not been any newly promoted staff for the auditor to check for the practice of this.

As noted, the Release and Certification form confirms that candidates sign the following: *I certify under the pains and penalties of perjury that all statements made by me on this application are true and complete to the best of my knowledge and that I have withheld nothing, which, if disclosed, would affect the application unfavorably. I understand that any false statements, omissions or answers made by me on this application can result in my immediate termination.*

Policy supports that this information would be provided. Per the interview with the Assistant Superintendent for Personnel and the Employee and Public Relations Assistant their office has not had to provide information to another agency about a prior employee. Upon receipt of a release of records, this information would be provided.

Finding of compliance is based on the following: Policy, interviews with the PREA Coordinator, Assistant Superintendent for Personnel , Employee and Public Relations Assistant, investigator, who conducts the background checks, and review of the application process all provided the auditor with evidence to support a finding of compliance with all provisions of the standard.

Standard 115.118: Upgrades to facilities and technologies

115.118 (a)

- If the agency designed or acquired any new lockup 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 detainees from sexual abuse? (N/A if agency/lockup has not acquired a new lockup or made a substantial expansion to

existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)

Yes No NA

115.118 (b)

- If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect detainees from sexual abuse? (N/A if agency/lockup has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)

Yes No NA

Auditor Overall Compliance Determination

Exceeds Standard (*Substantially exceeds requirement of standards*)

Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

Does Not Meet Standard (*Requires Corrective Action*)

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020
- Observations
- Interviews Sheriff
- Interview Special Sheriff/Superintendent
- PAQ

The PAQ indicates the facility has not acquired any new facilities or made any substantial expansions or modifications of existing facilities since the last PREA audit and has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since the last PREA audit.

The auditor confirmed through observations and interview with the Sheriff and Special Sheriff/Superintendent that there have been no upgrades to the facility or video monitoring system in the past 12 months.

Finding of compliance is based on the following:

Policy noted above supports that sexual abuse and sexual harassment prevention will be considered when making changes to the physical plant or upgrading the camera system. The interview with the Special Sheriff/Superintendent supports this as well. Based on the interview with the Special Sheriff/Superintendent and the PREA Coordinator, both confirmed that elimination of sexual abuse and sexual harassment is considered for all updates.

RESPONSIVE PLANNING

Standard 115.121: Evidence protocol and forensic medical examinations

115.121 (a)

- If the agency is responsible for investigating allegations of sexual abuse in its lockups, 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/lockup is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.) Yes No NA

115.121 (b)

- Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/lockup is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.) Yes No NA
- Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/lockup is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.) Yes No NA

115.121 (c)

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

115.121 (d)

- If the detainee is transported for a forensic examination to an outside hospital that offers victim advocacy services, does the agency permit the detainee to use such services to the extent available, consistent with security needs? Yes No

115.121 (e)

- 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/lockup is responsible for conducting criminal AND administrative sexual abuse investigations.) Yes No NA

115.121 (f)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

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

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020
- PAQ
- Interview with medical staff
- Interview with the investigator
- PREA kit
- Interview with SANE Regional Coordinator
- MOU with Martha's Vineyard Community Services' CONNECT to End Violence
- Interview with the Program Director CONNECT rape crisis services
- Sexual Assault Evidence Collection Kit SAECK

The PAQ indicates there have been no forensic medical exams, no SANE/SAFE exams nor exams performed by a qualified medical practitioner during the previous twelve months.

County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020 states, *Investigators shall gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence, and any available electronic monitoring data.*

In addition to policy, the interview with the trained investigator confirmed that the agency does follow an established uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. This is accomplished through the maintenance of PREA kits to ensure evidence is properly collected in the outline provided in the investigator Field Manual (Confidential) which has a section dedicated to sexual abuse response. The auditor reviewed the confidential information in the Field Manual and found that it provides detailed information on ensuring a uniform evidence protocol which maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. The Massachusetts State Police handle evidence and process it at the State Police Crime Lab. Additionally, the PREA Kit inventory was provided which includes items to ensure proper evidence collection if that occurs by facility staff. These items include a change of clothing, evidence bags and tags, chain of custody forms, and a sheet to lay upon the floor during evidence collection/changing of clothing.

Evidence Protocol and Forensic Medical Examinations are based on the Sexual Assault Investigator Certification Curriculum, Municipal Police Training Committee. The facility provided the auditor with additional information regarding the evidence collection by the Commonwealth of Massachusetts referred to as SAECK (Sexual Assault Evidence Collection Kit). Documentation provided stated the following: the state established a statewide tracking system to electronically monitor the collection and testing of sexual assault evidence collection kits (SAECK(s)) pursuant to Section(s) 11, 24, 216 and 228 of Chapter 69 of the Acts of 2018, "An Act Relative to Criminal Justice Reform". This was information authored by the Secretary of the Commonwealth of Massachusetts Office of Public Safety and Security. Additionally, documentation was provided regarding the web-based software for tracking sexual assault and toxicology kits. Per the interview with a Massachusetts Regional SANE Coordinator, this program is based on the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents", most current version. She confirmed the process using the SAECK established in this state.

County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020 states, *If the inmate reports they have been sexually abused when no medical or mental health services staff are available, the Shift Supervisor will assign a First Responder Security Staff to respond to the location and also contact the DCSO Communications Center for the Emergency Medical Services to transport to the Martha's Vineyard Hospital for examination and treatment. Upon completion of the medical and mental health evaluation, the Superintendent or their designee in consultation with medical and/or Mental Health personnel shall determine whether a referral to an outside hospital with a rape crisis unit is warranted. Factors to be considered are the time frame between the alleged assault and the complaint, as well as the extent and nature of the allegation. If the determination is made that the inmate victim should be sent to an outside hospital and if the inmate victim consents, the inmate victim shall be transported to the Martha's Vineyard Hospital and their SANE or TELESANE program where they shall receive essential medical intervention to include preventative treatment for HIV, sexually transmitted diseases and pregnancy if appropriate. If pregnancy results from the described sexually abusive behavior, the victim will receive timely and comprehensive information about and timely access to all lawful pregnancy related medical services. Treatment services including forensic medical exams are offered without financial cost to the victim.*

County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020 states, *A victim advocate will be assigned to meet with the inmate. The advocate will keep the inmate victim informed of the status of the investigation and as appropriate, the disciplinary and criminal prosecution of the alleged perpetrator. The advocate shall make the inmate victim aware of the short and long term services available to them.*

The agency has Memorandum of Understanding (MOU) with the Martha's Vineyard Community Services' CONNECT to End Violence Rape Crisis Counselors/Advocates. The agreement confirms that the local hospital used is a critical access hospital, fully accredited by the Joint Commission on Accreditation of Health Care Organization and licensed by the Department of Public Health of the Commonwealth of Massachusetts.

Within this MOU the following are agreed upon by the Duke's County Sheriff's Office and this organization: *DCSO agrees to make involvement of CONNECT Rape Crisis Counselors/Advocates by phone a component of the standard response to a report of sexual assault and/or request for help from a survivor of sexual assault.* The MOU is signed by the Sheriff, ADS Human Services, Chief Executive Officer of the local hospital and the Program director, CONNECT to End Violence, date 6/21/2021. Email exchange with the Program Director confirmed to the auditor that they are contacted by the

hospital and could also be contacted by the Jail; this organization would then provide in-person or web based (preference of the patient) sexual assault counselors.

Finding of compliance is based on the following:

Although no incidents of sexual assault have been reported, the agency is prepared to ensure the following: There is a uniform evidence collection process, the process is based on comprehensive and authoritative protocols, survivors of sexual assault, if indicated, will be transported to a hospital where a SANE exam will be conducted immediately, and a victim advocate from a rape crisis center will be available upon request. Furthermore, services will be provided without financial cost to the victim. Evidence used to support this finding include agency policy, state policy, MOU with a rape crisis center, investigator training curriculum, observation of the PREA kit at the facility, interview with Regional SANE Coordinator, and the Program Director for the rape crisis center.

Standard 115.122: Policies to ensure referrals of allegations for investigations

115.122 (a)

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

115.122 (b)

- If another law enforcement agency is responsible for conducting investigations of allegations of sexual abuse and sexual harassment in its lockups, does the agency have a policy in place to ensure that such allegations are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior? (N/A if agency is responsible for conducting administrative and criminal investigations of sexual abuse or sexual harassment. See 115.121(a).) Yes No NA
- Has the agency published such policy, including a description of responsibilities of both the agency and the investigating entity, on its website or, if it does not have one, made the policy available through other means? (N/A if agency is responsible for conducting administrative and criminal investigations of sexual abuse or sexual harassment. See 115.121(a).) Yes No NA
- Does the agency document all such referrals? (N/A if agency is responsible for conducting administrative and criminal investigations of sexual abuse or sexual harassment. See 115.121(a).) Yes No NA

115.122 (c)

- Auditor is not required to audit this provision.

115.122 (d)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

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

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020
- Observations
- Interviews Sheriff
- Interview with the Special Sheriff/Superintendent
- Interviews Investigative Staff
- Massachusetts State Police website
- Dukes County Sheriff's Office website
- PAQ

The PAQ indicates there have been zero allegations resulting in an administrative investigation and zero allegations resulting in criminal investigations in the past 12 months.

County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020 states, *Investigations of reported incidents of sexually abusive behavior between inmates shall be initiated by the Superintendent and the Assistant Superintendent. The Assistant Superintendent shall be responsible for producing an investigative report within seven business days unless the time is extended by the Superintendent.*

Staff Accused of Sexually Abusive Behavior with Inmates:

If a staff member is accused of sexually abusive behavior with an inmate, the Superintendent shall initiate an investigation.

The facility shall report all allegations of sexual abuse and sexual harassment including third party and anonymous reports to the facility's designated investigators. Throughout the investigation, as well as at the conclusion of the investigation, the investigator will deliver the report(s) to the Superintendent who will review the investigation and determine what action to take based upon the investigation.

If the Sheriff and/or his designee believe that a felony may have been committed, the District Attorney's Office and the Inner perimeter Security Unit shall be notified and the Sheriff's Office shall seek assistance and begin a cooperative investigation with these agencies. In the event the felony is believed to be committed by a staff member, the Sheriff's Office shall seek assistance from the Massachusetts State Police Detective Unit in conjunction with the District Attorney's Office. Criminal investigations shall be documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attached copies of all documentary evidence where feasible.

The Assistant Superintendent shall ensure that all evidence collected at any hospital (Sexual Assault Evidence Collection Kit/Rape Kit) is transported to the State Police Laboratory as soon as possible. All evidence shall be handled in accordance with DCSO Policy 924.06, Searches. Evidence retained in

excess of twenty-four (24) hours (weekends/holidays), shall be properly refrigerated in a secure refrigerator.

The Massachusetts State Police addresses evidence and processes it at the State Police Crime Lab. The auditor found on the website the following: *Furthermore, the Massachusetts State Police website states, The Massachusetts State Police (MSP) has a zero-tolerance policy toward sexual abuse and sexual harassment of any kind towards any detainee while in State Police custody. All detainees have equal rights to safety, dignity, and justice and have the right to be free from sexual abuse and sexual harassment. Lock up facilities under their supervision have been certified compliant with PREA which further reinforces compliance with the standard.*

Finding of compliance is based on the following: Policy supports the requirements of the standard. The Massachusetts State Police are PREA compliant. The interviews with the Sheriff and Special Sheriff/Superintendent confirm that an investigation will be completed for all allegations of sexual abuse and sexual harassment and that if needed, investigations will be referred to the Massachusetts State Police if criminal charges appear appropriate. The investigator confirmed he is informed of any needs for an investigation. With the facility size, the auditor finds this credible. The policy describes the process and is posted on the agency web site.

TRAINING AND EDUCATION

Standard 115.131: Employee and volunteer training

115.131 (a)

- Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: Its zero-tolerance policy and detainees' right to be free from sexual abuse and sexual harassment? Yes No
- Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: The dynamics of sexual abuse and sexual harassment in confinement, including which detainees are most vulnerable in lockup settings? Yes No
- Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: The right of detainees and employees to be free from retaliation for reporting sexual abuse or harassment? Yes No
- Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: How to detect and respond to signs of threatened and actual sexual abuse? Yes No

- Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: How to communicate effectively and professionally with all detainees? Yes No
- Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities? Yes No

115.131 (b)

- Have all current employees and volunteers who may have contact with detainees received such training? Yes No
- Does the agency provide each employee and volunteer with annual refresher information to ensure that they know the agency's current sexual abuse and sexual harassment policies and procedures? Yes No

115.131 (c)

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

Auditor Overall Compliance Determination

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

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020
- Staff training records
- Observations
- Interviews random staff
- Interview new employee
- PREA Power Point
- PREA Lesson Plan
- PAQ
- FAQ

- Volunteer & Contractor Orientation Handbook
- Interview with the Volunteer Coordinator
- Interview with the Training Coordinator

The PAQ indicates that all employees, 22, who have contact with inmates were trained on PREA requirements as outlined in the provision, zero volunteers. During the previous 12 months, largely related to the coronavirus pandemic, the facility reports there have been no volunteers present at the facility.

County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020 states, *The Sheriff's Office shall be responsible for planning and implementing measures to prevent sexually abusive behavior from occurring. The Sheriff's Office strives to create a safe environment for employees, contractors and inmates, which is free from sexual harassment, sexual abuse and exploitation. In this regard, the Sheriff's Office shall provide for the following resources and practices: Training and Education*

The Training Division in conjunction with the PREA Task Force shall develop and maintain a training plan to ensure that Sheriff's Office employees, contractors and volunteers are educated regarding their responsibilities to prevent and report incidents of sexually abusive behavior. The Training Division is responsible for educating employees, contractors and volunteers regarding their responsibilities to prevent and report incidents of sexually abusive behavior and documenting that all employees, contractors, and volunteers understand the training they received.

Training for employees, contractors and volunteers shall include, but not be limited to the following: Sheriff's Office zero-tolerance policy for sexual abuse and sexual harassment.

Responsibilities in preventing, detecting, reporting and responding to sexual abuse and sexual harassment.

The right of inmates to be free from sexual abuse and sexual harassment.

The right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment.

The dynamics of sexual abuse and sexual harassment in confinement.

The common reactions of sexual abuse and sexual harassment victims.

How to detect and respond to signs of the threat of sexual abuse and actual sexual abuse.

How to avoid inappropriate relationships with inmates.

How to communicate effectively and professionally with inmates, including LGBTI or gender non-conforming inmates.

How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.

Additional training for Health Services shall include, but not be limited to the following:

How to detect and assess signs of sexual abuse and harassment.

How to preserve physical evidence of sexual abuse.

How to respond effectively and professionally to victims of sexual abuse and sexual harassment.

How and to whom to report allegations or suspicions of sexual abuse and sexual harassment.

Training conforms to both male and female inmates.

All staff interviewed confirmed to the auditor that they have received the training, and the training addressed the required topics. It was reported to the auditor by the training coordinator that training after the academy is initiated through an online training system. Staff complete a quiz demonstrating they understood the training and policy review. At this point, it was reported that PREA training would be conducted annually in the required in-service training. The auditor was able to observe the form that is electronically signed that indicated staff acknowledging they "understood" the training. The training

coordinator confirmed, as did a random interview with a new employee, that PREA training was received prior to working around inmates, which confirmed compliance with the FAQ issued by the DOJ.

This is the agency's first PREA audit. Records were provided that all staff have received the training.

The auditor reviewed the training power point and lesson plan and confirmed that it addresses the follow:

Finding of compliance is based on the following:

Review and purpose of PREA

Zero tolerance

Review of statistics

Risk Factors

Confinement issues

Definitions of misconduct

Signs of victimization

Response to known or reported allegations

Staff Responsibilities and Procedures

Avoiding overfamiliarity, illegal staff relationships

Gender Identity/Gender expression

Unannounced Rounds by supervisors

Lesson Plan:

Review of the standards

Definitions

Female risk factors

Male risk factors

First Responder duties

County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020 states, *The Sheriff's Office shall be responsible for planning and implementing measures to prevent sexually abusive behavior from occurring. The Sheriff's Office strives to create a safe environment for employees, contractors and inmates, which is free from sexual harassment, sexual abuse and exploitation. In this regard, the Sheriff's Office shall provide for the following resources and practices: Training and Education*

The Training Division in conjunction with the PREA Task Force shall develop and maintain a training plan to ensure that Sheriff's Office employees, contractors and volunteers are educated regarding their responsibilities to prevent and report incidents of sexually abusive behavior. The Training Division is responsible for educating employees, contractors and volunteers regarding their responsibilities to prevent and report incidents of sexually abusive behavior and documenting that all employees, contractors, and volunteers understand the training they received.

Volunteer & Contractor Orientation Handbook includes a section on PREA which includes a review of the law, zero tolerance, definitions of sexual harassment and sexual abuse, and how to respond if made aware of an allegation by an inmate. There is a form requiring review and signature, that requires a yes or no response to the following:

(1) 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);

(2) 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; or

(3) Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (a)(2) of this section.

(4) informed of zero tolerance policy

(5) Informed of duty to report any allegations of abuse and harassment

(6) Informed of how to report

(7) I understand if I have a question to contact the PREA manager

Attestation to the following:

I hereby certify that I have answered the above questions honestly and accurately. I understand that material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination/dismissal. I further understand and acknowledge that I have a continuing, affirmative duty to immediately report any such misconduct during the time I am employed by, contract with, or volunteer for the Dukes County Sheriff's Office.

The interview with the Volunteer Coordinator confirmed this process.

Based on review of the policies, information provided to staff and volunteers, training curriculum, training records, interview with the training coordinator and the volunteer coordinator, the auditor finds sufficient evidence to support a finding of compliance with this standard.

Standard 115.132: Detainee, contractor, and inmate worker notification of the agency's zero-tolerance policy

115.132 (a)

- During the intake process, do employees notify all detainees of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment? Yes No

115.132 (b)

- Does the agency ensure that, upon entering the lockup, all contractors and any inmates who work in the lockup are informed of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment? Yes No

Auditor Overall Compliance Determination

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

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020
- Dukes County Sheriff's Office Policy Directive Lockup Detainee Processing
- Observations

- Interview contractor – mental health
- Volunteer & Contractor Orientation Handbook
- Observation of information notifying detainee of the agency's zero tolerance policy regarding sexual abuse and sexual harassment in the bail processing room.

County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020 states, *The Sheriff's Office shall be responsible for planning and implementing measures to prevent sexually abusive behavior from occurring. The Sheriff's Office strives to create a safe environment for employees, contractors and inmates, which is free from sexual harassment, sexual abuse and exploitation. In this regard, the Sheriff's Office shall provide for the following resources and practices: Training and Education*

The Training Division in conjunction with the PREA Task Force shall develop and maintain a training plan to ensure that Sheriff's Office employees, contractors and volunteers are educated regarding their responsibilities to prevent and report incidents of sexually abusive behavior. The Training Division is responsible for educating employees, contractors and volunteers regarding their responsibilities to prevent and report incidents of sexually abusive behavior and documenting that all employees, contractors, and volunteers understand the training they received.

Volunteer & Contractor Orientation Handbook includes a section on PREA which includes a review of the law, zero tolerance, definitions of sexual harassment and sexual abuse, and how to respond if made aware of an allegation by an inmate. There is a form requiring review and signature, that requires a yes or no response to the following:

- (1) *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);*
- (2) *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; or*
- (3) *Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (a)(2) of this section.*
- (4) *informed of zero tolerance policy*
- (5) *Informed of duty to report any allegations of abuse and harassment*
- (6) *Informed of how to report*
- (7) *I understand if I have a question to contact the PREA manager*

Attestation to the following:

I hereby certify that I have answered the above questions honestly and accurately. I understand that material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination/dismissal. I further understand and acknowledge that I have a continuing, affirmative duty to immediately report any such misconduct during the time I am employed by, contract with, or volunteer for the Dukes County Sheriff's Office.

The interview with the contractual mental health staff confirmed this process. She indicated her agency provides contractual services for many correctional agencies in this state and they have received ample training in their role with PREA.

Dukes County Sheriff's Office Policy Directive Lockup Detainee Processing was updated to reflect the following: *During the intake process, employees shall notify all detainees of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment.*

The auditor was informed and found credible based on observations that no inmate works in the lockup area of the facility.

Based on review of policy, information provided to contractual staff, interview with the contractual staff and observations of information provided to detainees, the auditor finds sufficient evidence to support a finding of compliance with this standard due to the required annual refresher training for volunteers.

Standard 115.134: Specialized training: Investigations

115.134 (a)

- In addition to the general training provided to all employees pursuant to §115.131, 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 115.121(a).) Yes No NA

115.134 (b)

- Does this specialized training include: Techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.121(a).) Yes No NA
- Does this specialized training include: Proper use of Miranda and Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.121(a).) Yes No NA
- Does this specialized training include: Sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.121(a).) Yes No NA
- Does this specialized training include: The criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.121(a).) Yes No NA

115.134 (c)

- Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.121(a).) Yes No NA

115.134 (d)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

Exceeds Standard (*Substantially exceeds requirement of standards*)

Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

Does Not Meet Standard (*Requires Corrective Action*)

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020
- Observations
- Interviews Investigative staff
- Training completion docs
- Curriculum for investigators
- Regular PREA Training documentation for investigator
- PAQ # of investigators agency

The PAQ indicates there is one staff trained at the agency to conduct sexual abuse investigations.

(a), (c) As indicated, the PAQ indicates that one staff is trained to conduct sexual abuse investigations. The auditor interviewed the trained investigator assigned to this facility. In addition to documentation demonstrating he received the general training provided to all employees, documentation of his specialized training was provided.

Interviews with the trained investigator supports that the training included techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. He attended the PREA Sexual Assault Investigation Training conducted by the Massachusetts Department of Correction.

(b) The auditor reviewed the training curriculum. The training curriculum addresses the following topics over a course of three days: Introduction to Sexual Assault Investigation; Defining PREA; Evidence Protocol; Interviewing, including Miranda and Garrity; Investigative Outcomes Documentation; and Post Allegation responsibilities. The details of this training do address the requirements of this provision.

Finding of compliance is based on the following: Interview with the investigators, documentation of specialized training for investigators, documentation of regular PREA training for the investigator as well as policy supporting the requirements of the standard provide sufficient evidence to support a finding of compliance.

SCREENING FOR RISK OF SEXUAL VICTIMIZATION AND ABUSIVENESS

Standard 115.141: Screening for risk of victimization and abusiveness

115.141 (a)

- If the lockup is not utilized to house detainees overnight, before placing any detainees together in a holding cell do staff consider whether, based on the information before them, a detainee may be at a high risk of being sexually abused? (N/A if the lockup is utilized to house detainees overnight.) Yes No NA
- When appropriate, do staff take necessary steps to mitigate such danger to the detainee? (N/A if the lockup is utilized to house detainees overnight.) Yes No NA

115.141 (b)

- If the lockup is utilized to house detainees overnight, are all detainees screened to assess their risk of being sexually abused by other detainees or sexually abusive toward other detainees? (N/A if lockup is NOT used to house detainees overnight.) Yes No NA

115.141 (c)

- In lockups described in paragraph (b) of this section, do staff always ask the detainee about his or her own perception of vulnerability? (N/A if lockup is NOT used to house detainees overnight.) Yes No NA

115.141 (d)

- Does the screening process in the lockups described in paragraph (b) of this section consider, to the extent that the information is available, the following criteria to screen detainees for risk of sexual victimization: Whether the detainee has a mental, physical, or developmental disability? (N/A if lockup is NOT used to house detainees overnight.) Yes No NA
- Does the screening process in the lockups described in paragraph (b) of this section consider, to the extent that the information is available, the following criteria to screen detainees for risk of sexual victimization: The age of the detainee? (N/A if lockup is NOT used to house detainees overnight.) Yes No NA
- Does the screening process in the lockups described in paragraph (b) of this section consider, to the extent that the information is available, the following criteria to screen detainees for risk of sexual victimization: The physical build and appearance of the detainee? (N/A if lockup is NOT used to house detainees overnight.) Yes No NA
- Does the screening process in the lockups described in paragraph (b) of this section consider, to the extent that the information is available, the following criteria to screen detainees for risk of sexual victimization: Whether the detainee has previously been incarcerated? (N/A if lockup is NOT used to house detainees overnight.) Yes No NA
- Does the screening process in the lockups described in paragraph (b) of this section consider, to the extent that the information is available, the following criteria to screen detainees for risk of sexual victimization: The nature of the detainee's alleged offense and criminal history? (N/A if lockup is NOT used to house detainees overnight.) Yes No NA

Auditor Overall Compliance Determination

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

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- Dukes County Sheriff's Office Policy Directive Lockup Detainee Processing
- Review of detainee risk assessment
- Observation of detainee risk assessment

Dukes County Sheriff's Office Policy Directive Lockup Detainee Processing was updated at the request of the auditor to reflect the following:

During the intake, process **all** detainees will be advised that:

The Dukes County Sheriff's Office has a "zero tolerance" policy for sexual abuse and sexual harassment in our facility. (Advise)

The following screening for risk of victimization and abusive will occur for every detainee to ensure that all detainees in the custody of the Dukes County Sheriff's Office remain free from sexual abuse and sexual harassment.

Do you believe you are vulnerable to sexual victimization? (Ask)

Does the detainee have any mental, physical, or developmental disabilities? (Observational)

Is the detainee under the age of 18 or over the age of 65? (Observational)

Is the detainee small in stature? (Observational)

defined as: Male - less than 5'6" and less than 140 lbs.

Female – less than 5' and/or less than 100 lbs.

Is this the detainees 1st incarceration? (Observational according to BOP)

****If a yes answer to 2 or more questions above the detainee shall be housed separately from other detainees*

Does the detainee have a current offense or a criminal history containing acts of sexual in nature?

****If a yes answer detainee shall be housed separately from other detainees.*

A keep separate alert will be triggered if the detainee is considered at risk for being sexually abused by other detainees or sexually abusive toward other detainees.

The auditor was provided the risk assessment for detainees. It addresses the following which supports compliance with the provision:

Do you believe you are vulnerable to sexual victimization?

Does the detainee have any mental, physical, or developmental disabilities?

Is the detainee under the age of 18 or over the age of 65?

Is the detainee small in stature?

defined as: Male - less than 5'6" and less than 140 lbs.

Female – less than 5' and/or less than 100 lbs.

Is this the detainees 1st incarceration?

****If a yes answer to 2 or more questions above the detainee shall be housed separately from other detainees*

Does the detainee have a current offense or a criminal history containing acts of sexual in nature?

****If a yes answer detainee shall be housed separately from other detainees.*

During the audit, the auditor was able to observe the intake process which demonstrated that these questions are addressed.

Based on policy, review of the risk assessment and observation of a detainee risk assessment, the auditor finds there is sufficient evidence to support a finding of compliance.

REPORTING

Standard 115.151: Detainee reporting

115.151 (a)

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

115.151 (b)

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

115.151 (c)

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

115.151 (d)

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

Auditor Overall Compliance Determination

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

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020
- Intake Information
- Interviews inmates
- Interviews random staff
- Email confirming that the Massachusetts Department of Correction PREA office will accept complaints, including anonymous and forward them to Dukes County Sheriff's Office immediately.

County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020 states, *All Sheriff's Office employees, contractors and volunteers are to immediately report to the Facility Shift Supervisor any knowledge, suspicion or information regarding an incident of sexual abuse or sexual harassment that occurred either in the Dukes County Correctional Facility or any other facility. Any retaliation against inmates or staff who reported such an incident and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation are also to be reported. All allegations and incidents of inmate on inmate, staff on inmate, or inmate on staff sexually abusive behavior, whether reported verbally, in writing, anonymously or by 3rd parties, shall be immediately reported by Sheriff's Office employees, contractors or volunteers to the Facility Shift Supervisor verbally, and followed up with a report to the Superintendent before the end of their shift. During non-business hours, these allegations shall be reported to the Facility Shift Supervisor and Duty Officer who shall ensure that the Superintendent/Assistant Superintendent is immediately notified. Failure of any Sheriff's Office employee, contractor or volunteer to report these allegations may result in disciplinary action up to and including termination. Staff shall not reveal any information related to a sexual abuse report to anyone other than those involved in the investigation. The Mass PREA Division hotline number, is toll free and programmed into the inmate telephone system.*

The following is posted next to the detainee telephones in the bond processing room.

Be advised that inmate telephone conversations are monitored.

Esteja ciente de que as conversas telefônicas dos presidiários são monitoradas.

Toll-free unrecorded numbers:

Números gratuitos não monitorados:

Prisoners' Legal Services:

Serviços jurídicos para prisioneiros:

(617)482-4124

PREA Manager:

Gerente PREA:

(774)549-6093

CONNECT to End Violence:

CONECTE-SE para acabar com a violência:
(508)696-7233

The PREA pamphlet, posted on the wall where intake and bail hearings are conducted includes the following:

What is PREA?

What is Sexual Abuse, What is Sexual Harassment?

What to do if sexually assaulted?

What Kind of Help can I get?

What does Zero Tolerance mean?

(b)Reporting numbers for reporting inside the facility, reporting outside the facility and numbers to get outside confidential help

PREA Posters:

Sexual Abuse and Sexual Harassment, No Means No, Zero tolerance policy, How to Report including the number to the PREA Manager direct, third party options, writing to an outside agency, telling staff, or reporting in writing.

(c)Staff interviews confirmed that staffs are aware of this expectation and support compliance, including the reporting of suspicions, third party and anonymous allegations to their immediate supervisor, stating that this information is well received and handled appropriately by the supervisors.

(d)Staff interviews revealed that they could go directly to the PREA Coordinator, PREA Compliance Manager, Assistant Superintendent, Special Sheriff/Superintendent or their union to report sexual abuse privately. There were aware it would be allowed to break chain of command for an allegations/suspicion of a sensitive nature.

Finding of compliance is based on the following: Policy supports all requirements of the standard. Staff and inmate interviews acknowledge there are multiple methods for filing a complaint. Review of the policies, investigations, interviews with staff and inmates, information provided at orientation all provided the auditor with sufficient evidence to support a finding of compliance with the standards.

Standard 115.154: Third-party reporting

115.154 (a)

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

Auditor Overall Compliance Determination

Exceeds Standard (*Substantially exceeds requirement of standards*)

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

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020
- Observations
- Agency webpage

County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020 states, *All allegations and incidents of inmate on inmate, staff on inmate, or inmate on staff sexually abusive behavior, whether reported verbally, in writing, anonymously or by 3rd parties, shall be immediately reported by Sheriff's Office employees, contractors or volunteers to the Facility Shift Supervisor verbally, and followed up with a report to the Superintendent before the end of their shift.*

The agency website, <https://www.dukescountysheriff.com/prea>

Finding of compliance is based on the following: As indicated in the narrative report, information about how to alert the agency/facility is provided on the website to include a phone number and an email address.

OFFICIAL RESPONSE FOLLOWING A DETAINEE REPORT

Standard 115.161: Staff and agency reporting duties

115.161 (a)

- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in an agency lockup? Yes No
- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against detainees or staff who reported such an incident? Yes No
- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation? Yes No

115.161 (b)

- Apart from reporting to designated supervisors or officials, do 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 and investigation decisions? Yes No

115.161 (c)

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

115.161 (d)

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

Auditor Overall Compliance Determination

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

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020
- Observations
- Interviews random staff
- Interview PREA Coordinator
- Inmate Handbook
- Interview with medical and mental health staff
- Interview with the investigator

County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020 states, *All Sheriff's Office employees, contractors and volunteers are to immediately report to the Facility Shift Supervisor any knowledge, suspicion or information regarding an incident of sexual abuse or sexual harassment that occurred either in the Dukes County Correctional Facility or any other facility. Any retaliation against inmates or staff who reported such an incident and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation are also to be reported. All allegations and incidents of inmate on inmate, staff on inmate, or inmate on staff sexually abusive behavior, whether reported verbally, in writing, anonymously or by 3rd parties, shall be immediately reported by Sheriff's Office employees, contractors or volunteers to the Facility Shift Supervisor verbally, and followed up with a report to the Superintendent before the end of their shift. During non-business hours, these allegations shall be reported to the Facility Shift Supervisor and Duty Officer who shall ensure that the Superintendent/Assistant Superintendent is immediately notified. Failure of any Sheriff's Office employee, contractor or volunteer to report these allegations may result in disciplinary action up to and including termination. Staff shall not reveal any information related to a sexual abuse report to anyone other than those involved in the investigation.*

The Superintendent shall notify the Sheriff, and the Assistant Superintendent of any incident of alleged sexually abusive behavior. If the allegations involve a possible violation of state law, the Superintendent shall immediately notify the Sheriff who shall authorize the notification of the District Attorney's Office. The facility shall report all allegations of sexual abuse and sexual harassment including third party and anonymous reports to the facility's designated investigators. At the initiation of services, medical and mental health practitioners shall inform the sexual abuse victim of the practitioner's duty to report, and the limitations of confidentiality.

Interviews with staff revealed that staff are keenly aware of the requirement to report immediately any suspicion, knowledge or information on sexual abuse, sexual harassment, retaliation and/or staff neglect that may contribute to sexual abuse or sexual harassment. The interview with the investigator support that an immediately notification is made.

Policy states, *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 law.* Staff was also keenly aware of the requirement to maintain confidentiality after the allegation is made. The interviews with medical and mental health staff confirmed to the auditor their awareness that they need to report.

If a vulnerable adult was to file an allegation, it was reported to the auditor that it would be referred to the PREA Coordinator for reporting to the proper agency. Policy supports the following: *Appropriate notifications shall be made if the victim is an elderly to include filing a report with the Massachusetts Executive Office of Elder Affairs electronically via their website at: <https://www.mass.gov/how-to/report-elder-abuse> or via their hotline at: (800) 922-2275. If the individual is a person with a disability, a report must be filed with the Massachusetts Disabled Persons Protection Commission via their hotline at: 800-426-9009.*

The Superintendent shall ensure that reports by Sheriff's Office employees, contractors, and volunteers regarding suspicions of sexually abusive behavior or related activities are disseminated to the PREA Investigator and the PREA Manager. Local investigators should follow-up on such reports by interviewing staff and inmates and developing intelligence as appropriate.

Finding of compliance is based on the following: Overall observations of the audit tasks such as the interviews with staff, including medical and mental health, investigators, and randomly selected staff support knowledge of the requirement, process and the need to maintain confidentiality.

Standard 115.162: Agency protection duties

115.162 (a)

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

Auditor Overall Compliance Determination

Exceeds Standard (*Substantially exceeds requirement of standards*)

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

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020
- Observations
- Interviews Sheriff
- Interview Special Sheriff/Superintendent
- Interview Random staff
- PAQ

The PAQ indicates there have been no times the facility determined that an inmate was at risk of imminent sexual abuse. The auditor found no reason to dispute this during the audit process.

County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020 states, *Immediate Response to Sexually Abusive Behavior Complaints or Threats of Imminent Sexual Abuse*

In the event that an inmate reports that they have been sexually abused or they are subject to a substantial risk of imminent sexual abuse by an inmate, employee, and contractor or volunteer, the Sheriff's Office employee, contractor, or volunteer receiving such a complaint shall take the following steps:

Policy, physical plant, camera monitoring and staff interviews support that the facility is prepared and willing to protect any inmate from any risk of harm.

The interview with the Sheriff and the Special Sheriff/Superintendent confirmed that an inmate at imminent risk of sexual abuse or any imminent risk of harm shall have immediate action taken to ensure his safety. All staff interviews confirmed to the auditor that they would take immediate action if they believed an inmate was at imminent risk of sexual abuse. Inmate interviews illustrated to the auditor that staff are approachable. Corrections Officers and supervisors confirmed that this request would be supported, and action would be taken to protect the inmate before the believed event occurred. Based on this and overall observations during the audit, the auditor found this credible and to be an integral part of the culture of this facility.

Standard 115.163: Reporting to other confinement facilities

115.163 (a)

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

115.163 (b)

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

115.163 (c)

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

115.163 (d)

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

Auditor Overall Compliance Determination

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

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020
- Interview with Sheriff
- Interview Special Sheriff/Superintendent
- PAQ

The PAQ indicates that zero allegations were received that inmate was abused while confined at another facility, zero allegations of sexual abuse were received from another facility.

County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020 states, *The Sheriff's Office shall use all available means to fully investigate and address all allegations and incidents of sexually abusive behavior.58*

Following an inmate allegation that a staff member has committed sexual abuse against the inmate, the If an inmate from the Dukes County Jail / House of Correction is housed at another facility and notifies staff that he was sexually abused, the Superintendent who notifies directly to the facility head work with that agency to ensure the investigation is conducted in accordance with the PREA standards. Such notification shall be made as soon as possible but no later than 72 hours after receiving the notification and shall be documented. If the facility received notification from another agency that that alleges an inmate was sexually abused while housed at Dukes County Jail and House of Correction, an investigation will take place immediately.

The interview with the Special Sheriff/Superintendent supported that these notifications would be made by his office within 72 hours of receipt.

The interview with the Special Sheriff/Superintendent confirmed that any receipt of allegations that occurred at his facility will be immediately reported to the investigators for investigation.

Finding of compliance is based on the following: The policy, review of notification forms and interview with the Sheriff and Special Sheriff/Superintendent provided the auditor with sufficient evidence to support a finding of compliance. There is a process in place to ensure the requirements of this standard are met.

Standard 115.164: Staff first responder duties

115.164 (a)

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

115.164 (b)

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

Auditor Overall Compliance Determination

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

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020
- Observations

- Random staff interviews
- Informal interviews with non-security staff
- PREA Lesson Plan
- PAQ

The PAQ indicates there were zero allegations of sexual abuse that allowed for time to collect evidence. The auditor found no reason to dispute this during the audit process.

County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020 states, *The security and safety of all persons, whether Sheriff's Office employees, contractors, volunteers or inmates, is a fundamental objective of the Sheriff's Office. As such, it is an integral part of every employee's job to report and respond to sexually abusive behavior.*

Immediate Response to Sexually Abusive Behavior Complaints or Threats of Imminent Sexual Abuse
In the event that an inmate reports that they have been sexually abused or they are subject to a substantial risk of imminent sexual abuse by an inmate, employee, and contractor or volunteer, the Sheriff's Office employee, contractor, or volunteer receiving such a complaint shall take the following steps:

Immediately separate the victim from the assailant or potential abuser.

Immediately notify the Facility Shift Supervisor.

If the inmate reports they have been sexually abused when no medical or mental health services staff are available, the Shift Supervisor will assign a First Responder Security Staff to respond to the location and also contact the DCSO Communications Center for the Emergency Medical Services to transport to the Martha's Vineyard Hospital for examination and treatment.

Request that the Facility Shift Supervisor secure the scene if warranted, for subsequent crime scene processing.

If the abuse occurred within 5 days which still allows for the collection of physical evidence, request the victim and assure the alleged abuser will be allowed to take any action that could destroy physical evidence including washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking or eating.

Finding of compliance is based on the following: Policy provides specific direction on how to respond to an allegation of abuse to ensure safety of the victim as well as how to preserve evidence. Both first responder staff and non-first responder staff attend training as required in 115.31; these requirements are reinforced at that time. All staff interviews demonstrated knowledge of the process support a finding of compliance. Review of the PREA Lesson plans confirms the reinforcement of these actions.

Standard 115.165: Coordinated response

115.165 (a)

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

115.165 (b)

- If a victim is transferred from the lockup to a jail, prison, or medical facility, does the agency, as permitted by law, inform the receiving facility of the incident unless the victim requests

otherwise? (N/A if the agency is not permitted by law to inform a receiving facility of an incident of sexual abuse, where a victim is transferred from the lockup to a jail, prison, or medical facility as a result of that incident.) Yes No NA

- If a victim is transferred from the lockup to a jail, prison, or medical facility, does the agency, as permitted by law, inform the receiving facility of the victim's potential need for medical or social services unless the victim requests otherwise? (N/A if the agency is not permitted by law to inform a receiving facility of the victim's potential need for medical or social services, where a victim is transferred from the lockup to a jail, prison, or medical facility as a result of an incident of sexual abuse.) Yes No NA

Auditor Overall Compliance Determination

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

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020
- Random staff interviews
- Observations - PREA kit
- Interview Special Sheriff/Superintendent
- Interview with Shift Supervisor
- PREA Incident Report
- PREA Incident checklist
- PREA Incident Medical Checklist
- Superintendent's Incident Checklist
- PAQ

The PAQ indicates that in the past 12 months, no victims were transferred from the lockup to jail, prison or medical facility as a result of an allegation of sexual abuse, no victims were transferred as a result of an allegation of sexual abuse where the agency informed the receiving facility of the incident and the victim's potential need for medical or social services, nor zero victims transferred as a result of an allegation of sexual abuse who requested the agency to inform the receiving facility.

County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020 states, *The security and safety of all persons, whether Sheriff's Office employees, contractors, volunteers or inmates, is a fundamental objective of the Sheriff's Office. As such, it is an integral part of every employee's job to report and respond to sexually abusive behavior. Immediate Response to Sexually Abusive Behavior Complaints or Threats of Imminent Sexual Abuse In the event that an inmate reports that they have been sexually abused or they are subject to a substantial risk of imminent sexual abuse by an inmate, employee, and contractor or volunteer, the Sheriff's Office employee, contractor, or volunteer receiving such a complaint shall take the following steps:*

Immediately separate the victim from the assailant or potential abuser.

Immediately notify the Facility Shift Supervisor.

If the inmate reports they have been sexually abused when no medical or mental health services staff are available, the Shift Supervisor will assign a First Responder Security Staff to respond to the location and also contact the DCSO Communications Center for the Emergency Medical Services to transport to the Martha's Vineyard Hospital for examination and treatment.

Request that the Facility Shift Supervisor secure the scene if warranted, for subsequent crime scene processing.

The Facility Shift Supervisor shall notify the Superintendent and the Assistant Superintendent.

During non-business hours these allegations shall be reported to the Facility Shift Supervisor who shall ensure that the Superintendent/Assistant Superintendent is immediately notified.

Make note of the behavior and appearance of all parties and identify any witnesses to the event.

Ensure that the inmate victim is immediately taken to the facility medical department for emergency medical care/mental health treatment.

If the abuse occurred within 5 days which still allows for the collection of physical evidence, request the victim and assure the alleged abuser will be allowed to take any action that could destroy physical evidence including washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking or eating.

Complete a detailed report in OMS to include documentation of immediate separation of the victim and the assailant by the end of their business day. You must check off the box that indicates "Private" in order to ensure its confidentiality. It is imperative that you do not save the document until you CHECK OFF this box and until the Facility Shift Supervisor reviews the report content.

Upon submission of the Confidential Incident Report to the Superintendent, the Facility Shift Supervisor must e-mail the following staff: Superintendent, Assistant Superintendent to immediately alert them of notification of said incident.

Medical Response to Sexually Abusive Behavior Complaints:

At the initiation of services, medical and mental health practitioners shall inform the sexual abuse victim of the practitioner's duty to report, and the limitations of confidentiality.

*A qualified health care professional shall evaluate the extent of the physical injury and provide medical treatment as needed. Appropriate notifications shall be made if the victim is an elderly to include filing a report with the Massachusetts Executive Office of Elder Affairs electronically via their website at: <https://www.mass.gov/how-to/report-elder-abuse> or via their hotline at: **(800) 922-2275**. **If the individual is a person with a disability, a report must be filed with the Massachusetts Disabled Persons Protection Commission via their hotline at: 800-426-9009.***

An emergency mental health referral to the on-site mental health professional shall be made following the completion of the medical evaluation. Both medical and mental health services shall be consistent with the community level of care.

Upon completion of the medical and mental health evaluation, the Superintendent or their designee in consultation with medical and/or Mental Health personnel shall determine whether a referral to an outside hospital with a rape crisis unit is warranted. Factors to be considered are the time frame between the alleged assault and the complaint, as well as the extent and nature of the allegation.

If the determination is made that the inmate victim should be sent to an outside hospital and if the inmate victim consents, the inmate victim shall be transported to the Martha's Vineyard Hospital and their SANE or TELESANE program where they shall receive essential medical intervention to include preventative treatment for HIV, sexually transmitted diseases and pregnancy if appropriate. If pregnancy results from the described sexually abusive behavior, the victim will receive timely and comprehensive information about and timely access to all lawful pregnancy related medical services. Upon return from the outside hospital, the inmate victim shall be seen by a medical staff member for appropriate follow-up care to include a Mental Health Screening by qualified health care personnel. If

during this screening there are any indications that the inmate victim is at risk to hurt themselves or others, a Mental Health professional shall be immediately notified. Otherwise, the inmate victim shall be seen by a Mental Health professional no later than the next business day to assess the need for crisis intervention and long-term counseling.

To avoid the potential for secondary victimization, an inmate victim may be allowed to refuse rape crisis intervention treatment at an outside hospital. Before the refusal is accepted, the Sheriff's Office's medical and mental health provider shall attempt to persuade the inmate to go to the outside hospital for treatment.

In cases where the inmate victim continues to refuse, the inmate shall be required to sign a Refusal of Medical Treatment Form (attached). Provisions shall be made for testing for sexually transmitted diseases (e.g., HIV, gonorrhea, hepatitis) and pregnancy as well as for prophylactic treatment, follow-up care and counseling pursuant to DCSO Policy for Communicable and Infectious Diseases.

Once cleared by the medical and mental health staff, the ADS of Human Services shall determine an appropriate housing assignment for the inmate victim by the next business day.

A victim advocate will be assigned to meet with the inmate. The advocate will keep the inmate victim informed of the status of the investigation and as appropriate, the disciplinary and criminal prosecution of the alleged perpetrator. The advocate shall make the inmate victim aware of the short and long term services available to them.

Inmate victims of sexual abuse shall be offered referrals for continued care even when the inmate is no longer incarcerated in the facility.

Treatment services including forensic medical exams are offered without financial cost to the victim.

Security Response to Sexually Abusive Behavior Complaints:

If the Sheriff and/or his designee believe that a felony may have been committed, the District Attorney's Office and the Inner perimeter Security Unit shall be notified and the Sheriff's Office shall seek assistance and begin a cooperative investigation with these agencies. In the event the felony is believed to be committed by a staff member, the Sheriff's Office shall seek assistance from the Massachusetts State Police Detective Unit in conjunction with the District Attorney's Office. Criminal investigations shall be documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attached copies of all documentary evidence where feasible.

The Assistant Superintendent shall ensure that all evidence collected at any hospital (Sexual Assault Evidence Collection Kit/Rape Kit) is transported to the State Police Laboratory as soon as possible. All evidence shall be handled in accordance with DCSO Policy 924.06, Searches. Evidence retained in excess of twenty-four (24) hours (weekends/holidays), shall be properly refrigerated in a secure refrigerator.

Any State entity or Department of Justice component that conducts such investigations shall do so pursuant to the requirements of PREA.

When outside agencies investigate sexual abuse, the facility shall cooperate with outside investigators and shall endeavor to remain informed about the progress of the investigation. Any relevant information from the investigative agency shall be used to inform the inmate via the victim advocate liaison.

If an inmate's involvement in the alleged sexually abusive behavior is suspected, they shall be placed in a secure setting pending investigation.

The Superintendent shall ensure that the incident is appropriately documented.

Any potential witnesses shall be interviewed by the PREA investigator in an attempt to corroborate the victim's statements or to identify any suspect(s). Care should be taken to ensure the safety and security of potential witnesses from retribution and retaliation. If necessary and warranted, potential inmate witnesses shall be afforded opportunities for changes in housing placement, more secure housing and/or accelerated classification for transfer.

Classification Response to Sexually Abusive Behavior Complaints:

The Superintendent shall ensure that the Classification Supervisor is notified of sexually abusive behavior complaints. The Classification Supervisor upon such notification shall schedule an Internal Classification Status Review of the inmate predator and/or inmate victim, when sufficient facts are known, in order to determine appropriate classification in accordance with DCSO Policy 942.01-06 Classification.

The interview with the medical and mental health staff supported the following:

- Follow up care will be provided which includes mental health treatment and the use of the victim advocate services if requested or approved by the victim,
- Services would be consistent with community level of care
- A medical summary would be provided to any operation receiving the inmate whether a prison, another jail or community referrals.
- If the victim is female, her stay at the Lockup would be brief, until the bond hearing is held. Pregnancy related services not conducted at the hospital would be addressed at the receiving facility.

The interview with the Superintendent additionally confirmed this.

Finding of compliance is based on the following: Review of the coordinated plan, review of the training curriculum which reinforces the actions of the plan, interview with all staff who are knowledgeable regarding the plan, review of the PREA Incident Report and observations of the PREA kit.

Standard 115.166: Preservation of ability to protect detainees from contact with abusers

115.166 (a)

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

115.166 (b)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

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

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention
- Union contract
- Interview Sheriff
- Interview with a union representative

County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020 states, *The Sheriff's Office shall use all available means to fully investigate and address all allegations and incidents of sexually abusive behavior.*

Staff Accused of Sexually Abusive Behavior with Inmates:

If a staff member is accused of sexually abusive behavior with an inmate, the Superintendent shall initiate an investigation. The staff member may be placed by the Sheriff or Superintendent on a "no inmate contact status" or "suspended with or without pay status" pending an investigation of the matter. Contractors who are accused of sexually abusive behavior may be removed from the facility until the investigation is completed. All volunteers who are accused shall be barred from entering the correctional facility until the investigation is completed.

The auditor reviewed the following document and found no limits to the Sheriff's Office to remove alleged staff abusers - Massachusetts Correction Officers Federated Union. An interview with a union representative indicated that his union has no concern with the need to remove staff from contact pending an investigation.

Finding of compliance is based on the following: Review of policy and review of the union agreements as well as the interview with the Sheriff and union representative support the finding of compliance.

Standard 115.167: Agency protection against retaliation

115.167 (a)

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

115.167 (b)

- Does the agency employ multiple protection measures, such as housing changes or transfers for detainee victims or abusers, removal of alleged staff or detainee abusers from contact with victims, and emotional support services for detainees or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations? Yes No

115.167 (c)

- Except in instances where the agency determines that a report of sexual abuse is unfounded, does the agency: Monitor the conduct and treatment of detainees or staff who have reported sexual abuse? Yes No

- Except in instances where the agency determines that a report of sexual abuse is unfounded, does the agency: Monitor the conduct and treatment of detainees who were reported to have suffered sexual abuse? Yes No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, does the agency: Act promptly to remedy any such retaliation? Yes No

115.167 (d)

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

115.167 (e)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

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

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020
- Interviews Sheriff
- Interview Special Sheriff/Superintendent
- Interview with designated staff members charged with monitoring for retaliation
- Interviews with Inmates who reported a sexual abuse
- PAQ
- Retaliation monitoring form

The PAQ indicates that there were no reported incidents of retaliation occurred. The auditor found no reason to dispute this during the audit process.

County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020 states, *Retaliation:*

The Dukes County Sheriff's Office shall take appropriate measures to protect any individual who cooperates with an investigation and expresses a fear of retaliation.

Retaliation by any employee against another employee, contractor, volunteer or an inmate for reporting complaints of sexually abusive behavior, for assisting in making such a report, or for cooperating in the investigation of such a complaint, regardless of the merits or disposition of the complaint, is prohibited. Any such occurrence is a very serious matter that may result in discipline up to and including termination in accordance with DCSO Policy 914.08, Sexual Harassment, Harassment

For at least 90 days following a report of sexual abuse, Special Operations PREA investigators or their designee shall monitor the conduct and treatment of inmates or staff who reported the sexual abuse. They shall also monitor the conduct and treatment of inmate victims of sexual abuse or sexual harassment to see if there are changes that may suggest possible retaliation by inmates or staff and shall act promptly to remedy any such retaliation. In the case of inmates, such monitoring shall also include status checks weekly for 90 days once it is brought to the attention of the ADS of Human Services. The agency shall continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need. Monitoring obligation terminates if allegation is unfounded. Housing changes or transfers for inmate victims or abusers shall be considered as protective measures for inmates who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations. Other measures that will be considered include the removal of alleged staff or inmate abusers from contact with victims and emotional support services for inmates or staff who may fear retaliation.

Finding of compliance is based on the following: Policy supports the requirements of the standard provisions. Interview with the designated retaliation monitor supported compliance based on her responses to questions, experience at the facility which affords her the ability to be actively involved in most activities involving the inmate as was observations during the onsite audit. Additionally, the auditor observed the communication and teamwork involving the majors and captain who would also participate in retaliation monitoring efforts. The interviews with the Sheriff, Special Sheriff/Superintendent, and PREA Coordinator support that the facility will protect anyone who fears retaliation. The physical plant affords numerous options to change housing, if needed. In an extreme event, they can make arrangements with another county jail to have him placed there.

INVESTIGATIONS

Standard 115.171: Criminal and administrative agency investigations

115.171 (a)

- When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/lockup is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.121(a).) Yes No NA
- Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/lockup is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.121(a).) Yes No NA

115.171 (b)

- Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.134? Yes No

115.171 (c)

- Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data? Yes No

- Do investigators interview alleged victims, suspected perpetrators, and witnesses?
 Yes No
- Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator? Yes No

115.171 (d)

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

115.171 (e)

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

115.171 (f)

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

115.171 (g)

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

115.171 (h)

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

115.171 (i)

- Does the agency retain all written reports referenced in 115.171(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years? Yes No

115.171 (j)

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

115.171 (k)

- Auditor is not required to audit this provision.

115.171 (l)

- When an outside agency investigates sexual abuse, does the agency cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency *never* conducts administrative or criminal sexual abuse investigations. See 115.121(a).) Yes No NA

Auditor Overall Compliance Determination

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

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020
- Observations
- Interviews Investigative staff
- Interview with the Special Sheriff/Superintendent
- Interview with the PREA Coordinator
- PAQ

PAQ indicates no substantiated allegations of conduct that appeared criminal were referred for prosecution since the last PREA audit.

County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020 states, *The Sheriff's Office shall use all available means to fully investigate and address all allegations and incidents of sexually abusive behavior.*

If an inmate makes an allegation that they were sexually abused while confined at another facility, the Sheriff or his/her designee shall notify within 72 hours the head of the facility or appropriate office of the agency where the alleged sexual abuse occurred. This notification shall be documented.

Sexually Abusive Behavior Between Inmates:

Investigations of reported incidents of sexually abusive behavior between inmates shall be initiated by the Superintendent and the Assistant Superintendent. The Assistant Superintendent shall be

responsible for producing an investigative report within seven business days unless the time is extended by the Superintendent.

A report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred, shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.

Following an inmate's allegation that he or she has been sexually abused by another inmate, the agency shall 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; or

The agency learns that the alleged abuser has been convicted on a charge related to sexual Abuse within the facility; and

All such notifications or attempted notifications shall be documented.

Staff Accused of Sexually Abusive Behavior with Inmates:

If a staff member is accused of sexually abusive behavior with an inmate, the Superintendent shall initiate an investigation. The staff member may be placed by the Sheriff or Superintendent on a "no inmate contact status" or "suspended with or without pay status" pending an investigation of the matter. Contractors who are accused of sexually abusive behavior may be removed from the facility until the investigation is completed. All volunteers who are accused shall be barred from entering the correctional facility until the investigation is completed.

Following an inmate allegation that a staff member has committed sexual abuse against the inmate, the ADS of Human Services shall subsequently inform the inmate whenever;

The staff member is no longer posted within the inmates unit;

The staff member is no longer employed at the facility

The agency learns that the staff member has been indicted on a charge related to sexual abuse within the facility; or

The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility; and

All such notifications or attempted notifications shall be documented.

Investigation:

There shall be two or more DCSO investigators trained to conduct investigations in confinement settings. Appropriate non-legal investigators shall include both male and females staff who are trained and familiar with PREA standards. In the event of an outside agency investigation, the facility will cooperate with the investigators and endeavor to remain informed about the progress of the investigation.

After receiving the complaint, the allegation will be investigated promptly in a fair, impartial and expedient manner. The level of evidence required to prove sexual abuse shall be by a preponderance of the evidence. The credibility of an alleged victim, suspect or witness shall be assessed on an individual basis and shall not be determined by the person's status as inmate or staff. No inmate who alleges sexual abuse shall be required to submit to a polygraph examination or other truth telling devices as a condition for proceeding with the investigation of such an allegation.

The investigation will be conducted in such a way as to maintain confidentiality to the extent practicable under the circumstances.

The investigation will include a private interview with the person filing the complaint, the harasser and/or alleged abuser (alleged to have committed sexual harassment, harassment, and/or discrimination) and any witness(es). Prior complaints and reports of sexual abuse involving the suspected perpetrator shall also be reviewed.

When the investigation is completed, the person filing the complaint and the person alleged to have committed the inappropriate conduct shall be informed as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. Notification shall be documented.

Throughout the investigation, as well as at the conclusion of the investigation, the investigator will deliver the report(s) to the Superintendent who will review the investigation and determine what action to take based upon the investigation.

If an inmate from the Dukes County Jail / House of Correction is housed at another facility and is sexually abused, the ADS of Human Services will work with that agency to ensure the investigation is conducted in accordance with the PREA standards. Such notification shall be made as soon as possible but no later than 72 hours after receiving the notification and shall be documented.

The departure of the alleged abuser or victim from the employment or control of the facility shall not provide a basis for terminating an investigation.

In the event the inmate is released from custody, the Sheriff's Office will no longer be under obligation to report to the inmate the status of the allegation.

Investigators shall gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence, and any available electronic monitoring data.

Administrative investigations shall include an effort to determine whether staff actions or failures to act, contributed to the abuse and shall be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments and investigative facts and findings.

CASE RECORDS

All case records associated with claims of abuse, including incident reports, investigative reports, offender information, case disposition, medical and counseling evaluation findings, and recommendations for post-release treatment and/or counseling are retained for 10 years or five years after the length of incarceration, whichever is greater.

All written reports related to administrative and criminal investigations involving staff members are retained for as long as the alleged abuser is employed by the agency, plus five years.

PREA policy, all designated investigators receive training. See 115.34. The interview with the investigator confirmed that any relevant evidence is gathered to include physical, DNA electronic monitoring data and interviews of all parties who may have relevant information. The interview with the investigator confirmed that he assesses credibility on the collaborating evidence. He confirmed that polygraph or truth telling devices are not used. The interview with the investigator confirmed that this would be a part of any investigation. He supported this by reaffirming that he is also the Internal Affairs investigator. He indicated he would continue with the investigation even if the alleged abuser or victim left the facility. This was confirmed in the interview with the investigator. Finally, he indicated he would cooperate with outside investigators and remain informed of the progress, and this has occurred with non PREA investigations. The superintendent reinforced compliance with these provisions as well during his interview.

Finding of compliance is based on the following: As noted above, policy mandates compliance with the requirements of the standard. The interview with the PREA investigators support compliance as well.

Standard 115.172: Evidentiary standard for administrative investigations

115.172 (a)

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

Auditor Overall Compliance Determination

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

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020
- Interviews Investigative staff
- Specialized training curriculum

County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020 states, *The Sheriff's Office shall use all available means to fully investigate and address all allegations and investigations of reported incidents of sexually abusive behavior between inmates shall be initiated by the Superintendent and the Assistant Superintendent. The Assistant Superintendent shall be responsible for producing an investigative report within seven business days unless the time is extended by the Superintendent. The level of evidence required to prove sexual abuse shall be by a preponderance of the evidence.*

The interview with the investigator confirmed this in addition to the curriculum provided to the investigator for conducting sexual abuse allegations in a confinement facility.

Finding of compliance is based on the following: Policy excerpts noted above as well as the interview with the investigators support compliance with this standard.

DISCIPLINE

Standard 115.176: Disciplinary sanctions for staff

115.176 (a)

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

115.176 (b)

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

115.176 (c)

- Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and

circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories? Yes No

115.176 (d)

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

Auditor Overall Compliance Determination

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

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020
- Observations
- PAQ

The PAQ indicates that no staff have been terminated, nor referred to licensing bodies for violating agency sexual abuse and/or sexual harassment policy. The auditor found no reason to dispute this during the audit process.

County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020 states,

DISCIPLINARY

All intentional acts of sexually abusive behavior, sexual harassment, or intimacy between an inmate and a Sheriff's Office employee, contractor or volunteer, regardless of consensual status, are prohibited. The perpetrator shall be subject to administrative and criminal and/or disciplinary sanctions up to and including termination. Inmate on inmate sexually abusive behavior, sexual harassment, or intimacy between inmates are prohibited. The perpetrator shall be subject to administrative, criminal and/or disciplinary sanctions according to inmate discipline practices and policies.

Disciplinary sanctions for violation of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) shall 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.

Termination shall be the presumptive disciplinary sanction for staff who has engaged in sexual abuse. 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, shall be reported to law enforcement

agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies.

Additionally, dialogue with the Special Sheriff/Superintendent, investigators, and PREA Coordinator support that all allegations against staff for sexual abuse, sexual harassment, retaliation or neglect are investigated and disciplinary action would be commensurate with the circumstances up to termination for sexual abuse. Therefore, this standard is deemed compliant.

Standard 115.177: Corrective action for contractors and volunteers

115.177 (a)

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

115.177 (b)

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

Auditor Overall Compliance Determination

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

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020
- Interviews Special Sheriff/Superintendent
- PAQ

The Pre-Audit Questionnaire notes that no contractor or volunteer has been involved in an investigation regarding sexual abuse or sexual harassment towards an inmate. The auditor found no evidence to dispute this statement during the audit process.

County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020 states,

DISCIPLINARY

All intentional acts of sexually abusive behavior, sexual harassment, or intimacy between an inmate and a Sheriff's Office employee, contractor or volunteer, regardless of consensual status, are prohibited. The perpetrator shall be subject to administrative and criminal and/or disciplinary sanctions up to and including termination. Inmate on inmate sexually abusive behavior, sexual harassment, or intimacy between inmates are prohibited. The perpetrator shall be subject to administrative, criminal and/or disciplinary sanctions according to inmate discipline practices and policies. Any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with inmates and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies. The facility shall take appropriate remedial measures, and shall consider whether to prohibit further contact with inmates in the case of any other violation of agency sexual abuse or sexual harassment policies.

Finding of compliance is based on the following: Policy excerpts quoted above meet the requirements of the standard. The PAQ notes that no volunteers or contractors have been terminated for sexual abuse or sexual harassment towards an inmate in the past 12 months. The auditor found no evidence to dispute this during the audit process. Interviews with the Special Sheriff/Superintendent supported that these requirements will be followed.

Standard 115.178: Referrals for prosecution for detainee-on-detainee sexual abuse

115.178 (a)

- When there is probable cause to believe that a detainee sexually abused another detainee in a lockup, does the agency refer the matter to the appropriate prosecuting authority?
 Yes No

115.178 (b)

- If the agency itself is not responsible for investigating allegations of sexual abuse, does the agency inform the investigating entity of this policy? (N/A if the agency/facility is responsible for conducting both administrative and criminal investigations of sexual abuse. See 115.121(a).)
 Yes No NA

115.178 (c)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

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

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020
- PAQ
- Massachusetts State Police Website
- Interview with the special sheriff/Superintendent

The PAQ indicates that in the last 12 months, there were zero allegations where there was probable cause to believe that a detainee sexually abused another detainee in the facility and zero allegations above that were referred to the appropriate prosecuting authority.

County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020 states, *Investigations of reported incidents of sexually abusive behavior between inmates shall be initiated by the Superintendent and the Assistant Superintendent. The Assistant Superintendent shall be responsible for producing an investigative report within seven business days unless the time is extended by the Superintendent.*

Staff Accused of Sexually Abusive Behavior with Inmates:

If a staff member is accused of sexually abusive behavior with an inmate, the Superintendent shall initiate an investigation.

The facility shall report all allegations of sexual abuse and sexual harassment including third party and anonymous reports to the facility's designated investigators. Throughout the investigation, as well as at the conclusion of the investigation, the investigator will deliver the report(s) to the Superintendent who will review the investigation and determine what action to take based upon the investigation.

If the Sheriff and/or his designee believe that a felony may have been committed, the District Attorney's Office and the Inner perimeter Security Unit shall be notified and the Sheriff's Office shall seek assistance and begin a cooperative investigation with these agencies. In the event the felony is believed to be committed by a staff member, the Sheriff's Office shall seek assistance from the Massachusetts State Police Detective Unit in conjunction with the District Attorney's Office. Criminal investigations shall be documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attached copies of all documentary evidence where feasible.

The Assistant Superintendent shall ensure that all evidence collected at any hospital (Sexual Assault Evidence Collection Kit/Rape Kit) is transported to the State Police Laboratory as soon as possible. All evidence shall be handled in accordance with DCSO Policy 924.06, Searches. Evidence retained in excess of twenty-four (24) hours (weekends/holidays), shall be properly refrigerated in a secure refrigerator.

The Massachusetts State Police website states, The Massachusetts State Police (MSP) has a zero-tolerance policy toward sexual abuse and sexual harassment of any kind towards any detainee while in State Police custody. All detainees have equal rights to safety, dignity, and justice and have the right to be free from sexual abuse and sexual harassment. Lock up facilities under their supervision have been certified compliant with PREA which further reinforces compliance with the standard. If not investigated at the facility, it would be referred to the Massachusetts State Police. The interview with the Special Sheriff/Superintendent, and policy confirm that investigations would be referred to them.

The auditor finds the facility compliant based on the evidence illustrated above. Policy supports the requirements of the provisions. The Massachusetts State Police supports the requirements of PREA and staff interviews confirmed understanding and commitment to prosecution of sexual abuse against a detainee.

MEDICAL AND MENTAL CARE

Standard 115.182: Access to emergency medical and mental health services

115.182 (a)

- Do detainee victims of sexual abuse in lockups receive timely, unimpeded access to emergency medical treatment? Yes No

115.182 (b)

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

Auditor Overall Compliance Determination

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

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020
- Interviews medical and mental health staff
- Facility Coordinated Response Plan

County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020 states, *If the inmate reports they have been sexually abused when no medical or mental health services staff are available, the Shift Supervisor will assign a First Responder Security Staff to respond to the location and also contact the DCSO Communications Center for the Emergency Medical Services to transport to the Martha's Vineyard Hospital for examination and treatment.*

Medical Response to Sexually Abusive Behavior Complaints:

A qualified health care professional shall evaluate the extent of the physical injury and provide medical treatment as needed. Appropriate notifications shall be made if the victim is an elderly to include filing a report with the Massachusetts Executive Office of Elder Affairs electronically via their website at: <https://www.mass.gov/how-to/report-elder-abuse> or via their hotline at: (800) 922-2275. If the individual is a person with a disability, a report must be filed with the Massachusetts Disabled Persons Protection Commission via their hotline at: 800-426-9009.

An emergency mental health referral to the on-site mental health professional shall be made following the completion of the medical evaluation. Both medical and mental health services shall be consistent with the community level of care.

Upon completion of the medical and mental health evaluation, the Superintendent or their designee in consultation with medical and/or Mental Health personnel shall determine whether a referral to an outside hospital with a rape crisis unit is warranted. Factors to be considered are the time frame between the alleged assault and the complaint, as well as the extent and nature of the allegation. If the determination is made that the inmate victim should be sent to an outside hospital and if the inmate victim consents, the inmate victim shall be transported to the Martha's Vineyard Hospital and their SANE or TELESANE program where they shall receive essential medical intervention to include preventative treatment for HIV, sexually transmitted diseases and pregnancy if appropriate. If pregnancy results from the described sexually abusive behavior, the victim will receive timely and comprehensive information about and timely access to all lawful pregnancy related medical services. Upon return from the outside hospital, the inmate victim shall be seen by a medical staff member for appropriate follow-up care to include a Mental Health Screening by qualified health care personnel. If during this screening there are any indications that the inmate victim is at risk to hurt themselves or others, a Mental Health professional shall be immediately notified. Otherwise, the inmate victim shall be seen by a Mental Health professional no later than the next business day to assess the need for crisis intervention and long-term counseling.

To avoid the potential for secondary victimization, an inmate victim may be allowed to refuse rape crisis intervention treatment at an outside hospital. Before the refusal is accepted, the Sheriff's Office's medical and mental health provider shall attempt to persuade the inmate to go to the outside hospital for treatment.

In cases where the inmate victim continues to refuse, the inmate shall be required to sign a Refusal of Medical Treatment Form (attached). Provisions shall be made for testing for sexually transmitted diseases (e.g., HIV, gonorrhea, hepatitis) and pregnancy as well as for prophylactic treatment, follow-up care and counseling pursuant to DCSO Policy for Communicable and Infectious Diseases.

Once cleared by the medical and mental health staff, the ADS of Human Services shall determine an appropriate housing assignment for the inmate victim by the next business day.

A victim advocate will be assigned to meet with the inmate. The advocate will keep the inmate victim informed of the status of the investigation and as appropriate, the disciplinary and criminal prosecution of the alleged perpetrator. The advocate shall make the inmate victim aware of the short and long term services available to them.

Inmate victims of sexual abuse shall be offered referrals for continued care even when the inmate is no longer incarcerated in the facility. Treatment services including forensic medical exams are offered without financial cost to the victim.

The interview with the medical RN confirmed that this would occur. Medical staff are available Monday through Friday eight hours a day. The Coordinated Response Plan addresses how security staff are to respond then medical staff is not available.

Policy states that prophylactic treatment and follow-up care for sexually transmitted or other communicable disease are offered to all victims, as appropriate including emergency contraception.

There was no reported incident that warranted post sexual abuse treatment in the previous 12 months as reported by the facility. The auditor found this information credible. The interview with the Deputy Special Sheriff/Superintendent over Health Services confirmed the requirements would be met.

Finding of compliance is based on the following: Policy excerpts noted above support a finding of compliance. Interviews supported that the provision requirements would be met.

DATA COLLECTION AND REVIEW

Standard 115.186: Sexual abuse incident reviews

115.186 (a)

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

115.186 (b)

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

115.186 (c)

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

115.186 (d)

- Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse? Yes No
- Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the lockup? Yes No
- Does the review team: Examine the area in the lockup where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse? Yes No
- Does the review team: Assess the adequacy of staffing levels in that area during different shifts? Yes No
- Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff? Yes No
- Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.186(d)(1) - (d)(5), and any recommendations for improvement and submit such report to the lockup head and agency PREA coordinator? Yes No

115.186 (e)

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

Auditor Overall Compliance Determination

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

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020
- Sexual Abuse Incident Reviews form
- Interview with members of the Sexual Abuse Incident Review Team
- Interview with the Special Sheriff/Superintendent

County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020 states, **CRITICAL INCIDENT REVIEW BOARD**

A sexual abuse incident review shall be conducted 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. This review shall ordinarily occur within 30 days of the conclusion of the investigation.

The review team shall include upper-level management officials with input from line supervisors, investigators and medical or mental health practitioners.

The review team shall:

Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse;

Consider whether the incident or allegation was motivated by race, ethnicity, sexual gender, identity biases, status or perceived status or gang affiliation; or was motivated/otherwise caused by other group dynamics at the facility.

Examine the area in the facility where the alleged incident occurred to assess whether physical barriers in the area of the alleged incident occurred may have enabled abuse,

Assess the adequacy of staffing levels in that area during different shifts;

Assess whether monitoring technology should be deployed or improved to assist staff supervision;

Prepare a report of its findings not necessarily limited to determinations made with above considerations and any recommendations for improvement. The report will be submitted to the Superintendent and PREA Compliance Manager.

The facility shall implement the recommendations for improvement, or shall document its reason for not doing so.

Interviews with the PREA Coordinator, lead member of the team, confirmed to the auditor that each team is selected based on the details of the investigation. At a minimum it would include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners. A form has been developed that would capture and document the findings of all areas assessed as required by the provisions, and include the appropriate team members.

Finding of compliance is based on the following: Policy excerpts noted above support the requirements of the standard. The interview with the lead of the Sexual Abuse Incident Team and the form developed provided the auditor with sufficient evidence to support a finding of compliance.

Standard 115.187: Data collection

115.187 (a)

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

115.187 (b)

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

115.187 (c)

- Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Local Jail Jurisdictions Survey of Sexual Violence conducted by the Department of Justice, or any subsequent form developed by the Department of Justice and designated for lockups? Yes No

115.187 (d)

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

115.187 (e)

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

115.187 (f)

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

Auditor Overall Compliance Determination

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

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020
- Annual Report 2020

County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020 states, *DATA COLLECTION and ANALYSIS*

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The PREA Compliance Manager shall collect accurate, uniform data from every allegation of sexual abuse and will review aggregated data on these allegations at least annually in order to assess the effectiveness of policies, procedures and training in combating sexual abuse, including:

Identification of problem areas

Taking corrective action on an ongoing basis

Preparing an annual report of its findings and corrective action for the facility as well as the agency as a whole.

The annual report shall include:

- *comparison of current years data and prior years and shall provide an assessment of the agency's progress in addressing sexual abuse*
- *a review and approval by signature from the Sheriff or his/her designee*

safety and security of the facility shall be maintained through redaction of specific sensitive material, although the nature of the material shall be evident in the report.

Other sources may be queried to develop intelligence information which may become useful to prevent sexually abusive behavior. These may include but not be limited to inmate correspondence (not to include legal mail or correspondence between inmates and confidential support sources), inmate grievances and institution climate reports.

County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020

Has the following definitions:

Allegation: Any event that has been reported to a Sheriff's Office staff person, contractor or volunteer, but which not yet has been verified or investigated.

At Risk: Inmates who exhibit characteristics consistent with potential victims or perpetrators of sexually abusive behavior.

Contractor: A person who provides services on a recurring basis, who has a contractual agreement with the agency.

Critical Incident Review Board: A multi-disciplinary panel of senior managers who routinely meet to review major incidents that occur inside the DCHOC/Jail and the Sheriff's Office.

Employee: Any staff member that works directly for the DCSO at the Jail/ House of Correction.

Exigent Circumstances: Any emergency situation requiring immediate action to protect inmate and staff safety.

Gender Expression: A person's outward expression of his/her gender identity including appearance, dress, mannerisms, speech and social interactions.

Gender Identity: A person's internal, deeply felt sense of being male/female, regardless of the person's sex at birth.

Gender Nonconforming: A person whose gender identity and/or expression do not conform to gender stereotypes generally associated with his or her biological sex.

Inmate: A person incarcerated or detained at the Dukes County Sheriff's Office.

Intersex: A condition usually present at birth that involves reproductive, genetic, or sexual anatomy that does not seem to fit the typical definitions of male and female.

Intimacy: Any behavior not defined as sexual contact or sexual abuse of an inmate including kissing, touching parts of the body or any other related acts including, but not limited to, sending and/or receiving letters/cards/gifts or receiving phone calls from an inmate that are not defined under sexual abuse. Intimate relationships between staff and inmates are expressly prohibited.

LGBTI Population: Acronym for lesbian, gay, bi-sexual, transgender and intersex inmates.

Massachusetts Staff Sexual Misconduct Law: MGL c 268 § 21A – This law removes the ability of an inmate in any correctional institution to consent to engage in sexual relations with any Sheriff's Office employee, contractor or volunteer. Violation of this statute is a felony with a term of imprisonment of up to five years or a fine of up to \$10,000.00. Violation of this law constitutes rape and/or sexual assault.

Offender Fraternalization: Prohibited activities with offenders and ex-offenders. Engaging in any non-professional association, contact, or personal relationship with offenders, ex-offenders, or members of their families, which compromises the employee's ability to effectively discharge their professional duties. Exceptions include family members and previously established relationships.

Physical Assault: Any action taken by an employee, staff member or inmate which is deemed as causing injury or potential injury to another individual. Any deliberate contact, either physical via an object or through bodily fluids, perpetrated by one individual toward another.

PREA: Prison Rape Elimination Act: Federal legislation (Public Law No. 108-79), enacted in 2003 to provide for the analysis of the incidence and effects of prison rape in federal, state and local institutions and to provide information, resources, recommendations and funding to protect individuals from prison rape.

PREA COORDINATOR: A person assigned/appointed by the Sheriff who coordinates the DCSO's compliance with the Department of Justice's (DOJ) Rule on the National Standards to Prevent, Detect and Respond to Prison Rape pursuant to the Prison Rape Elimination Act of 2003 (PREA).

PREA Task Force: A committee appointed by the Sheriff to provide ongoing advice and counsel.

Rape: The penetration, no matter how slight of the vagina or anus with any body part or object, or oral penetration by a sex organ of another person, without the consent of the victim.

SANE (Sexual Assault Nurse Examiner) Program: Delivers coordinated expert forensic and medical care necessary to increase successful prosecution of sex offenders and to assure essential medical intervention to victims of assault who are examined at a SANE designated emergency hospital.

Sexual Abuse: Shall include but not be limited to the subjecting of another person who is incapable of giving consent by reason of their custodial status to sexual contact by persuasion, coercion, inducement, enticement or forcible compulsion.

Sexual Contact: Shall include but not be limited to carnal knowledge, sodomy, sexual assault with an object or sexual fondling or molestation of a person. It does not matter whether or not it is against their will, rape, or otherwise sexually exploiting another person, e.g. compelling them to perform acts of prostitution.

Sexually Abusive Behavior: The term used in this policy to describe all prohibited sexual behavior.

Sexually abusive behavior includes acts of intimacy, sexual contact, sexual abuse and staff sexual misconduct as defined in this policy. However, an activity that is not coerced shall not be deemed to constitute sexual abuse. Non-coercive sexual behavior falls under sexual contact.

Sexual Assault Investigator: Sheriff's Office employee assigned by the Superintendent and/or Assistant Superintendent to investigate allegations of sexually abusive behavior.

Staff: All employees of the Dukes County Sheriff's Office.

Staff Sexual Misconduct: Any verbal, physical or offensive conduct of a sexual nature by a Sheriff's Office employee, contractor or volunteer directed toward an inmate under the care, custody and supervision of the Sheriff's Office. Prohibited sexual acts include but are not limited to an attempt, threat, request or the completed act of the intentional act of touching of the genitalia, anus, groin,

breast, inner thigh, or buttocks, either directly or through clothing, with the intent to abuse, arouse, or gratify sexual desire or occurrences of indecent exposure, invasion of privacy or staff voyeurism for sexual gratification. Sexual advances, requests for sexual favors or other verbal, physical or offensive conduct of a sexual nature are also expressly prohibited. Examples of sexual harassment include but are not limited to demeaning references to an inmate's gender, derogatory comments about an inmate's body or clothing, jokes about sex or gender specific traits, abusive, threatening, profane or degrading sexual comments, touching, attention or conduct of a sexual nature or threats of retaliation for refusing sexual advances. All sexual contact between an inmate and employee, contractor or volunteer is considered sexual misconduct even if the inmate seemingly "consents" because inmates are deemed incapable of "consent".

Standard of Proof: The level of evidence required to substantiate an allegation of sexual abuse in an administrative setting shall be by a preponderance of the evidence. This is defined as it is more likely to have occurred than not.

Gender Non-conforming: A term describing a person whose gender identity does not conform to the person's sex assigned at birth.

Victim Advocate: The staff member(s) assigned by the Superintendent to meet with inmates victimized by sexually abusive behavior in order to educate them as to the treatment services available to them and to inform them as to the status of the investigation, disciplinary and classification processes pertaining to the alleged claim of sexually abusive behavior. Training and vetting of victim advocates will be conducted by the RPEA Task Force.

Volunteer: A person who donates time and effort on a recurring basis to enhance the activities and programs of the DCSO.

DCSO does not contract with private entities for the confinement of inmates

The interview with the PREA Coordinator confirmed that he did not receive a request for the Survey on Sexual Victimization. Definitions and retention of all data ensures that he is able to complete the request if and when received. He confirmed, as indicated in policy, the facility maintains data consistent with the definitions established by the United States Department of Justice, Bureau of Justice Statistics (USDOJ/BJS), reporting requirements.

Finding of compliance is based on the following: Policy excerpts noted above and the interview with the PREA Coordinator support a finding of compliance. The annual report is located on the website. As this is the facility's first PREA audit, it only includes one year's worth of data. Definitions used in the policy would ensure that if and when requested, the agency would be able to complete the Survey of Sexual Victimization. Per the PREA Coordinator, they have not been asked to complete the survey. The agency does not contract with private facilities.

Standard 115.188: Data review for corrective action

115.188 (a)

- Does the agency review data collected and aggregated pursuant to § 115.187 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas? Yes No
- Does the agency review data collected and aggregated pursuant to § 115.187 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response

policies, practices, and training, including by: Taking corrective action on an ongoing basis?
 Yes No

- Does the agency review data collected and aggregated pursuant to § 115.187 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 lockup, as well as the agency as a whole? Yes No

115.188 (b)

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

115.188 (c)

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

115.188 (d)

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

Exceeds Standard (*Substantially exceeds requirement of standards*)

Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

Does Not Meet Standard (*Requires Corrective Action*)

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020
- Observations
- Interview with the Sheriff
- Interview PREA Coordinator
- Link to website
- Annual Report on Sexual Victimization 2020

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consistent with those found in the PREA policy and disciplinary charges found in DCSO Policy 943.01 Inmate Rules and Discipline.

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safety and security of the facility shall be maintained through redaction of specific sensitive material, although the nature of the material shall be evident in the report.

The interview with the Superintendent confirmed that incident based sexual abuse data is used to assess and improve prevention, detection and response policies. He confirmed that he does approve the reports.

Finding of compliance is based on the following: Policy, interview and review of the annual report demonstrates sufficient evidence to support a finding of compliance as this is the first PREA audit. An annual report was completed after the onsite audit that included the following: (1) Identifying problem areas; (2) Taking corrective action on an ongoing basis; and a comparison of the current year's data and corrective actions with those from prior years and shall provide an assessment of the agency's progress in addressing sexual abuse. The report was approved by the Special Sheriff/Superintendent.

Standard 115.189: Data storage, publication, and destruction

115.189 (a)

- Does the agency ensure that data collected pursuant to § 115.187 are securely retained?
 Yes No

115.189 (b)

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

115.189 (c)

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

115.189 (d)

- Does the agency maintain sexual abuse data collected pursuant to § 115.187 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise? Yes No

Auditor Overall Compliance Determination

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

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020
- Interviews PREA Coordinator
- Interview with the investigator
- Annual Report 2020

County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020 states, **DATA COLLECTION and ANALYSIS**

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CASE RECORDS

All case records associated with claims of abuse, including incident reports, investigative reports, offender information, case disposition, medical and counseling evaluation findings, and recommendations for post-release treatment and/or counseling are retained for 10 years or five years after the length of incarceration, whichever is greater.

Policy supports that data is collected and securely retained. During the audit, the auditor observed the PREA Coordinator's office which affords for data to be maintained securely. Additionally, the interview with the PREA Coordinator and other leadership (the investigator) securely maintain records. The auditor was provided the Annual report for 2020. It does provide statistics. This is the first PREA audit so there is no data available for comparison. At this point the data is available as a public document and would be provided upon request. As the agency has a website, statistics for 2020 were provided.

No personal identifiers were in the report; there was no need for redaction. Policy supports that records are to be maintained for at least ten years.

Policy supports the requirements of the standards. The interview with the PREA Coordinator supports that data is securely maintained and will be maintained for the required 10 years. Based on the above, the auditor finds this standard to be in compliance.

AUDITING AND CORRECTIVE ACTION

Standard 115.401: Frequency and scope of audits

115.401 (a)

- 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 No

115.401 (b)

- Is this the first year of the current audit cycle? (*Note: a "no" response does not impact overall compliance with this standard.*) Yes No
- 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.) Yes No 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.) Yes No NA

115.401 (h)

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

115.401 (i)

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

115.401 (m)

- Was the auditor permitted to conduct private interviews with detainees? Yes No

115.401 (n)

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

Auditor Overall Compliance Determination

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

This was the first PREA audit conducted at this facility. As noted in the narrative and throughout the report, the auditor was allowed to receive confidential correspondence, however none was received. The auditor confirmed with inmates during interviews that they saw the posters announcing the audit; the auditor observed the posters during the onsite audit. Documents requested were received and used to support compliance with the standard provisions. The auditor was able to tour and observe all areas of the facility, including observation of a Regional Lockup intake, and secure areas to observe video monitoring.

Standard 115.403: Audit contents and findings

115.403 (f)

- The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AGENCY 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 that there has never been a Final Audit Report issued.) Yes No NA

Auditor Overall Compliance Determination

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

This is the first PREA audit conducted for this agency.

AUDITOR CERTIFICATION

I certify that:

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

Amy J. Fairbanks

February 26, 2022

Auditor Signature

Date