

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

Interim       Final

Date of Interim Audit Report: 12/17/2021

Date of Final Audit Report: 2/26/2022

## Auditor Information

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City, State, Zip: Lansing, MI 48910

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Date of Facility 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/jail-house-of-corrections>

## Agency Special Sheriff/Superintendent Executive Officer

Name: Robert W. Ogden, Sheriff

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

## Facility Information

**Name of Facility:** Dukes County Sheriff's Office Jail and House of Corrections

**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 Facility Is:**

Military

Private for Profit

Private not for Profit

Municipal

County

State

Federal

**Facility Type:**

Prison

Jail

**Facility Website with PREA Information:** <https://www.dukescountysheriff.com/jail-house-of-corrections>

**Has the facility been accredited within the past 3 years?**  Yes  No

**If the facility has been accredited within the past 3 years, select the accrediting organization(s) – select all that apply (N/A if the facility 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 facility has completed any internal or external audits other than those that resulted in accreditation, please describe:**  
Massachusetts DOC conducts audits twice yearly.

### Warden/Jail Administrator/Sheriff/Director

**Name:** Robert W. Ogden, Sheriff

**Email:** rogden@dcsoma.org

**Telephone:** (508) 338-7580

### Facility PREA Compliance Manager

**Name:** Kayla Pachico

**Email:** kpachico@dcsoma.org

**Telephone:** (774) 549-6093

### Facility Health Service Administrator N/A

**Name:** Amanda Cimeno

**Email:** acimeno@dcsoma.org

**Telephone:** (774) 549-6083

### Facility Characteristics

**Designated Facility Capacity:**

30

**Current Population of Facility:**

10

**Average daily population for the past 12 months:**

7

Has the facility 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 facility hold?	<input type="checkbox"/> Females <input checked="" type="checkbox"/> Males <input type="checkbox"/> Both Females and Males
Age range of population:	23-58
Average length of stay or time under supervision:	365 days
Facility security levels/inmate custody levels:	Minimum/medium/maximum
Number of inmates admitted to facility during the past 12 months:	37
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for 72 hours or more:	4
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for 30 days or more:	7
Does the facility hold youthful inmates?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Number of youthful inmates held in the facility during the past 12 months: (N/A if the facility never holds youthful inmates)	Click or tap here to enter text. <input checked="" type="checkbox"/> N/A
Does the audited facility hold inmates 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 type="checkbox"/> Yes <input type="checkbox"/> No
Select all other agencies for which the audited facility holds inmates: Select all that apply (N/A if the audited facility does not hold inmates 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 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 checked="" type="checkbox"/> N/A
Number of staff currently employed by the facility who may have contact with inmates:	22
Number of staff hired by the facility during the past 12 months who may have contact with inmates:	3
Number of contracts in the past 12 months for services with contractors who may have contact with inmates:	1
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	3
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	5
<b>Physical Plant</b>	

<p><b>Number of buildings:</b></p> <p>Auditors should count all buildings that are part of the facility, whether inmates 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 inmates, 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><b>Number of inmate housing units:</b></p> <p>Enter 0 if the facility does not have discrete housing units. 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 inmates 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 inmates 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>	5
<p><b>Number of single cell housing units:</b></p>	0
<p><b>Number of multiple occupancy cell housing units:</b></p>	3
<p><b>Number of open bay/dorm housing units:</b></p>	1
<p><b>Number of segregation cells (for example, administrative, disciplinary, protective custody, etc.):</b></p>	4
<p><b>In housing units, does the facility maintain sight and sound separation between youthful inmates and adult inmates? (N/A if the facility never holds youthful inmates)</b></p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
<p><b>Does the facility have a video monitoring system, electronic surveillance system, or other monitoring technology (e.g. cameras, etc.)?</b></p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<p><b>Has the facility installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology in the past 12 months?</b></p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<p><b>Medical and Mental Health Services and Forensic Medical Exams</b></p>	
<p><b>Are medical services provided on-site?</b></p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<p><b>Are mental health services provided on-site?</b></p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<p><b>Where are sexual assault forensic medical exams provided? Select all that apply.</b></p>	<input type="checkbox"/> On-site <input checked="" type="checkbox"/> Local hospital/clinic <input type="checkbox"/> Rape Crisis Center

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

**Investigations**

**Criminal Investigations**

**Number of investigators employed by the agency and/or facility who are responsible for conducting CRIMINAL investigations into allegations of sexual abuse or sexual harassment:**

1

**When the facility received allegations of sexual abuse or sexual harassment (whether staff-on-inmate or inmate-on-inmate), CRIMINAL INVESTIGATIONS are conducted by: Select all that apply.**

- Facility investigators
- Agency investigators
- An external investigative entity

**Select all external entities responsible for CRIMINAL INVESTIGATIONS: Select all that apply (N/A if no external entities are responsible for criminal investigations)**

- Local police department
- Local sheriff's department
- State police
- A U.S. Department of Justice component
- Other (please name or describe: [Click or tap here to enter text.](#))
- N/A

**Administrative Investigations**

**Number of investigators employed by the agency and/or facility who are responsible for conducting ADMINISTRATIVE investigations into allegations of sexual abuse or sexual harassment?**

1

**When the facility receives allegations of sexual abuse or sexual harassment (whether staff-on-inmate or inmate-on-inmate), ADMINISTRATIVE INVESTIGATIONS are conducted by: Select all that apply**

- Facility investigators
- Agency investigators
- An external investigative entity

**Select all external entities responsible for ADMINISTRATIVE INVESTIGATIONS: Select all that apply (N/A if no external entities are responsible for administrative investigations)**

- Local police department
- Local sheriff's department
- State police
- A U.S. Department of Justice component
- Other (please name or describe: [Click or tap here to enter text.](#))
- N/A

# Audit Findings

## Audit Narrative

On November 4 & 5, 2021, an audit was conducted at the Dukes County Sherriff's Office Jail and House of Corrections to determine compliance with the Prison Rape Elimination Act standards finalized August 2012. An audit was simultaneously conducted at the Lockup 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.* Additionally, it describes what is considered zero tolerance, sexual abuse and sexual harassment. It provides information on how to contact the facility to make a report if the public becomes aware of any related concerns, to include a phone number and email of the PREA Coordinator. PREA Data, the PREA Policy and information on how to call CONNECT to end Violence (Rape Crisis Center) are provided.

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 additional documentation. Rosters of staff and inmates were provided; a plan for random and targeted interviews was developed. Interviews were arranged to be conducted in a private setting.

### 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, inmate living areas including specialized housing, medical operations, recreation areas (indoors and outdoors), education/programming areas, food service area, visiting room, laundry and intake processing. All areas of the facility were visited that have inmate 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.

### Inmate Interviews

A review of inmate records was conducted with the assistance of the PREA Coordinator to identify inmates as required by the Auditor Handbook. A total of ten inmates were selected to be interviewed; this represented all inmates housed in the facility at the time of the audit. None declined to be interviewed. No youthful offenders are housed at this facility. No inmate was identified as having been placed in segregation for high risk of sexual victimization. No inmates were legally blind or hard of hearing. The auditor interviewed at least one inmate from each housing unit. Additionally, the auditor requested to interview the oldest inmate, youngest inmate, inmate housed at this facility the longest, and the inmate newest to arrive to the facility. Targeted inmate interviews represented the following:

- One inmate with limited English (google translator used)
- One inmate who self-reported as having prior victimization
- One inmate with cognitive challenges

Inmate 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. 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 changed 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. Documentation/evidence was provided demonstrating compliance with the provisions of the standard. A final report was issued.

## **Facility 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 Jail and House of Corrections has one building which provides inmate housing, food service, medical area, day rooms, programming area. There are three levels, the administration area is located on the third level, providing one large office for security supervision. On the second level is the medical operation, program/education office and additional offices for administrative staff.

The perimeter consists of the facilities' physical structure, a recreation yard (outdoor) and a vehicle trap for the booking/intake area. Inmate housing consists of three units located on the first and second levels: single cells and double cells. Toilets and sinks are in each cell; there is a shower area with curtains. There is a modular addition that contains dormitory housing, dayroom, bathroom, canteen storage, visiting area and the control center. A second modular attachment is used to house newly committed inmates for quarantine prior to admittance into general population (multiple occupancy design). The multiple occupancy area was vacant at the time of the audit. The multiple occupancy area had one main common bathroom and shower; both areas were constructed/modified to provide appropriate privacy yet maintain the ability for staff to ensure safety. Laundry facilities are available in the common area for inmate use. The Lockup has an administrative housing area available for use by the Jail and House of Corrections which 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 30 inmates being held awaiting trial for sentenced to serve time up to 2 ½ years. Count on the day of the audit was 10. No inmates under the age of 18 yrs. old are held at this facility. The facility reported that one inmate was considered vulnerable, three were known aggressors, and one was deemed a potential aggressor on the day of the audit.



Programming opportunities include classes focused on education, vocation, addiction, anger management and self-help, among others. The Human Services Division works with each inmate to develop a comprehensive individual therapeutic care plan including creating and addressing educational goals, medical, dental, and mental health needs and concerns and more and coordinates with local service professionals and community volunteers who support this programming with their services.

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. Medical care includes physicals, acute care, sick calls, dental care, eye care and access to mental health treatment.

Corrections officers provide supervision through frequent rounds and video monitoring. 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: 45

### Standards Not Met

Number of Standards Not Met: 0

List of Standards Not Met:

## PREVENTION PLANNING

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

#### 115.11 (a)

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

#### 115.11 (b)

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

### 115.11 (c)

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

#### Auditor Overall Compliance Determination

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

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
- 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

#### Retaliation

#### Disciplinary

#### Case Records

#### Grievances

#### Incident Reviews

It provides procedures on how this is to be accomplished.

The policy directs investigation of complaints

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 define the PREA Coordinator as follows: *A person assigned/appointed by the Sheriff who coordinates the DCSSO'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 educational, 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 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 115.12: Contracting with other entities for the confinement of inmates**

### **115.12 (a)**

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

### **115.12 (b)**

- Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards?

(N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)  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 form 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 115.13: Supervision and monitoring

### 115.13 (a)

- Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?  Yes  No
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?  Yes  No
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?  Yes  No
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?  Yes  No
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?  Yes  No
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?  Yes  No
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?  Yes  No
- In calculating adequate staffing levels and determining the need for video monitoring, does the

staffing plan take into consideration: The number and placement of supervisory staff?  Yes  
 No

- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?  Yes  No  NA
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any applicable State or local laws, regulations, or standards?  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

#### 115.13 (b)

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

#### 115.13 (c)

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

#### 115.13 (d)

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

### Auditor Overall Compliance Determination

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

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
- 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 three top 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 6<sup>th</sup> 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 this a staffing plan review is conducted. Review of the staffing plan confirmed that video monitoring, number and placement of supervisors, prevalence of substantiated and unsubstantiated incidents of sexual abuse, and resources are reviewed annually. No changes were implemented, the auditor supports that the analysis was credible to conclude this.

County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020 states that Command Staff, Captains, lieutenants and/or Sergeants shall make unannounced rounds to identify and deter sexual misconduct and sexual abuse. They will occur on all three shifts. Staff will not alert staff of such unannounced rounds. The rounds will be documented in the electronic inmate manager system after they have been conducted. Rounds are monitored through use of an electronic rounding system. Unannounced rounds are recorded in the comment area. Additionally, the auditor observed the rounds being conducted during the onsite audit.

Interviews with two supervisors, including the night shift, and all correctional officers confirmed that unannounced rounds are occurring, no one is alerting staff when the supervisor is making these rounds, and the supervisors use different times and different directions to conduct these rounds.

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 115.14: Youthful inmates

### 115.14 (a)

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

### 115.14 (b)

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

### 115.14 (c)

- Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates [inmates <18 years old].)  Yes  No  NA

- Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates [inmates <18 years old].)  Yes  No  NA
- Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates [inmates <18 years old].)  Yes  No  NA

### Auditor Overall Compliance Determination

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

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

- Interviews with the Superintendent/Special Sheriff
- Interview with medical staff
- Part I, Title XVII, Chapter 119 and Section 58

Part I, Title XVII, Chapter 119 and Section 58 effective September 2013 requires offenders under the age of 18 to be confined to the Department of Youth Services, this is referred to as the Raise the Age Bill. During the audit, neither auditor saw nor heard anything to dispute that no youths are housed at this facility. The auditor requested to interview the youngest inmate. He indicated he was 18 yrs. Old. He indicated he was housed with the Department of Youth Services until he was 18, then transferred to this facility, awaiting trial.

Finding of compliance/non-applicability is based on the following: The law prevents the facility from housing inmates under the age of 18 yrs. Old. Observations and interviews confirm this to be true and therefore deemed not applicable.

## Standard 115.15: Limits to cross-gender viewing and searches

### 115.15 (a)

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

### 115.15 (b)

- Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)  Yes  No  NA
- Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.)  Yes  No  NA



### 115.15 (c)

- Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?  Yes  No
- Does the facility document all cross-gender pat-down searches of female inmates? (N/A if the facility does not have female inmates.)  Yes  No  NA

### 115.15 (d)

- Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?  Yes  No
- Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?  Yes  No
- Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?  Yes  No

### 115.15 (e)

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

### 115.15 (f)

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

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

**Does Not Meet Standard** (*Requires Corrective Action*)

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
- 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
- Pt 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.*

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

*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 in 2020. 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 in 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 115.16: Inmates with disabilities and inmates who are limited English proficient**

### **115.16 (a)**

- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing?  Yes  No
- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are blind or have low vision?  Yes  No
- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have intellectual disabilities?  Yes  No
- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect,

and respond to sexual abuse and sexual harassment, including: inmates who have psychiatric disabilities?  Yes  No

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

#### 115.16 (b)

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

#### 115.16 (c)

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

#### Auditor Overall Compliance Determination

**Exceeds Standard** (*Substantially exceeds requirement of standards*)

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

**Does Not Meet Standard** (*Requires Corrective Action*)

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
- Inmate handbook – English and Spanish
- 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. Interviews with staff and inmates provided evidence to the auditor those physical limitations as well as limited English proficiency needs would be and have been addressed to ensure all inmates understand their rights under this law.

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).

Policy supports compliance with the provisions of the standard. The interview with the Sheriff confirmed that physical disabilities and limited English needs are addressed. Staff and inmate interviews provided additional support of compliance with the provisions of this standard.

## **Standard 115.17: Hiring and promotion decisions**

### **115.17 (a)**

- Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?  Yes  No
- Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community

facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?  Yes  No

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

#### 115.17 (b)

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

#### 115.17 (c)

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

#### 115.17 (d)

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

#### 115.17 (e)

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

#### 115.17 (f)

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

#### 115.17 (g)

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

#### 115.17 (h)

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

#### Auditor Overall Compliance Determination

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

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 inmates in the previous twelve 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 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 form 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.

The questions required in provision (a) 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 115.18: Upgrades to facilities and technologies**

### **115.18 (a)**

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

### **115.18 (b)**

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

### Auditor Overall Compliance Determination

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

The 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. 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 115.21: Evidence protocol and forensic medical examinations

#### 115.21 (a)

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

### 115.21 (b)

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

### 115.21 (c)

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

### 115.21 (d)

- Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?  Yes  No
- If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency *always* makes a victim advocate from a rape crisis center available to victims.)  Yes  No  NA
- Has the agency documented its efforts to secure services from rape crisis centers?  Yes  No

### 115.21 (e)

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

### 115.21 (f)

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

### 115.21 (g)

- Auditor is not required to audit this provision.

### 115.21 (h)

- If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency *always* makes a victim advocate from a rape crisis center available to victims.)  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
- PAQ
- Interview with medical staff
- Interview with the investigator
- PREA kit
- Interview with SANE Regional Coordinator
- MOU with Martha's Vineyard Community Services' CONNECTT 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 Jal; 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 115.22: Policies to ensure referrals of allegations for investigations

### 115.22 (a)

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

### 115.22 (b)

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

### 115.22 (c)

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

### 115.22 (d)

- Auditor is not required to audit this provision.

### 115.22 (e)

- Auditor is not required to audit this provision.

## Auditor Overall Compliance Determination

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

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 115.31: Employee training

#### 115.31 (a)

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



- Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?  
 Yes  No

#### 115.31 (b)

- Is such training tailored to the gender of the inmates at the employee's facility?  Yes  No
- Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?  Yes  No

#### 115.31 (c)

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

#### 115.31 (d)

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

#### Auditor Overall Compliance Determination

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

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
- PREA Power Point
- PREA Lesson Plan
- PAQ
- FAQ

The PAQ indicates that all employees, 22, who have contact with inmates were trained on PREA requirements as outlined in the provision.

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.*

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 demonstration the understood the training and policy review. At this point, it was reported that PREA training would be conducted annually I 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 confirmed that it addresses the follow:

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

Based on review of the policies, training curriculum, training records, interview with the training coordinator and all random staff interviews, the auditor finds sufficient evidence to support a finding of compliance with this standard.

## Standard 115.32: Volunteer and contractor training

### 115.32 (a)

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

### 115.32 (b)

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

### 115.32 (c)

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

### Auditor Overall Compliance Determination

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

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 contractor – mental health
- Volunteer & Contractor Orientation Handbook
- Interview with the Volunteer Coordinator
- Interview with the Training Coordinator
- PAQ

The PAQ indicates there are eight volunteers and contractors who have been trained in agency policies and procedures regarding sexual abuse/harassment prevention, detection, and response. 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.*

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 information provided to contractual staff and volunteers, review of the randomly requested documentation, interview with the contractual staff and interview with the volunteer coordinator, the auditor finds sufficient evidence to support a finding of exceeds compliance with this standard due to the required annual refresher training for volunteers.

## **Standard 115.33: Inmate education**

### **115.33 (a)**

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

#### 115.33 (b)

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

#### 115.33 (c)

- Have all inmates received the comprehensive education referenced in 115.33(b)?  Yes  No
- Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?  Yes  No

#### 115.33 (d)

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

#### 115.33 (e)

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

#### 115.33 (f)

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

### Auditor Overall Compliance Determination

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

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
- Inmate Handbook
- Observations Posters, pamphlets
- Observation of the intake process
- Interviews intake staff
- Interviews random inmates
- Intake records corresponding log of received inmates, randomly requested
- Documentation of additional information in 30 days
- Education materials
- Video What You Need to Know, English and Spanish
- PAQ

The PAQ indicates that all inmates were admitted that were given information at intake, blank stayed past 30 days who received comprehensive education on their rights to be free from both sexual abuse/harassment and retaliation for reporting such incidents and on agency policies and procedures for responding to such incidents within 30 days of intake.

County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020 states, *The Sheriff's Office shall present orientation material on sexual abuse prevention and intervention to inmates through an orientation and the Inmate Handbook. Inmates shall be responsible for familiarizing themselves with the provided PREA information. Inmates are responsible for reporting allegations in a timely fashion to an employee, contractor or volunteer, in order to ensure their safety and the safety of others.*

#### *Inmate Education*

*The Superintendent/designee shall assure that new inmates to the DCHOC receive written, verbal and/or video presentations about prisoner sexual violence in English and/ or Portuguese within 30 days of admission. All written orientation materials about sexually abusive behavior will be provided in Spanish when appropriate. When a literacy problem exists, a staff member shall assist the inmate in understanding the information.*

*Inmates who are transferred from one facility to another shall be educated on their right to be free from sexual abuse and harassment and to be free from retaliation for reporting such incidents.*

Inmate Handbook addresses the following:

## WHAT YOU NEED TO KNOW ABOUT THE PRISON RAPE ELIMINATION ACT(PREA)

*What is PREA?*

*The Prison Rape Elimination Act (PREA) was signed into law in 2003. PREA is a national law that addresses sexual abuse. PREA also calls for “Zero Tolerance” of all forms of sexual abuse and sexual harassment. PREA applies to all correctional settings.*

*What does “Zero Tolerance” mean?*

*At the Dukes County Sheriff’s Office (DCSO), we do not allow any forms of sexual abuse or sexual harassment. We investigate all reports of sexual abuse and sexual harassment. The DCSO refers all substantiated cases of sexual assault against inmates/detainees for discipline, and when appropriate, for prosecution. The DCSO also takes disciplinary action when an investigation reveals that an inmate detainee knowingly made a false allegation. The DCSO views all sexual contact between inmates/detainees and staff as coercive and NEVER consensual.*

*What is Sexual Abuse?*

*Any attempt or, threat to engage in sexual acts*

*Any touching between the genitals, anus, or mouth*

*Penetration or insertion by a finger, object, or another method*

*Any other intentional touching of the genitals, anus, groin “crotch”, breast, inner thigh, or butt, unless it is part of official duties*

*Indecent exposure (showing genitals of purpose), invasion of privacy, or staff voyeurism (spying or watching) for sexual pleasure*

*What is Sexual Harassment?*

*Repeated attempts or pressure to have sexual activity*

*Requests for sexual favors*

*Repeated negative sexual talk*

*Sexual actions or gestures (acting out sexual acts)*

*Negative comments about gender*

*Negative comments about body or clothing*

*What should I do if; I am sexually assaulted by an inmate or a staff person?*

*Immediately report the incident. You can report to any staff person you feel comfortable telling. You can also call the PREA Manager to report (774)549-6093.*

*You can also report externally in writing to:*

*Massachusetts Department of Corrections*

*50 Maple Street, Suite 2*

*Milford, MA 01757*

*Attention: PREA Coordinator*

*Do not shower, brush your teeth, use the bathroom, or change your clothes, as this may destroy important evidence.*

*Request immediate medical attention. You may have serious injuries or been exposed to sexually transmitted diseases.*

*What kind of help can I get?*

*You can speak with professional mental health staff to help you recover from the emotional impact of the violence you suffered.*

*You can also speak confidentially to an outside advocate by calling CONNECT to End Violence (508)696-7233 or by mail at 111 Edgartown Road, Vineyard Haven, MA 02568 GENERAL INFORMATION*

At this facility, all staff perform the function of intake staff. It was reported to the auditor and confirmed by inmate interviews that upon intake they are provided with the PREA pamphlet.

The PREA pamphlet 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?

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

Upon intake, It was reported by the staff and inmates that all inmates receive a tablet. On the tablet is the video PREA: What You Need to Know The video shown is sixteen minutes long. It reviews personal testimony from numerous male incarcerated individuals emphasizing that sexual abuse and sexual harassment more commonly occurring through manipulation and how to avoid manipulation. It reinforces that incarcerated individuals can report to anyone anytime. It is their right to be free from sexual abuse, sexual harassment and retaliation. It addresses how to report outside the agency. Inmates and staff reported that they must watch the video before being able to access any other information on the tablet. Staff monitor the completion of the video and issue a certificate to the inmate when this occurs. The inmate earns points for watching the video which affords the reward of opening additional items on the tablet The video has an English version and a Spanish version.

This does not apply to this facility. This is the first PREA audit. All inmates have received education upon initiation of the standard requirements. The auditor finds this credible as the facility has a very low population count.

See comments in 115.16. As noted, the video is available in English and Spanish. The posters are in English and Portuguese, and the Inmate Handbook is available in English and Spanish.

The auditor randomly requested documentation demonstrating that the first five inmates received in August 2021 were educated about PREA. Documentation showing date of arrival was provided in addition to the corresponding certificates given for watching the video.

As indicated, the information is continuously available on the inmate tablet. Additionally, the auditor was informed and observed posters throughout the facility with the following information: 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. Inmate interviews acknowledge that they have seen these posters during their time incarcerated.

All inmate interviews confirmed the process as described above.

Based on review of the policies, inmate interviews, the PREA Pamphlet, posters, Inmate Handbook, and responses regarding viewing of the video, the auditor finds sufficient evidence to support a finding of compliance with this standard.

## **Standard 115.34: Specialized training: Investigations**

### **115.34 (a)**

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

### **115.34 (b)**



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

#### 115.34 (c)

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

#### 115.34 (d)

- Auditor is not required to audit this provision.

#### Auditor Overall Compliance Determination

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

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.

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.

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.

## **Standard 115.35: Specialized training: Medical and mental health care**

### **115.35 (a)**

- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)  Yes  No  NA
- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)  Yes  No  NA
- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)  Yes  No  NA
- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or suspicions of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)  Yes  No  NA

### **115.35 (b)**

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

### **115.35 (c)**

- Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)  Yes  No  NA

### 115.35 (d)

- Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)  
 Yes  No  NA
- Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)  Yes  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 Medical staff
- Interviews Mental health staff – contractual staff
- Interview with the Training Coordinator
- Training curriculum
- Training Records medical and mental health staff
- PAQ

The PAQ indicates that the facility has forty medical and mental health staff.

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:*

*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.*

The auditor interviewed the medical nurse on site and the mental health contractor via phone. Both confirmed they received the training as required by provision (a).

The auditor was provided with documentation demonstrating completion of the specialized medical and mental health training for the nurse through the curriculum presented by the National Institute of Corrections (NIC). The auditor is familiar with the curriculum and confirms it addresses the required subjects.

Contractual staff are used in the area of medical health and mental health. During the interview with the mental health staff, she confirmed to the auditor that her agency provides services to several correctional entities in the state and therefore they are familiar with and compliant with the training requirements. Training records were provided demonstrating that the nurse on staff received specialized and regular PREA training.

Finding of compliance is based on the following: Policy supports the requirements of the standard, interviews with the medical and mental health staff, review of training documents as well as the training quiz required to be taken by medical and mental health staff.

## **SCREENING FOR RISK OF SEXUAL VICTIMIZATION AND ABUSIVENESS**

### **Standard 115.41: Screening for risk of victimization and abusiveness**

#### **115.41 (a)**

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

#### **115.41 (b)**

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

#### **115.41 (c)**

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

#### **115.41 (d)**

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

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?  Yes  No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?  Yes  No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?  Yes  No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?  Yes  No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?  Yes  No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)?  Yes  No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?  Yes  No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?  Yes  No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes?  Yes  No

#### 115.41 (e)

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

#### 115.41 (f)

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

#### 115.41 (g)

- Does the facility reassess an inmate's risk level when warranted due to a referral?  Yes  No
- Does the facility reassess an inmate's risk level when warranted due to a request?  Yes  No
- Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?  Yes  No
- Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?  Yes  No

#### 115.41 (h)

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

#### 115.41 (i)

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

#### Auditor Overall Compliance Determination

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

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 Staff who perform risk screens
- Medical intake assessment
- Indoctrination form
- Random inmate interviews
- Random review of inmate's risk assessments
- Interview PREA Coordinator
- Reassessment of Sexual Victimization or Abusiveness form
- PAQ
- FAQ

The PAQ indicates that all inmates were screened who were screened for risk of sexual victimization or risk of sexually abusing other inmates within 72 hours of their entry into the facility, all who were reassessed for their risk of sexual victimization or of being sexually abusive within 30 days after their arrival at the facility based upon any additional, relevant information received since intake.

County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020 states, *Identification, Reporting, and Screening During Admission*  
*All inmates are screened within 72 hours of arrival at DCHOC for potential vulnerabilities as victim or for potential sexually aggressive or predatory behavior (PREA Screening Instrument).*

*Inmates may not be disciplined for refusing to answer, or for not disclosing complete information in response to questions asked during the screening.*

*Inmates at risk or who have a history of inmate sexual abuse victimization:*

*All inmates entering DCHOC and upon subsequent transfers from other institutions, shall be screened within twenty four (24) hours by a qualified medical professional for a history of and the risk for sexual abuse victimization in accordance with Policy 932.06, Admission Medical Screening and within 72 hours by Intake Officers and/or Classification staff using the PREA Screening Instrument. Inmates identified through the PREA Screening Instrument, self-reports, medical reports or other criminal record information as having a history of sexual abuse victimization and/or at risk of being a victim of inmate sexual abuse shall be referred to a mental health clinician for assessment, monitoring, and counseling for follow-up within 14 days of intake. Documentation will be made in the CorEMR chart notes. Medical and Mental Health practitioners shall obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting. The Facility Shift Supervisor shall be notified to ensure that appropriate steps (e.g., investigation, housing assignment) are taken.*

*Upon learning that an inmate has been identified as having been a victim or is at risk for such, the Facility Shift Supervisor shall carefully assess the immediate needs and housing assignment of the inmate. Where double bunking is necessary, the staff members making cell assignments shall rely upon standard guidelines for cell matching and through the approval of the Assistant Deputy Superintendent of Human Services in selecting a cellmate for the inmate. Cell assignments shall be made by Classification, Facility Shift Supervisor and/or the Lieutenant of Operations.*

*Inner Perimeter Security will be notified for monitoring purposes of those inmates identified as high risk for sexual abuse victimization.*

*Inmates with a history of engaging in predatory sexually abusive behavior:*  
*Intake Officers and/or Classification Staff shall screen inmates for a history of sexually abusive behavior by conducting PREA screening and a review of criminal record information, (e.g., judgment and commitment orders, institutional six part folder, board of probation). Inmates identified as having a history of sexually abusive behavior not previously identified shall be documented appropriately. The Facility Shift Supervisor shall be notified. Staff shall also ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening. Special Operations will be notified for monitoring purposes of those inmates identified as potential sexual predators.*

#### *Classification*

*The Sheriff's Office shall use all relevant information to make classification and programming decisions with the goal of keeping all inmates safe and free from sexual abuse. All relevant information includes the PREA screening instrument found at the conclusion of this policy.*

*LGBTI status shall not be an indicator of likelihood of being sexually abusive.*

*Within a set time period, but not to exceed 30 days from the inmate's arrival, the Sheriff's Office will reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening.*

*An inmate's risk level shall be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness.*

The interview with staff who generally complete the risk assessment confirmed to the auditor that it is held in a private setting (room shown to the auditor during the tour). Inmates are asked verbally, out loud the questions pertaining the risk screen. Random inmate interviewed confirmed they are asked verbally and in a private setting. The auditor randomly requested and received documentation showing the risk assessment for the first five inmates to arrive in August 2021. The risk screens demonstrated that a timely initial assessment was completed addressing the following:

Risk of Sexual Victimization:

- mental, physical, development disability
- age
- physical build
- first incarceration
- convictions for sex offense against an adult or child
- self identifies as gay, lesbian, bisexual, transgender, intersex or gender nonconforming
- crimes exclusively nonviolent
- previous experience as a victim of sexual abuse community and while incarcerated
- previous placement in protective custody for sexual acts against
- involved in or victimized by the sex industry
- inmate's perception of risk for sexual abuse

The risk screen developed and used at this facility addresses all these requirements. It is prepared to address needs of offenders detained solely for civil immigration, however, inmates at this facility are not detained solely for civil immigration. The screen addresses more detail regarding sexual victimization specifically questions pertaining to prior use of protective custody due to sexual victimization while incarcerated. The screen is completed upon arrival by staff who complete intake, which is anyone assigned.

On this tool, it does not address the ability to make a subjective assessment regarding gender non-conforming appearance as required by the FAQ issued by the DOJ in October 2016. In response to the request for corrective action, the facility provided an updated risk assessment that provides for the screen to make a subjective opinion regarding perceived status of gay, bi-sexual, transgender/intersex and/or gender non-conforming and a place to document this, and instructions for the screener to determine who someone scores as potentially sexually vulnerable and potentially sexually aggressive.

The screening tools addresses the following:

Risk of Sexual Abusiveness:

- conviction for a crime related to sexual abuse in institutional setting or community
- registered sex offender
- history of committing institutional sexual abuse, convicted of or known history
- history of sexual activity while incarcerated
- convicted of a violent offense
- history of institutional violence



- prior domestic violence/ related order for such
- prior segregation for violence or sexual acts while incarcerated
- previous predatory history while incarcerated
- Prior behavior for touching someone sexually against their will or forced sexual activity
- Gang affiliation
- Prior physical assault while incarcerated
- History of strong arming while incarcerated
- Institutional history of violence

In addition, the screen addresses gang affiliation, prior convictions for domestic violence and documented violations of a restraining order.

Instructions for the screener to determine sexual vulnerability and sexual aggressiveness is on the form.

The auditor was provided with documentation demonstrating a review with the inmate within 30 days. The PREA Compliance Manager, who typically conducts this review, confirmed that the inmate is interviewed in person and information is obtained that they reflect on the findings of the initial risk assessment. Documentation, randomly requested, provided evidence to the auditor of this thirty-day review. This evidence supports that the facility is meeting the provisions as clarified in the FAQ issued by the DOJ August 2019.

The interview with the PREA Compliance Manager confirmed she would reassess an inmate upon receipt of any additional information that would affect a finding of vulnerable or predatory. Additionally, she indicated that this information may be picked up on the routine classification review conducted every 60 days.

The interview with the PREA Compliance Manager, who typically completes the risk assessment, confirmed she would not require an inmate to answer sensitive questions - (d)(1), (d)(7), (d)(8), or (d)(9) if they did not want to respond. Random inmate interviews confirmed that they did not believe they would be disciplined if they did not respond.

It was reported to the auditor that all staff have access to an “Alert” that would be generated when a inmate screens as vulnerable or predatory. Hard copies of the information is located in her office in a secured draw and therefore only accessible to key supervisor staff (PREA Coordinator, PREA Compliance Manager, investigator).

Finding of compliance is based on the following: Policy supports compliance with all aspects of the standards. Inmate interviews all supported compliance and staff affirmed the process in interviews and security of the information obtained. Staff interviews support the process, indicating that they inmate is asked these questions privately and verbally. The screening form was updated to allow the screener to also make a subjective assessment as required in the FAQ issued October 2016. Review of documentation, including updated risk screening assessments provided evidence to support a finding of compliance with all provisions of this standard.

## **Standard 115.42: Use of screening information**

### **115.42 (a)**

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

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

#### 115.42 (b)

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

#### 115.42 (c)

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

#### 115.42 (d)

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

#### 115.42 (e)

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

#### 115.42 (f)

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

#### 115.42 (g)

- Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)  Yes  No  NA
  
- Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)  Yes  No  NA
  
- Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)  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
- Interview Staff who conduct Risk screens
- Interview PREA Coordinator

County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020 states, *Identification, Reporting, and Screening During Admission*  
*All inmates are screened within 72 hours of arrival at DCHOC for potential vulnerabilities as victim or for potential sexually aggressive or predatory behavior (PREA Screening Instrument).*

*Inmates may not be disciplined for refusing to answer, or for not disclosing complete information in response to questions asked during the screening.*

*Inmates at risk or who have a history of inmate sexual abuse victimization:*

*All inmates entering DCHOC and upon subsequent transfers from other institutions, shall be screened within twenty four (24) hours by a qualified medical professional for a history of and the risk for sexual*

*abuse victimization in accordance with Policy 932.06, Admission Medical Screening and within 72 hours by Intake Officers and/or Classification staff using the PREA Screening Instrument. Inmates identified through the PREA Screening Instrument, self-reports, medical reports or other criminal record information as having a history of sexual abuse victimization and/or at risk of being a victim of inmate sexual abuse shall be referred to a mental health clinician for assessment, monitoring, and counseling for follow-up within 14 days of intake. Documentation will be made in the CorEMR chart notes. Medical and Mental Health practitioners shall obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting. The Facility Shift Supervisor shall be notified to ensure that appropriate steps (e.g., investigation, housing assignment) are taken.*

*Upon learning that an inmate has been identified as having been a victim or is at risk for such, the Facility Shift Supervisor shall carefully assess the immediate needs and housing assignment of the inmate. Where double bunking is necessary, the staff members making cell assignments shall rely upon standard guidelines for cell matching and through the approval of the Assistant Deputy Superintendent of Human Services in selecting a cellmate for the inmate. Cell assignments shall be made by Classification, Facility Shift Supervisor and/or the Lieutenant of Operations.*

*Inner Perimeter Security will be notified for monitoring purposes of those inmates identified as high risk for sexual abuse victimization.*

*Inmates with a history of engaging in predatory sexually abusive behavior:*

*Intake Officers and/or Classification Staff shall screen inmates for a history of sexually abusive behavior by conducting PREA screening and a review of criminal record information, (e.g., judgment and commitment orders, institutional six part folder, board of probation). Inmates identified as having a history of sexually abusive behavior not previously identified shall be documented appropriately. The Facility Shift Supervisor shall be notified. Staff shall also ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening.*

*Special Operations will be notified for monitoring purposes of those inmates identified as potential sexual predators.*

#### *Classification*

*The Sheriff's Office shall use all relevant information to make classification and programming decisions with the goal of keeping all inmates safe and free from sexual abuse. All relevant information includes the PREA screening instrument found at the conclusion of this policy.*

*LGBTI status shall not be an indicator of likelihood of being sexually abusive.*

*Within a set time period, but not to exceed 30 days from the inmate's arrival, the Sheriff's Office will reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening.*

*An inmate's risk level shall be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness.*

*Housing and program assignments for transgender and intersex inmates shall be made on a case by case basis.*

*LGBTI inmates shall not be classified based solely on identification or status.*

As indicated, staff reported that the OMS would provide a PREA alert. Therefore, staff at any time would be able to properly manage the housing of a predatory or vulnerable inmates.

At the time of the audit, it was reported there were no inmates who identified as transgender female. The interview with the PREA Compliance Manager confirmed to the auditor that she would be responsible for this review, noting again that everyone is reviewed every 60 days. Based on the size of the facility and involvement of the PREA Compliance Manager in daily activities, the auditor found this credible.

Staff confirmed they would provide a private area or a separate time for showering if the request was made. Based on observations of the physical plant, the auditor found this credible as there are many options for showering that could afford privacy to a transgender/intersex if requested.

During the audit process of touring, reviewing documentation and interviewing staff, it is determined that this facility does not have dedicated facilities, units, or wings solely on the basis of such identification or status as transgender, intersex, homosexual, bi-sexual, gay or lesbian.

Finding of compliance is based on the following: Policies which support compliance, interviews with all staff, inmates and observation of post orders. Although this is a small facility, the auditor finds that the design affords numerous options for housing inmates based on information gathered, including the risk assessment to enhance safety for inmates housed in the operation.

## Standard 115.43: Protective Custody

### 115.43 (a)

- Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?  Yes  No
- If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?  Yes  No

### 115.43 (b)

- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?  Yes  No
- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?  Yes  No
- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?  Yes  No
- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?  Yes  No
- If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility *never* restricts access to programs, privileges, education, or work opportunities.)  Yes  No  NA

- If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility *never* restricts access to programs, privileges, education, or work opportunities.)  Yes  No  NA
- If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility *never* restricts access to programs, privileges, education, or work opportunities.)  Yes  No  NA

#### 115.43 (c)

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

#### 115.43 (d)

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

#### 115.43 (e)

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

#### Auditor Overall Compliance Determination

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

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 of Restricted Housing
- Interviews Special Sheriff/Superintendent
- PAQ

The PAQ states that no inmates have been placed in involuntary protective custody due to their high risk of sexual victimization. The auditor found no evidence to dispute this during the audit process.

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

*Inmates at high risk for sexual victimization will be classified in the least restrictive environment that is operationally feasible.*

*Inmates at high risk for sexual victimization shall not be placed in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers. If the facility cannot conduct such an assessment immediately, the facility may hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment.*

*Inmates placed in segregated housing for this purpose shall have access to programs, privileges, education and work opportunities to the extent possible. If the facility restricts access to programs, privileges, education, or work opportunities, the facility shall document:*

*The opportunities that have been limited;*

*The duration of the limitation; and*

*The reasons for such limitations*

*Inmates shall be segregated from other inmates only as a last resort when least restrictive measures are inadequate. This segregation shall only last until alternative measures can be arranged. A review will be conducted every 14 days to assess whether continued segregation from other inmates is necessary.*

*If an involuntary segregated housing assignment is made based on section E (6), the facility shall clearly document:*

*The basis for the facility's concern for the inmate's safety;*

*The reason why no alternative means of separation can be arranged; and*

*Every 14 days the facility shall afford each such inmate a review to determine whether there is a continuing need for separation from the general population*

*Inmates who are classified away from the general population into an At-Risk housing unit because of risk of victimization or abusiveness shall receive the opportunity to exercise/shower daily and shall receive any legally required educational programming.*

Finding of compliance is based on the following: The PAQ states that no inmates have been placed in restrictive housing for protective custody to separate a victim from his abuser. The auditor found no reason to dispute this fact during the audit process. All staff supervise the administrative housing area located in the Regional Lockup facility. Due to the physical plant, the facility has numerous options for placing an inmate for separation from his abuser without having to resort to placement in protective housing status. The interview with the Special Sheriff/Superintendent confirmed that SHU will be used as a last resort. Based upon the written authority and these interviews, the auditor finds the facility is substantially compliant with this standard.

## REPORTING

### Standard 115.51: Inmate reporting

#### 115.51 (a)

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

#### 115.51 (b)

- Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?  Yes  No
- Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?  Yes  No
- Does that private entity or office allow the inmate to remain anonymous upon request?  Yes  No
- Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility *never* houses inmates detained solely for civil immigration purposes)  Yes  No  NA

#### 115.51 (c)

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

#### 115.51 (d)

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

#### Auditor Overall Compliance Determination

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

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
- Inmate Handbook
- Interviews inmates
- Interviews random staff
- Email confirming Mass DOC will accept reports from the facility

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 inmate telephones:

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

Inmates are provided information regarding how to make reports in different ways at intake. All inmate interviews support knowledge of several options. Inmates have a hotline number which can be called without using a personal identification number (PIN) which goes directly to the PREA Compliance Manager. This is noted on PREA posters throughout the facility; posters are located next to the phones. The PREA Pamphlet and in the Inmate Handbook. Most inmates were knowledgeable regarding this number being available; those that were not, indicated to the auditor they were not concerned with this type of information.

The Inmate Handbook indicates: *You can also report externally in writing to:*

*Massachusetts Department of Corrections*

*50 Maple Street, Suite 2*

*Milford, MA 01757*

*Attention: PREA Coordinator*

The PREA Pamphlet provides a phone number for reporting to this agency.

The auditor verified with the PREA Coordinator for the Massachusetts Department of Correction that his agency is willing to accept reports from inmates at Dukes County Jail, House of Correction and Regional Lockup, including anonymous, and transmit them immediately.

Staff interviews confirmed that staffs are aware of the reporting requirement and support compliance, including the reporting of suspicions to their immediate supervisor, stating that this information is well received and handled appropriately by the supervisors.

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. Investigations were initiated based on numerous avenues. 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 115.52: Exhaustion of administrative remedies

### 115.52 (a)

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

### 115.52 (b)

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

### 115.52 (c)

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

### 115.52 (d)

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

by which a decision will be made? (N/A if agency is exempt from this standard.)

Yes  No  NA

- At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)  Yes  No  NA

#### 115.52 (e)

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

#### 115.52 (f)

- Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)  Yes  No  NA
- After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)  Yes  No  NA
- After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)  Yes  No  NA
- After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)  Yes  No  NA
- Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)  Yes  No  NA
- Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)  Yes  No  NA
- Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)  Yes  No  NA

## 115.52 (g)

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

### Auditor Overall Compliance Determination

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

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 Grievance Coordinator
- Review of general grievances for the previous 12 months
- PAQ

The PAQ indicates there have been no grievances regarding sexual abuse, no emergency grievances, no grievances written in bad faith and no third-party grievances in the previous 12 months. To confirm this the auditor reviewed the grievances quickly for the previous 12 months and interviewed the grievance coordinator.

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

*The Sheriff's Office does not impose a time limit on when an inmate may file an institutional grievance regarding an allegation of sexual abuse or harassment. An inmate may use an informal grievance process or otherwise attempt to resolve an alleged incident of sexual abuse. An inmate who alleges sexual abuse may file a grievance without submitting the grievance to a staff member who is the subject of the complaint. The grievance will not be referred to a staff member who is the subject of the complaint.*

*A final agency decision on the merits of any portion of a grievance alleging sexual abuse shall be issued within 90 days of the initial filing of the grievance. Computation of the 90-day time period shall not include time consumed by inmates in preparing any administrative appeal. The Sheriff's Office may claim an extension of time to respond, of up to 70 days, if the normal time period for response is insufficient to make an appropriate decision. The agency shall notify the inmate in writing of any such extension and provide a date by which a decision will be made. At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension; the inmate may consider the absence of the response to be a denial at that level.*

*Third parties, including fellow inmates, staff members, family members, attorneys and outside advocates may assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse and shall also be permitted to file such requests on behalf of inmates.*

*If a third party files such a request on behalf of an inmate, the facility may require—as a condition of processing the request—that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps independently. If an inmate declines third-party assistance, this decision will be documented.*

*An inmate may file an emergency grievance alleging they are subject to substantial risk of imminent sexual abuse.*

*When an emergency grievance alleging substantial risk of imminent sexual abuse is received, it shall be immediately forwarded to the Facility Shift Supervisor for immediate corrective action to be taken. The response shall be within 48 hours and the grievance is to provide a final decision within 5 calendar days. The initial response and the final decision shall document the determination whether the inmate was in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance.*

## **FALSE ALLEGATIONS**

*If the Sheriff's Office investigation reveals that an inmate, Sheriff's Office employee, contractor or volunteer has knowingly made false allegations or made a material statement which they could not have believed to be true, then the Sheriff's Office may take appropriate disciplinary action, and/or criminal action under the Massachusetts General Laws as appropriate. This information shall be included in any orientation booklet, the inmate Handbook as well as within the training to Sheriff's Office employees, contractors or volunteers and inmates.*

The interview with the Grievance Coordinator confirmed that any grievance received will be closed out and referred to the PREA Coordinator who then review and determines a response or forwards to the investigators for investigation.

Finding of compliance is based on the following: Policy supports all aspect of the provisions of this standard. The auditor reviewed the grievances from the previous 12 months and spoke with the Grievance Coordinator; he confirmed that the requirements of the provisions would be addressed for any grievance alleging sexual abuse. For any grievance alleging any sexual abuse or sexual harassment, an investigation would be commenced immediately. He serves as the investigator of the facility in addition to the Grievance Coordinator.

## **Standard 115.53: Inmate access to outside confidential support services**

### **115.53 (a)**

- Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?  Yes  No
- Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility *never* has persons detained solely for civil immigration purposes.)  Yes  No  NA
- Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?  Yes  No

### **115.53 (b)**

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

### 115.53 (c)

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

### Auditor Overall Compliance Determination

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

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 of information posted by the phones
- Intake information about PREA
- PREA Posters
- Interviews Random inmates
- Inmate Handbook
- MOU with CONNECT Rape Crisis Counselor/Advocates
- Interview with Director (email exchange) for CONNECT Rape Crisis Counselors

County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020 states, *The Sheriff's Office will maintain an MOU with community service providers (a third part entity) to provide inmates with confidential support services related to sexual abuse. CONNECT to End Violence operates a toll-free phone number for inmates to access outside confidential support services. The toll-free number (508-696-7233) and mailing address are listed in the Inmate Handbook, and the hotline number is also written on the PREA poster. All inmates within the DCHOC shall have universal and unimpeded access to this hotline number. The number shall be designated within the inmate telephone system, so inmates may use to alert appropriate staff about possible cases of sexually abusive behavior. Inmates will also have the option of reporting sexually abusive behavior to a designated staff member other than an immediate point of contact line officer. Allegations of sexual abuse may also be reported directly to the Massachusetts Prison Rape Elimination Act Division at their 24 hours hotline: (508) 422-3481. This number will be toll free and programmed into the inmate telephone system to be able to call directly.*

The Inmate Handbook informs inmates they can call confidentially to this organization. A mailing address is also available. Posters by the phones indicate that the call is unmonitored.

The facility has an MOU with CONNECT Rape Crisis Counselor/Advocates. In the MOU the DCSO agrees to respect the privileged communication between the Advocate and the inmate, in addition to

informing them about the hotline program. The organization agrees to provide/staff a crisis hotline seven days per week to provide crisis intervention services to inmates of sexual violence, maintain confidentiality, obtain consent and a release of information prior to contacting DCSO or other third parties about fears or concerns the inmate has related to his safety provide inmates with referrals for treatment after release or transfer, assure that staff/volunteers working the hotline complete background clearances as required for volunteers/contractors of the DDCSO. Follow up confirmation was received via email exchange with the Director who confirmed that Victim Advocates are trained rape crisis counselors in accordance with MGL ch 233 sec 20j. This training in completed as a pre-service training per CONNECT's DPH contract and receives ongoing training and supervision.

Finding of compliance is based on the following: Policy, MOU with the rape crisis advocate service, information provided at intake, knowledge of the services confirmed by inmates during random interviews and on the PREA posters supports a finding of compliance.

## Standard 115.54: Third-party reporting

### 115.54 (a)

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

### Auditor Overall Compliance Determination

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

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 AN INMATE REPORT

## Standard 115.61: Staff and agency reporting duties

### 115.61 (a)

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

### 115.61 (b)

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

### 115.61 (c)

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

### 115.61 (d)

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

### 115.61 (e)

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

## Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)



**Does Not Meet Standard** (*Requires Corrective Action*)

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
- Review of investigations
- Inmate handbook

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. Review of the investigations and interviews with the investigators support that an immediately notification is made.

*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. They indicated that inmates are informed of their limits of confidentiality at intake when they are evaluated upon arrival. Additionally, the facility updated the inmate handbook to ensure they are informed on this and the PREA policy.

This facility does not house inmates under the age of 18. 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.

*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.*

The interview with the investigator supports that all allegations are referred to him for review and investigation.

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 need to maintain confidentiality. The inmate handbook reflects that medical and mental health staff are mandated to report any allegations of sexual misconduct reported to them.

## Standard 115.62: Agency protection duties

### 115.62 (a)

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

### Auditor Overall Compliance Determination

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

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 115.63: Reporting to other confinement facilities

### 115.63 (a)

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

### 115.63 (b)

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

### 115.63 (c)

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

### 115.63 (d)

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

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

**Does Not Meet Standard** (*Requires Corrective Action*)

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.*<sup>58</sup>

*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 115.64: Staff first responder duties**

### **115.64 (a)**

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

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

#### 115.64 (b)

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

#### Auditor Overall Compliance Determination

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

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 Training Curriculum
- PAQ
- PREA First Responder Duties card

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. Additionally, staff are issued a PREA First Responder Card which reinforces these requirements. Volunteers and contractual staff are limited. The auditor observed areas where they would provide services. Security staff are in the immediate areas which provided the auditor further assurance that all staff, security and non-security, would ensure compliance with the requirements of this standard.

## **Standard 115.65: Coordinated response**

### **115.65 (a)**

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

### **Auditor Overall Compliance Determination**

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

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

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 liason.

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.

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 provided the auditor with sufficient evidence to support a finding of compliance.

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

### **115.66 (a)**

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

### **115.66 (b)**

- Auditor is not required to audit this provision.

### Auditor Overall Compliance Determination

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

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 115.67: Agency protection against retaliation

### 115.67 (a)

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

### 115.67 (b)

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

#### 115.67 (c)

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

#### 115.67 (d)

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

#### 115.67 (e)

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

#### 115.67 (f)

- Auditor is not required to audit this provision.

#### Auditor Overall Compliance Determination

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

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
- 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 observed 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. Finally, a retaliation monitoring form has been developed to ensure the person addresses the specific areas of concern and documents such concerns on this form.

## Standard 115.68: Post-allegation protective custody

### 115.68 (a)

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

### Auditor Overall Compliance Determination

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

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
- Interview PREA Coordinator and PREA Compliance Manager
- PAQ

The PAQ indicates there has been no incident where an inmate who suffered sexual abuse was held in involuntary segregated housing in the past twelve months. 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, *Inmates at high risk for sexual victimization will be classified in the least restrictive environment that is operationally feasible.*

*Inmates at high risk for sexual victimization shall not be placed in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers. If the facility cannot conduct such an assessment immediately, the facility may hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment.*

*Inmates placed in segregated housing for this purpose shall have access to programs, privileges, education and work opportunities to the extent possible. If the facility restricts access to programs, privileges, education, or work opportunities, the facility shall document:*

*The opportunities that have been limited;*

*The duration of the limitation; and*

*The reasons for such limitations*

*Inmates shall be segregated from other inmates only as a last resort when least restrictive measures are inadequate. This segregation shall only last until alternative measures can be arranged. A review will be conducted every 14 days to assess whether continued segregation from other inmates is necessary.*

*If an involuntary segregated housing assignment is made based on section E (6), the facility shall clearly document:*

*The basis for the facility's concern for the inmate's safety;*

*The reason why no alternative means of separation can be arranged; and*

*Every 14 days the facility shall afford each such inmate a review to determine whether there is a continuing need for separation from the general population*

*Inmates who are classified away from the general population into an At-Risk housing unit because of risk of victimization or abusiveness shall receive the opportunity to exercise/shower daily and shall receive any legally required educational programming.*

*Any use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse shall be subject to the requirements of §115.43.*

All staff regularly supervise special housing. The PREA Coordinator, PREA Compliance Manager and the Special Sheriff/Superintendent both confirmed to the auditor that placement for an inmate who is alleged to have suffered sexual abuse has not occurred. The Special Sheriff/Superintendent reinforced that there are numerous options available to ensure a safe placement before use of special management. The auditor required the facility to update policy to ensure it also specifically addressed use of segregated housing for an inmate who has alleged to have suffered sexual abuse. Policy was updated and provided to the auditor reflecting this change.

Finding of compliance is based on the following: The PAQ indicates they have not had to use restrictive housing to protect an inmate who is alleged to have suffered sexual abuse. Policy addresses the requirements in the event of an occurrence in the future. Interviews with administrative ensured the auditor that use of this area for an inmate who alleges sexual abuse will be used as a last resort, temporarily.

## INVESTIGATIONS

### Standard 115.71: Criminal and administrative agency investigations

#### 115.71 (a)

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

#### 115.71 (b)

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

#### 115.71 (c)

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

#### 115.71 (d)

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

#### 115.71 (e)

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

#### 115.71 (f)

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

#### 115.71 (g)

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

#### 115.71 (h)

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

#### 115.71 (i)

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

#### 115.71 (j)

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

#### 115.71 (k)

- Auditor is not required to audit this provision.

#### 115.71 (l)

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

#### Auditor Overall Compliance Determination

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

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.*

Per 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 an assessment of staff actions or failures that may have contributed to the incident would be a part of any investigation he conducted. 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. Finally, he indicated he would cooperate with outside investigators and remain informed of the progress as 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 confirmed compliance as well.

## **Standard 115.72: Evidentiary standard for administrative investigations**

### 115.72 (a)

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

### Auditor Overall Compliance Determination

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

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.

### Standard 115.73: Reporting to inmates

#### 115.73 (a)

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

#### 115.73 (b)

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

#### 115.73 (c)

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

#### 115.73 (d)

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

#### 115.73 (e)

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

#### 115.73 (f)

- Auditor is not required to audit this provision.

#### Auditor Overall Compliance Determination

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

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 Superintendent
- Interviews with Investigative staff
- Interview with PREA Compliance Manager
- Notification Form

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

*Following an investigation of 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:  
Following an investigation of 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.*

The interview with the PREA Compliance Manager and investigator supports that these notifications would be given and documented. A form has been developed to ensure compliance will all provisions of the PREA standard. that they confirm this is their obligation as the investigator.

Finding of compliance is based on the following: Policy excerpts demonstrate compliance with the requirements. Interview with the investigator and observations of the form for notices provided sufficient evidence to support a finding of compliance.

## DISCIPLINE

### Standard 115.76: Disciplinary sanctions for staff

#### 115.76 (a)

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

#### 115.76 (b)

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

### 115.76 (c)

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

### 115.76 (d)

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

### Auditor Overall Compliance Determination

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

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, Investigator, 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 115.77: Corrective action for contractors and volunteers**

### **115.77 (a)**

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

### **115.77 (b)**

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

### **Auditor Overall Compliance Determination**

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

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 115.78: Disciplinary sanctions for inmates**

### **115.78 (a)**

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

### **115.78 (b)**

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

### **115.78 (c)**

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

### **115.78 (d)**

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

### **115.78 (e)**

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

### **115.78 (f)**



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

### 115.78 (g)

- If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)  Yes  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
- Interviews Special Sheriff/Superintendent
- Interview with Mental Health staff
- Interview with the Disciplinary Officer
- Inmate Handbook
- Sanctioning Schedule
- PAQ

The PAQ indicates there have been no administrative findings or criminal findings of inmate-on-inmate sexual abuse. The auditor found no reason to dispute this during the audit process.

County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention states, *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.*

*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.*

*The disciplinary process shall consider whether an inmate's mental disabilities or mental illness contributed to his/her behavior when determining what type of sanction, if any, should be imposed.*

*The agency may discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact.*

The Inmate Handbook informs the inmates that engaging in sexual acts with others is a major offense. It additionally outlines the disciplinary process.

The facility has an established sanctioning schedule for established offenses. A copy was provided to the auditor.

The interview with the Disciplinary Coordinator confirmed that an inmate's mental status, if relevant, would be reviewed prior to determining disciplinary sanctions.

The interview with the Mental Health Director confirms that her staff could work with an individual individually to address these issues, if he was willing. It would not be a requirement for release.

The interview with the disciplinary coordinator confirmed that an inmate would not be sanctioned for sexual contact with a staff unless the staff member did not consent to the contact.

Finding of compliance is based on the following:

Review of the policies and documents noted above support a finding of compliance. The interview with the Disciplinary Coordinator, Special Sheriff/Superintendent supported those sanctions are proportionate to the nature and circumstance and mental disability/illness is considered when determining sanctions in accordance with policy. The interview with the Mental Health staff supports that the inmate will be referred for appropriate counseling if found guilty of a sexual misconduct. The interview with the disciplinary officer confirmed compliance with provisions (b), (c) and (e). Based on analysis of the evidence, the auditor finds the facility to be compliant with the requirements of this standard.

## MEDICAL AND MENTAL CARE

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

#### 115.81 (a)

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

#### 115.81 (b)

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

#### 115.81 (c)

- If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure

that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening?  Yes  No

#### 115.81 (d)

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

#### 115.81 (e)

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

#### Auditor Overall Compliance Determination

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

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 of the intake process
- Interviews Inmates who disclose sexual victimization at risk screening
- Interview Staff Responsible for risk screening
- Interview medical and mental health staff
- Document's showing limited information to custody staff
- PAQ

The PAQ indicates that 100% of inmates who disclosed prior victimization during screening who were offered a follow up meeting with medical/mental health practitioner.

County Correctional Facilities Sexually Abusive Behavior Prevention and Intervention 9/1/2020 states, *Inmates at risk or who have a history of inmate sexual abuse victimization:*

*All inmates entering DCHOC and upon subsequent transfers from other institutions, shall be screened within twenty four (24) hours by a qualified medical professional for a history of and the risk for sexual abuse victimization in accordance with Policy 932.06, Admission Medical Screening and within 72 hours by Intake Officers and/or Classification staff using the PREA Screening Instrument. Inmates identified through the PREA Screening Instrument, self-reports, medical reports or other criminal record information as having a history of sexual abuse victimization and/or at risk of being a victim of inmate sexual abuse shall be referred to a mental health clinician for assessment, monitoring, and counseling for follow-up within 14 days of intake. Documentation will be made in the CorEMR chart notes.*

*Medical and Mental Health practitioners shall obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting. The Facility Shift Supervisor shall be notified to ensure that appropriate steps (e.g., investigation, housing assignment) are taken.*

*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.*

The mental health staff confirmed she has received referrals related to information obtained at the intake screening. Documentation was provided to the auditor of this occurring.

Medical and mental health staff confirmed knowledge that they are required to obtain informed consent prior to reporting information about prior sexual victimization that did not occur in an institutional setting.

Finding of compliance is based on the following: Review of policy, interviews with staff, including medical and mental health staff, and documentation supporting the receipt of and referrals to mental health for evaluation driven from information obtained in the intake assessment support a finding of compliance.

## **Standard 115.82: Access to emergency medical and mental health services**

### **115.82 (a)**

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

### **115.82 (b)**

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

### **115.82 (c)**

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

### **115.82 (d)**

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

## **Auditor Overall Compliance Determination**

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

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.*

Medical staff are available Monday through Friday eight hours a day. The Coordinated Response Plan addresses how security staff are to respond when 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 this would occur.

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.

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

### **115.83 (a)**

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

### **115.83 (b)**

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

### **115.83 (c)**

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

### **115.83 (d)**

- Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if “all-male” facility. *Note: in “all-male” facilities, there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.*)  Yes  No  NA

#### 115.83 (e)

- If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if “all-male” facility. *Note: in “all-male” facilities, there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.*)  Yes  No  NA

#### 115.83 (f)

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

#### 115.83 (g)

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

#### 115.83 (h)

- If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)  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 made during the tour
- Interviews Medical and mental health staff
- Facility Coordinated Response Plan

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

*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.*

*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.*

*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.*

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.

Policy supports the requirement of the standard. 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 Special Sheriff/Superintendent and medical staff confirmed that this would occur.

## DATA COLLECTION AND REVIEW

### Standard 115.86: Sexual abuse incident reviews

#### 115.86 (a)

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

#### 115.86 (b)

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

#### 115.86 (c)

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

#### 115.86 (d)



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

### 115.86 (e)

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

### Auditor Overall Compliance Determination

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

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 115.87: Data collection**

### **115.87 (a)**

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

### **115.87 (b)**

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

### **115.87 (c)**

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

### **115.87 (d)**

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

### **115.87 (e)**

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

#### 115.87 (f)

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

#### Auditor Overall Compliance Determination

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

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*

*Documentation of all incidents of sexually abusive behavior is critical to the success of the Sheriff's Office's PREA initiative. All incidents of this nature shall be documented in a timely and accurate manner by the Assistant Deputy Superintendent of Human Services referencing specific definitions consistent with those found in the PREA policy and disciplinary charges found in DCSO Policy 943.01 Inmate Rules and Discipline.*

*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/BJIS), 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 115.88: Data review for corrective action**

### **115.88 (a)**

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

#### 115.88 (b)

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

#### 115.88 (c)

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

#### 115.88 (d)

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

#### Auditor Overall Compliance Determination

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

The auditor reviewed, 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

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

## DATA COLLECTION and ANALYSIS

Documentation of all incidents of sexually abusive behavior is critical to the success of the Sheriff's Office's PREA initiative. All incidents of this nature shall be documented in a timely and accurate manner by the Assistant Deputy Superintendent of Human Services referencing specific definitions consistent with those found in the PREA policy and disciplinary charges found in DCSO Policy 943.01 Inmate Rules and Discipline.

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.

The interview with the Sheriff 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, interviews and review of the annual report demonstrates sufficient evidence to support a finding of compliance as this is the first PREA audit.

## Standard 115.89: Data storage, publication, and destruction

### 115.89 (a)

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

### 115.89 (b)

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

### 115.89 (c)

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

### 115.89 (d)

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

## Auditor Overall Compliance Determination

**Exceeds Standard** (*Substantially exceeds requirement of standards*)

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

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*

*Documentation of all incidents of sexually abusive behavior is critical to the success of the Sheriff's Office's PREA initiative. All incidents of this nature shall be documented in a timely and accurate manner by the Assistant Deputy Superintendent of Human Services referencing specific definitions consistent with those found in the PREA policy and disciplinary charges found in DCSO Policy 943.01 Inmate Rules and Discipline.*

*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.*

#### **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.*

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 that data is collected and securely retained. 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 inmates, residents, and detainees?  Yes  No

### 115.401 (n)

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

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)

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

**Does Not Meet Standard** (*Requires Corrective Action*)

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 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 inmate or staff member, except where the names of administrative personnel are specifically requested in the report template.

### Auditor Instructions:

*Amy J. Fairbanks*

February 26, 2022

**Auditor Signature**

**Date**