

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

Interim       Final

**Date of Report**    October 21, 2018

### Auditor Information

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### Agency Information

<b>Name of Agency:</b> Norfolk Sheriff's Office		<b>Governing Authority or Parent Agency (If Applicable):</b> Commonwealth of Massachusetts	
<b>Physical Address:</b> 200 West Street		<b>City, State, Zip:</b> Dedham, MA 02026	
<b>Mailing Address:</b> P. O. Box 149		<b>City, State, Zip:</b> Dedham, MA 02026	
<b>Telephone:</b> (781) 329-3705		<b>Is Agency accredited by any organization?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>The Agency Is:</b>	<input type="checkbox"/> Military	<input type="checkbox"/> Private for Profit	<input type="checkbox"/> Private not for Profit
<input type="checkbox"/> Municipal	<input type="checkbox"/> County	<input checked="" type="checkbox"/> State	<input type="checkbox"/> Federal

**Agency mission:** The Norfolk Sheriff's Office serves the citizens of Norfolk County and the Commonwealth of Massachusetts. We do this by enhancing public safety through the operation of a safe, secure, progressive, and humane correctional facility that establishes structure and accountability for offenders and focuses on re-entry programs and community based programs that promote crime prevention, job readiness, citizen awareness, education, youth development, drug addiction prevention, elderly assistance, and law enforcement support. These efforts are accomplished by a highly trained and dedicated workforce and through collaborative agreements with public and private stakeholders.

**Agency Website with PREA Information:** [norfolksheriff.com/](http://norfolksheriff.com/)

### Agency Chief Executive Officer

<b>Name:</b> Michael G. Bellotti	<b>Title:</b> Sheriff
<b>Email:</b> mbellotti@norfolksheriffma.org	<b>Telephone:</b> (781) 329-3705

### Agency-Wide PREA Coordinator

<b>Name:</b> Danielle Boomhower	<b>Title:</b> Director of Classification
<b>Email:</b> dboomhower@norfolksheriffma.org	<b>Telephone:</b> (781) 751-3357
<b>PREA Coordinator Reports to:</b> Peter Perroncello, Superintendent	<b>Number of Compliance Managers who report to the PREA Coordinator</b> 1

### Facility Information

<b>Name of Facility:</b> Norfolk Sheriff's Office and Correctional Center			
<b>Physical Address:</b> 200 West Street Dedham, MA 02026			
<b>Mailing Address (if different than above):</b> P. O. Box 149 Dedham, MA 02026			
<b>Telephone Number:</b> : (781) 329-3705			
<b>The Facility Is:</b>	<input type="checkbox"/> Military	<input type="checkbox"/> Private for profit	<input type="checkbox"/> Private not for profit
<input type="checkbox"/> Municipal	<input type="checkbox"/> County	<input checked="" type="checkbox"/> State	<input type="checkbox"/> Federal
<b>Facility Type:</b>	<input checked="" type="checkbox"/> Jail	<input type="checkbox"/> Prison	

**Facility Mission:** The Norfolk Sheriff's Office serves the citizens of Norfolk County and the Commonwealth of Massachusetts. We do this by enhancing public safety through the operation of a safe, secure, progressive, and humane correctional facility that establishes structure and accountability for offenders and focuses on re-entry programs and community based programs that promote crime prevention, job readiness, citizen awareness, education, youth development, drug addiction prevention, elderly assistance, and law enforcement support. These efforts are accomplished by a highly trained and dedicated workforce and through collaborative agreements with public and private stakeholders.

**Facility Website with PREA Information:** [norfolksheriff.com/](http://norfolksheriff.com/)

### Warden/Superintendent

<b>Name:</b> Peter Perroncello	<b>Title:</b> Superintendent
<b>Email:</b> pperroncello@norfolksheriffma.org	<b>Telephone:</b> (781) 751-3503

### Facility PREA Compliance Manager

<b>Name:</b> Peggy Hughes	<b>Title:</b> Asst. Deputy Superintendent of Accreditation
<b>Email:</b> phughes@norfolksheriffma.org	<b>Telephone:</b> (781) 751-3361

### Facility Health Service Administrator

<b>Name:</b> Tara Flynn	<b>Title:</b> Asst. Deputy Superintendent of Health Services
<b>Email:</b> tflynn@norfolksheriffma.org	<b>Telephone:</b> Click or tap here to enter text.

### Facility Characteristics

Designated Facility Capacity: 302		Current Population of Facility: 441		
Number of inmates admitted to facility during the past 12 months				3412
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for 30 days or more:				1823
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for 72 hours or more:				2112
Number of inmates on date of audit who were admitted to facility prior to August 20, 2012:				0
Age Range of Population: 18-80	Youthful Inmates Under 18: 0	Adults: 472		
Are youthful inmates housed separately from the adult population?		<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> NA
Number of youthful inmates housed at this facility during the past 12 months:				0
Average length of stay or time under supervision:				140 days
Facility security level/inmate custody levels:				Maximum, medium, minimum, pre-release
Number of staff currently employed by the facility who may have contact with inmates:				240
Number of staff hired by the facility during the past 12 months who may have contact with inmates:				32
Number of contracts in the past 12 months for services with contractors who may have contact with inmates:				161
<b>Physical Plant</b>				
Number of Buildings: 2		Number of Single Cell Housing Units: 1		
Number of Multiple Occupancy Cell Housing Units:		9		
Number of Open Bay/Dorm Housing Units:		1		
Number of Segregation Cells (Administrative and Disciplinary):		58		
Description of any video or electronic monitoring technology (including any relevant information about where cameras are placed, where the control room is, retention of video, etc.):				
There are 210 cameras monitoring operations inside the facility, 36 cameras monitoring operations outside the facility (recreation yards).				
<b>Medical</b>				
Type of Medical Facility:		Ambulatory Clinic		
Forensic sexual assault medical exams are conducted at:		Newton-Wellesley Hospital		
<b>Other</b>				
Number of volunteers and individual contractors, who may have contact with inmates, currently authorized to enter the facility:				159
Number of investigators the agency currently employs to investigate allegations of sexual abuse:				6

# Audit Findings

## Audit Narrative

On September 26-28, 2018, an audit was conducted at the Norfolk Sherriff's Office and Correctional Division to determine compliance with the Prison Rape Elimination Act standards finalized August 2012. The auditor was present at the facility from 11:30am to 6:00pm Wednesday, 6:00am to 6:00pm Thursday, and 8:00am to 3:30pm Friday. The facility was previously audited in September 2015 and found to be in compliance with all standards.

Documents reviewed for this audit received three weeks prior to the audit included the Pre-audit questionnaire, policies, contracts, accreditation reports, training curriculums, staff training records, contract/volunteer training records, logbooks, meeting minutes, Memorandum of Understanding (MOU), and sexual abuse & harassment data. While on-site, additional random documents were requested or reviewed and are noted throughout the report. This included a log of incidents from 9/1/2017 to 8/31/2018 and a list of grievances filed for the same time period. Camera monitoring operations were also examined.

A tentative schedule was sent to the facility five days prior to the audit. On the first day of the audit, rosters of inmates and staff were provided to the auditor.

A brief informal meeting was held with the PREA Coordinator and PREA Manager and the auditor. A list of random selection of staff as well as specialized staff was developed. It was noted that interviews need to be in a private setting. In addition, a list of inmates who required interviews based on the targeted areas was developed.

A complete tour of the facility was conducted on September 26, 2018. The following areas and operations were visited and observed: inmate living areas, medical operations, booking operations/holding cells, laundry services, library/education areas, chapel, visiting room and food service operations.

Formal interviews conducted with the following: Sheriff, Superintendent, PREA compliance manager and PREA coordinator, medical staff (Health Services Administrator, Mental Health Director), Human Resources, seven corrections officers from all areas of the jail and each shift ( 7-3 shift, 3-11 shift, 11-7 shift – to include booking staff, restrictive housing staff and two new staff with less than one year of service), supervisors from each shift (one lieutenant, two sergeants), two investigators, one case manager (who completes risk assessments), one case manager (who monitors for retaliation), program director, two additional case managers and one contractual staff. No volunteers were present during the audit times that could be interviewed.

A total of 28 inmates were selected to be interviewed. No youthful offenders are housed at this facility. No inmates self identified as transgender nor blind or hard of hearing inmates were housed at the facility at the time of the audit. Targeted inmate interviews included the following:

- one with limited English, interpreter not required
- one self admitted homosexual
- one who initiated a sexual harassment complaint
- two who self reported as having prior victimization

one who wrote a letter in response to the posters

one with cognitive disability

two inmates declined the interview

Inmate interviews were held in the private program conference room. One to two random inmates as well as targeted inmates were interviewed from each housing area.

Administrative Investigations are conducted by the Norfolk County Sheriff's; criminal investigations are completed by the Norfolk District Attorney's Office who delegates to their assigned state police cadre through a Memorandum of Understanding. Seven completed administrative investigations from the previous 12 months were reviewed. The facility reported there was one pending criminal investigation, three pending administrative investigations. A review of the completed investigations revealed the following:

- Five staff/inmate abuse allegations
- One retaliation investigation
- One staff/inmate harassment
- One inmate/inmate harassment
- Two were initiated from a grievance

The auditor was allowed free access to all areas of the facility, access to interview inmates and staff selected randomly and intentionally, and to see any documentation requested. Posters were visible throughout the facility announcing the audit. Staff reported the posting of the posters six weeks prior to the audit; five randomly questioned inmates questioned about the poster confirmed that posters announcing the audit were in each unit and visible to the inmate. An email was sent to Prison Legal Services informing them of the audit September 1, 2018.

## Facility Characteristics

Norfolk Sheriff's Office is located in central Massachusetts. It is a jail facility that houses offenders consisting of pre-trial, pre-release, maximum, medium and minimum custody (sentenced up to 30 months), with 240 staff. The average population is 520 males only. There is a special management housing area that can hold 58 inmates. There is a minimum custody housing outside the main facility that had 20 inmates. No females are housed at this facility. No youthful offenders are housed here. Contract services provide a variety of programming at this facility. The facility has two buildings, nine multiple occupancy cell housing units, one dormitory style unit and one single cell housing unit.

All cells had toilets and sinks except the dormitory unit. In this unit, the bathroom was located to the left of the officers' podium allowing good visibility for security but not violating privacy. Showers in the other units had privacy doors that also provided sufficient visibility for security.

The facility operates by zones affording additional options for separation of inmates when warranted. There are 15 beds located in the medical units to address special needs, including placement of a victim, if needed, instead of using restrictive housing.

## Summary of Audit Findings

### Number of Standards Exceeded:

## §115.41 – Screening for Risk of Victimization and Abusiveness

### **Number of Standards Met:**

§115.11 - Zero tolerance of sexual abuse and sexual harassment; PREA coordinator §115.12 - Contracting with other entities for the confinement of inmates §115.13 – Supervision and Monitoring §115.14 – Youthful Inmates §115.15 – Limits to Cross-Gender Viewing and Searches §115.16 – Inmates with Disabilities and Inmates who are Limited English Proficient §115.17 – Hiring and Promotion Decisions §115.18 – Upgrades to Facilities and Technology §115.21 – Evidence Protocol and Forensic Medical Examinations §115.22 – Policies to Ensure Referrals of Allegations for Investigations §115.31 – Employee Training §115.32 – Volunteer and Contractor Training §115.33 – Inmate Education §115.34 – Specialized Training: Investigations §115.35 – Specialized training: Medical and mental health care §115.42 – Use of Screening Information §115.43 – Protective Custody §115.51 – Inmate Reporting §115.52 – Exhaustion of Administrative Remedies §115.53 – Inmate Access to Outside Confidential Support Services §115.54 – Third-Party Reporting §115.61 – Staff and Agency Reporting Duties §115.62 – Agency Protection Duties §115.63 – Reporting to Other Confinement Facilities §115.64 – Staff First Responder Duties §115.65 – Coordinated Response §115.66 – Preservation of ability to protect inmates from contact with abusers §115.67 – Agency protection against retaliation §115.68 – Post-Allegation Protective Custody §115.71 – Criminal and Administrative Agency Investigations §115.72 – Evidentiary Standard for Administrative Investigations §115.73 – Reporting to Inmate §115.76 – Disciplinary sanctions for staff §115.77 – Corrective action for contractors and volunteers §115.78 – Disciplinary sanctions for inmates §115.81 – Medical and mental health screenings; history of sexual abuse §115.82 – Access to emergency medical and mental health services §115.83 – Ongoing medical and mental health care for sexual abuse victims and abusers §115.86 – Sexual abuse incident reviews §115.87 – Data Collection §115.88 – Data Review □ for Corrective Action §115.89 – Data Storage, □ Publication, and Destruction □ §115.401 – Frequency & Scope of Audits §115.403

### **Number of Standards Not Met: 0**

### **Summary of Corrective Action (if any)**

Corrective action was required and completed for the following:

#### 115.33

Inmates arriving at the facility pending trial were not attending orientation and therefore not receiving follow up information for PREA. The facility has provided documentation showing that this orientation will commence along with documentation that it has occurred and is therefore considered compliant.

#### 115.51

The facility was using the services of the Boston Area Rape Crisis Center (BARCC) as the outside source for reporting, however, confidentiality laws do not allow them to report. The Prosecuting Attorney's has agreed in writing to be the outside source for reporting and will report all notifications to the facility immediately. The inmate handbook has been updated to reflect this change.

## 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*)

(a) The following policy excerpts demonstrate the facility's commitment to the requirements of zero tolerance for sexual abuse and harassment as well as an outline for preventing, detecting, and responding to allegations of sexual harassment and abuse.

#### 239.01 POLICY STATEMENT

The Norfolk Sheriff's Office (NSO) shall provide a zero tolerance policy toward all forms of

sexual harassment while promoting and maintaining a safe working environment which is free from sexual harassment.

#### 518.01 POLICY STATEMENT

It is the policy of the Norfolk Sheriff's Office (NSO) to be in accordance with the Prison Rape Elimination Act of 2003 which prohibits staff, contractors, volunteers, or interns from sexually abusing and/or sexual harassing inmate/detainees (hereinafter referred to as offenders) and that prohibits offenders from sexually abusing other offenders while in our custody. It is a fundamental objective of the NSO and an integral part of all staff to prevent and report assaults and/or sexual harassment as they occur.

The NSO is committed to a Zero Tolerance policy and will continue to comply with the prevention, detection, reduction, and punishment of rape consistent with all provisions of the federally mandated Prison Rape Elimination Act, including any and all standards ultimately promulgated. The NSO will monitor developments in this legislation and direct further action by the Sheriff's Office as appropriate.

It is the policy of the Norfolk Sheriff's Office (NSO) to be in accordance with the Prison Rape Elimination Act of 2003 which prohibits staff, contractors, volunteers, or interns from sexually abusing and/or sexual harassing inmate/detainees (hereinafter referred to as offenders) and that prohibits offenders from sexually abusing other offenders while in our custody. It is a fundamental objective of the NSO and an integral part of all staff to prevent and report assaults and/or sexual harassment as they occur.

All intentional acts of sexually abusive behavior or sexual intimacy between and offender and a Sheriff's Office staff, contractors, volunteers or interns, or between an offender and another offender regardless of consensual status, are prohibited . . .

All intentional acts of sexually abusive behavior or sexual intimacy between and offender and a Sheriff's Office staff, contractors, volunteers or interns, or between an offender and another offender regardless of consensual status, are prohibited and the perpetrator shall be subject to administrative, criminal, and/or disciplinary sanctions. The NSO is committed to investigation, disciplining, and referring for prosecution, NSO staff, contractors, volunteers, interns, and offenders who engage in sexually abusive behavior.

#### 518.08 Goals

- To take steps to minimize the instances of sexual assault with the goal of eliminating them altogether;
- increase the timely reporting of incidents by Sheriff's Office staff;
- develop a process to identify and manage offenders who are potentially at risk;
- provide ongoing education to Sheriff's Office staff, contractors, volunteers, and interns regarding their responsibility toward prevention, intervention, and reporting when incidents are observed or made known to them;
- provide effective and ongoing orientation to offenders regarding how to avoid victimization and how to report incidents of sexual abuse;
- provide for a thorough investigation of reported incidents and certain discipline and/or prosecution of perpetrators when appropriate;
- provide effective short and long term treatment for victims of sexually abusive behavior; and
- collect data in accordance with federal law and to better identify potential predators and victims.



#### 518.16 Prevention

- All NSO staff is responsible for the prevention of sexually abusive behavior perpetrated by staff on offenders or by offenders on offenders.
- The Command Staff, Captains, Lieutenants, and Sergeants shall conduct and document unannounced rounds to identify and deter sexual misconduct, sexual abuse, and sexual harassment on all three (3) shifts.
- Within twenty-four (24) hours of arrival, offenders shall receive and sign for a copy of the offender rules and regulations which contains PREA information. Offenders shall be responsible for familiarizing themselves with the rules and regulations and are also responsible for reporting any allegations to staff in a timely manner.
- The NSO shall be responsible for planning and implementing measures to prevent sexually abusive behavior and will strive to create an environment free from sexual harassment and sexual abuse.
- Offenders identified through self-reports including but not limited to the PREA Screening Tool or medical/mental health reports as having a history of sexual abuse victimization and/or at risk of being a victim of offender sexual abuse shall be referred to a mental health clinician for assessment, monitoring, and counseling. Such reports will be kept confidential and a confidential incident report shall be filed with the Special Sheriff/Superintendent.
- Upon learning that an offender has been identified as having been a victim or a predator or is at risk for such, the PREA Coordinator shall communicate with the classification division so that appropriate housing decisions can be made to keep the offenders safe.
- The Special Sheriff/Superintendent shall conduct an annual PREA assessment which will consist of staff and offender interviews to determine how operational practice can be improved upon.
- A vulnerability assessment of the facility's physical plant (including "blind-spots" or areas where staff or offenders may be isolated) shall be conducted as directed by the Special Sheriff/Superintendent.
- The NSO shall develop, document and make its best efforts to comply on a regular basis with a staffing plan in accordance with CSD 203. Post Analysis

(b) The organization chart for the Norfolk Sheriff's Office demonstrates that the Assistant Deputy Superintendent/PREA Manager and Classification Director/PREA Coordinator, reports directly to the Superintendent. A memo dated May 31, 2017 from the Sheriff appointing the PREA Coordinator as the previous Coordinator had retired. She is given authority to work directly with the Superintendent, security, medical/mental health staff and internal investigators on any PREA issues that arise.

(c) The following policy excerpts support that this agency has appointed a PREA Coordinator and PREA Compliance Manager.

518.09 General Policy. The NSO shall appoint a PREA Coordinator and a PREA Compliance Manager.

##### 518.09.1 DEFINITIONS

PREA Compliance Manager - an employee designated by the Sheriff with sufficient time and authority to coordinate the NSO efforts to comply with the PREA standards.

The interview with the PREA Coordinator supports that she had sufficient time and authority to address all matters regarding PREA. Her role as the Classification Director intertwines with PREA matters including intake, housing and programming of inmates. Her knowledge of the inmate population was extensive as demonstrated throughout the audit during the tour and with observation of interactions with the inmate population.

Finding of compliance is based on the following:

Interviews with the Sheriff, Superintendent, PREA Manager and PREA Coordinator 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 with the inmate population showed that the PREA Coordinator is keenly involved with the overall operations of the jail. Policies clearly support compliance with the standard as quoted earlier.

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

### 115.12 (a)

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

### 115.12 (b)

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

### Auditor Overall Compliance Determination

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

#### (a) 518.14 Treatment and Services

The NSO shall include in any new contracts or contract renewals for the confinement of its offenders with private agencies or other entities, including other government agencies, the entity's obligation to adopt and comply with the PREA standards. Any new contracts or contract renewal shall provide for contract monitoring to ensure that the contractor is complying with PREA standards.

The facility contracts for eight (8) beds with the Gavin Foundation to provide residential services for pre-release offenders. The contract states, Vender agrees to comply with all applicable state and federal laws with regard to the federally mandated Prison Rape Elimination Act of 2003 (PREA), July 1, 2018.

(b) The PREA Coordinator/Classification Director is responsible for monitoring the contract with Gavin Foundation.

Finding of compliance is based on the following: Interview with the PREA Coordinator which confirmed she is responsible for the monitoring of the contract and review of the current contract.

## Standard 115.13: Supervision and monitoring

### 115.13 (a)

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

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

#### 115.13 (b)

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

#### 115.13 (c)

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

#### 115.13 (d)

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

#### Auditor Overall Compliance Determination

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

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

(a) The following policies support compliance with this section:

518.16 Prevention The NSO shall develop, document and make its best efforts to comply on a regular basis with a staffing plan in accordance with CSD 203. Post Analysis

203.11 PREA Staffing factors

The NSO shall develop, document and make its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing, and where applicable, video monitoring, to protect offenders against sexual abuse. In calculating adequate staffing levels and determining the need for video monitoring, the NSO shall take into consideration:

The NSO shall develop, document and make its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing, and where applicable, video monitoring, to protect offenders against sexual abuse. In calculating adequate staffing levels and determining the need for video monitoring, the NSO shall take into consideration:

- generally accepted detention and correctional practices;
- any judicial findings of inadequacy;
- any findings of inadequacy from Federal investigative agencies;
- any findings of inadequacy from internal or external oversight bodies;
- all components of the Correctional Center's physical plant (including "blind spots" or areas where staff or offenders may be isolated);
- the composition of the offender population;
- the number and placement of supervisory staff;
- facility programs occurring on a particular shift;
- any applicable state or local laws, regulations, or standards;
- the prevalence of substantiated and unsubstantiated incidents of sexual abuse; and
- any other relevant factors.

(b) 203.11 PREA Staffing factors

In circumstances where the staffing plan is not complied with, the facility shall document and justify all deviations from the plan. Random selection of 12 rosters on the 3rd of each month for the past 6 months supports no deviations from the plan.

(c) 203.11 PREA Staffing factors states,

Whenever necessary, but no less frequently than once each year, for the NSO, in consultation with the PREA coordinator required by PREA standard 115.11, the facility shall assess, determine, and document whether adjustments are needed to:

- the staffing plan established pursuant to paragraph (1) of this section;
- the Correctional Center's deployment of video monitoring systems and other monitoring technologies; and the resources the NSO has available to commit to ensure adherence to the staffing plan.

The facility has provided documentation that indicates the last Post Analysis was conducted in September 2018 with the Superintendent and the PREA Coordinator. All required elements were addressed. In 2015, the facility consulted with the National Institute of Corrections for a review of staffing and has implemented the recommendations from that study. There are no judicial findings of inadequacy, no findings from federal investigative agencies. Inter audit reports conducted by the Policy and Compliance Unit, Massachusetts Department of Correction showed excellent results; no non-compliance related to PREA standards. The facility has no obvious blind spots, camera coverage is excellent. The physical plant has remained the same. The population is steadily declining. Facility programming is excellent; programming staff report they are satisfied with custody coverage while

programs are conducted. There are no specific local, state laws or regulations that have bearing on staffing patterns. No substantiated incidents of sexual abuse have occurred in the previous 12 months. In other words, no adjustments were needed to the staffing plan or video monitoring based on that review.

(d) Policy excerpts noted below requires supervisory staff to conduct unannounced rounds on all shifts. Staff are prohibited from alerting other staff members of these rounds.

**203.11 PREA Staffing factors**

Intermediate-level or higher-level supervisors shall conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment. Such policy and practice shall be implemented on all three (3) shifts. The NSO shall also implement a policy to prohibit 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.

**518.16 Prevention**

The Command Staff, Captains, Lieutenants, and Sergeants shall conduct and document unannounced rounds to identify and deter sexual misconduct, sexual abuse, and sexual harassment on all three (3) shifts.

**203.11 PREA Staffing factors**

Intermediate-level or higher-level supervisors shall conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment. Such policy and practice shall be implemented on all three (3) shifts. The NSO shall also implement a policy to prohibit 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.

Documentation was provided demonstrating unannounced rounds. The auditor requested additional requested documentation to demonstrate compliance with unannounced rounds for August 1, 2018; it was provided and demonstrated compliance. The auditor requested to see video evidence for August 29, 2018. It was reviewed demonstrating that unannounced rounds were conducted in all areas on all shifts for that date. Cameras showed that the officers were not aware of the oncoming presence of the supervisor. Three officers were randomly asked about unannounced rounds; they confirmed that they are not allowed to alert other staff and have not been alerted when the supervisor is making rounds.

Finding of compliance is based on the following: Policy excerpts supporting compliance, interviews with the Superintendent, all custody supervisory interviews, observation of randomly requested shift rosters, observation of video evidence all demonstrated compliance with the requirements of this standard.

**Standard 115.14: Youthful inmates**

**115.14 (a)**

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

**115.14 (b)**



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

#### 115.14 (c)

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

#### Auditor Overall Compliance Determination

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

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 or heard anything to dispute that no youths are housed at this facility.

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

##### 115.15 (a)

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

##### 115.15 (b)

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

#### 115.15 (c)

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

#### 115.15 (d)

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

#### 115.15 (e)

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

#### 115.15 (f)

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

### Auditor Overall Compliance Determination



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

### Instructions for Overall Compliance Determination Narrative

(a) The following policy excerpts support compliance with subpart (a)

#### 506.09 FACILITY SEARCH PLAN

NSO Correctional Staff shall not conduct cross-gender strip searches or cross-gender visual body cavity searches (meaning a search of the anal or genital opening) except in exigent circumstances, including but not limited to emergency situations where a delay would mean the likely loss of contraband, or when performed by medical practitioners. When Correctional staff conducts a strip search of an offender of the opposite sex the Correctional Staff shall document the reasons for conducting the cross-gender visual body cavity search in the search log and on an incident report.

#### 518.09 GENERAL Policy

The NSO shall not conduct cross-gender strip searches, pat searches, or body cavity searches except in exigent circumstances or when performed by medical practitioners. Body cavity searches shall not be conducted without approval of the Special Sheriff/Superintendent and a valid search warrant.

A review of incident report logs support that opposite gender searches, pat search or strip/visual search are not conducted at this facility. Random interviews with two female officers support that they have not ever had to conduct a strip/visual search of males during the performance of their duties.

(b) This is not applicable to this facility.

(c) Policy excerpts below support compliance with subpart (c)

#### 506.09 FACILITY SEARCH PLAN

##### Pat Searches (924.06)

Cross-gender pat searches shall only be conducted in exigent circumstances and every effort shall be made to have pat searches done by an Officer of the same gender as the offender. Cross gender pat searches of offenders shall be conducted in relative privacy with as much dignity as possible. All cross-gender pat searches of female offenders shall be documented.

#### 518.09 GENERAL Policy

The NSO shall not conduct cross-gender strip searches, pat searches, or body cavity searches except in exigent circumstances or when performed by medical practitioners. Body cavity searches shall not be conducted without approval of the Special Sheriff/Superintendent and a valid search warrant.

#### 506.09 FACILITY SEARCH PLAN

##### Strip Search

NSO Correctional Staff shall not conduct cross-gender strip searches or cross-gender visual body cavity searches (meaning a search of the anal or genital opening) except in exigent

circumstances, including but not limited to emergency situations where a delay would mean the likely loss of contraband, or when performed by medical practitioners. When Correctional staff conducts a strip search of an offender of the opposite sex the Correctional Staff shall document the reasons for conducting the cross-gender visual body cavity search in the search log and on an incident report.

(d) The following policy excerpt supports compliance with this standard.

**GENERAL Policy**

Offenders 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 or when such viewing is incidental to routine cell / security checks. Staff monitoring via the camera system shall also abide by this part of the policy. Gender announcements shall be made in accordance with CSD 512, Post Orders and Post Position.

In addition, below is the excerpt from the Module Officer Post Order:

Ensure that a gender announcement is made when a female staff member enters a housing unit that does not already have a female staff member present. This announcement shall be: "female on the unit". This announcement is required for both custody and non-custody staff and must be logged.

(e) As stated in the policies below, transgender or intersex offenders are not searched or physically examined to determine genital status.

**506.09 FACILITY SEARCH PLAN**

The NSO shall not search or physically examine a transgender or intersex offender for the sole purpose of determining the offender's genital status. If the offender's genital status is unknown, it may be determined during conversation with the offender, 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.

**518.09 GENERAL POLICY**

The NSO shall not physically examine a transgender or intersex offender for the sole purpose of determining the offender'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.

(f) Policy supports compliance regarding this requirement.

**216.14 Correctional Officers training**

Corrections Officers shall receive training in how to conduct cross-gender pat-down searches, and searches of transgender and intersex offenders, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs.

Review of the training curriculum regarding pat down searches provides staff with specific techniques to help ensure the process is the least intrusive and respectful. Training records provided demonstrate that 138 staff have received this training in 2018. All staff interviews support knowledge and compliance of the techniques provided in training.

The Pre Audit Questionnaire reports that there have been no instances of cross-gender strip or visual body cavity searches in the previous 12 months. The auditor found no reason to dispute this fact during the audit process.

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 and overall observations made during the audit process.

## **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*)

(a) The following policy excerpt supports compliance with this standard:

108.13 PREA Prevention planning: Offender with disabilities and offenders who are limited English Proficient The NSO shall take appropriate steps to ensure that offenders with disabilities (including, for example, offenders who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric or speech disabilities), have an equal opportunity to participate in or benefit from all aspects of the NSO's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. Such steps shall include, when necessary to ensure effective communication with offenders who are deaf or hard of hearing, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary. In addition, the NSO shall ensure that written materials are provided in formats or through methods that ensure effective

communication with offenders with disabilities, including offenders who have intellectual disabilities, limited reading skills, or who are blind or have low vision. The NSO is not required to take actions that it can demonstrate would result in a fundamental alteration of a service, program, or activity, or in undue financial or administrative burdens, as those terms are used in regulations promulgated under Title II of the Americans with Disabilities Act, 28 CFR 35.164.

The facility has an Americans With Disabilities Act (ADA) coordinator who addresses all specific needs of inmates which are identified in the intake process or subsequently thereafter.

(b) 108.13 PREA Prevention planning states,

Offender with disabilities and offenders who are limited English Proficient

The NSO shall 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 offenders who are limited English proficient, including steps to provide interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using necessary specialized vocabulary.

The facility can access a language line to assist with limited English speaking inmates in addition to having staff who are bilingual..

(c) 108.13 PREA Prevention planning: Offender with disabilities and offenders who are limited English Proficient

The NSO shall not rely on offender interpreters, offender readers, or other types of offender assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the offender's safety, the performance of first responder duties under 115.64 or the investigation of the offender's allegations.

The Pre Audit Questionnaire 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).

Finding of compliance is based on the following: Review of the policies, staffing plan, and random selection of rosters which support compliance. Interviews with staff such as corrections officers, supervisors, Program Director, 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 115.17: Hiring and promotion decisions**

**All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

### **115.17 (a)**

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

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

#### 115.17 (b)

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

#### 115.17 (c)

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

#### 115.17 (d)

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

#### 115.17 (e)

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

#### 115.17 (f)

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

#### 115.17 (g)

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

#### 115.17 (h)

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

#### Auditor Overall Compliance Determination

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

#### (a) 201.08 Employment Eligibility Requirements

The NSO shall not hire or promote anyone who may have contact with offenders, and shall not enlist the services of any contractor who may have contact with offenders, 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); 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 been civilly or administratively adjudicated to have engaged in the activity described in paragraph (5) (b) of this section.

The application process specifically asks all applicants to answer these questions.

#### (b) 201.08 Employment Eligibility Requirements

The NSO 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 offenders.

Policy supports the requirement of the standard. Interview with the Human Resource Director indicates that they had not had a candidate with a history of sexual harassment which required consideration.

(c) 201.08 Employment Eligibility Requirements

Before hiring new employees who may have contact with offenders, the NSO shall: perform a criminal background records check; and 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 auditor requested background checks for all employees with the last name beginning with D, H, M, T. This yielded 29 records which reflected background checks through NCIC, Sexual Offender Registration Investigation data base (SORI) and motor vehicles. Many of these were new employees seeking summer employment, new corrections officers and routine background checks.

(d) 201.08 Employment Eligibility Requirements

The NSO shall also perform a criminal background records check before enlisting the services of any contractor who may have contact with offenders.

A specific background check was requested for a mental health contractor who has provided services for several years which demonstrated compliance.

(e) 201.08 Employment Eligibility Requirements

The NSO shall either conduct a criminal background record check at least every five (5) years of current employees and contractors who may have contact with offenders or have in place a system for otherwise capturing such information for current employees.

Documentation showing background checks of status employees for 2018 and 2017 was provided to the auditor demonstrating compliance.

(f) 201.08 Employment Eligibility Requirements

The NSO shall ask all applicants, employees, and contractors who may have contact with offenders directly about previous misconduct described in paragraph (5) 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.

As stated, this is included in the application process on the applicant forms.

(g) 201.08 Employment Eligibility Requirements

The NSO shall not hire or promote anyone who may have contact with offenders, and shall not enlist the services of any contractor who may have contact with offenders, 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); 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 been civilly or administratively adjudicated to have engaged in the activity described in paragraph (5) (b) of this section.



The NSO shall also impose upon employees and contractors 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.

A continuing duty to report is noted in the Employee Manual. A request for signature sheets for the Employee Manual for five randomly selected employees demonstrated compliance.

(h) Per the interview with the Human Resource Director, 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.

The facility reports that 32 new staff was hired in the past 12 months. No background checks revealed prior sexual abuse or sexual harassment.

Finding of compliance is based on the following: Interviews with the PREA Coordinator, Sheriff, Superintendent, Human Resource Director and new officers support a compliance finding with the requirements of this standard. As noted, randomly requested documentation provided supported a finding of compliance as well.

## 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*)

Policy states the following:

(a) 740.10 PREA Prevention Planning: Upgrades to facilities and technologies

When designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, the agency shall consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect offenders from sexual abuse.

(b) 740.10 PREA Prevention Planning: Upgrades to facilities and technologies

When installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the agency shall consider how such technology may enhance the agency's ability to protect offenders from sexual abuse.

There have been no upgrades to the facility in the past 12 months. Additional cameras have been placed on the perimeter since the previous audit.

## RESPONSIVE PLANNING

### Standard 115.21: Evidence protocol and forensic medical examinations

#### 115.21 (a)

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

#### 115.21 (b)

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

#### 115.21 (c)

- Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?  Yes  No
- Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?  Yes  No

- If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?  Yes  No
- Has the agency documented its efforts to provide SAFEs or SANEs?  Yes  No

#### 115.21 (d)

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

#### 115.21 (e)

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

#### 115.21 (f)

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

#### 115.21 (g)

- Auditor is not required to audit this provision.

#### 115.21 (h)

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

#### Auditor Overall Compliance Determination

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

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

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

(a) 200.08 Administrative Investigative Procedures & Guidelines

PREA Investigation states, The facility shall ensure that a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecution.

(b) Investigators were trained in conjunction with the Massachusetts Department of Corrections Sexual Assault Investigation Training. Evidence Protocol and Forensic Medical Examinations are based from the Sexual Assault Investigator Certification Curriculum, Municipal Police Training Committee.

(c) The policy excerpts below support compliance with this section:

200.08 Administrative Investigative Procedures & Guidelines PREA Investigation

In accordance with PREA standards, if a complaint is filed by an offender, staff member, or any other entity including an anonymous report, the following process must be adhered to; The victim of sexual abuse (offender/staff) shall be offered access to forensic medical exams off site, without financial cost, where evidentiary or medically appropriate.

Such exams shall be performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANES).

If a SAFEs or SANES cannot be made available, the examination shall be performed by other qualified medical practitioners and the facility shall document its efforts to provide SAFEs or SANES for the examination.

If a SAFEs or SANES cannot be made available, the examination shall be performed by other qualified medical practitioners and the facility shall document its efforts to provide SAFEs or SANES for the examination.

The Pre Audit Questionnaire reports that there have been no instances where an offender required a SANE exam in the previous 12 months. For the pending criminal investigation, it was offered and declined by the victim. The auditor found no reason to dispute this fact during the audit process.

(d) The excerpt from policy below supports compliance with the requirements of subpart (d) indicating the facility will attempt to make available a victim advocate.

200.08 Administrative Investigative Procedures & Guidelines

PREA Investigation

In accordance with PREA standards, if a complaint is filed by an offender, staff member, or any other entity including an anonymous report, the following process must be adhered to;

The NSO shall attempt to make available to the victim a victim advocate from a rape crisis center. If a rape crisis center is not available to provide victim advocate services, the NSO shall make available to provide these services a qualified staff member from a community-based organization, or a qualified NSO staff member. All efforts to secure services from a rape crisis center shall be documented. For the purpose of this standard, a rape crisis center refers to an entity that provides intervention and related assistance, such as service specified in 42 U.S.C. 14043g(b)(2)(C), to victims of sexual assault of all ages. The agency may utilize a rape crisis center that is part of a governmental unit so long as the center is not part of the criminal justice system, (such as a law enforcement agency) and offers a comparable level of confidentiality as

a nongovernmental entity the provide similar victim services.

In addition, the facility has entered into a contract with the Boston Area Rape Crisis Center (BARCC) to provide the following:

- Appropriately trained staff available as needed 24 hours a day for crisis intervention and support following an allegation of sexual abuse, including on-site at the hospital during a SANE exam.
- The vendor must maintain confidentiality
- Vendor will possess the professional certifications/licenses commensurate to ensure quality deliver of all services to be provided.

(e) Policy requires that if needed, the victim advocate will be with the victim at the hospital.

200.08 Administrative Investigative Procedures & Guidelines PREA Investigation

As requested by the victim, the victim advocate, qualified NSO staff member, or qualified community-based organization staff member shall accompany and support the victim through the forensic medical examination process and investigatory interviews and shall provide emotional support, crisis intervention, information, and referrals.

And, as noted, per the contract with BARCC, this service is being provided.

(f) In addition to the policy excerpt below, there is a Memorandum of Understanding (MOU) with the Norfolk District Attorney's Officer for the reporting and investigation of crimes committed within Norfolk County Correctional Center (NCCC).

200.08 Administrative Investigative Procedures & Guidelines

PREA Investigation

In accordance with PREA standards, if a complaint is filed by an offender, staff member, or any other entity including an anonymous report, the following process must be adhered to;

To the extent the NSO itself is not responsible for investigating allegations of sexual abuse, the NSO shall request that the investigating agency follow the requirements outlined in paragraphs (vi) through (xi) in this section.

Finding of compliance is based on the following: Policy excerpts, review of investigations and interviews with the two investigators support compliance. A PREA kit is available to help process evidence appropriately. Staff interviews supported that staff were aware of the requirements and actions needed to preserve evidence. An interview with the BARCC Project Coordinator verified that his staffs are provided 40 hours of training before providing services to the victim. The one pending investigation supported that a victim will be sent to the local hospital for a SANE exam when needed.

## **Standard 115.22: Policies to ensure referrals of allegations for investigations**

### **115.22 (a)**

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

### **115.22 (b)**

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

#### 115.22 (c)

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

#### 115.22 (d)

- Auditor is not required to audit this provision.

#### 115.22 (e)

- Auditor is not required to audit this provision.

### Auditor Overall Compliance Determination

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

(a) Policy 200.08 Administrative Investigative Procedures & Guidelines PREA Investigation states, In accordance with PREA standards, if a complaint is filed by an offender, staff member, or any other entity including an anonymous report, the following process must be adhered to; The NSO shall ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment.

Review of policy, investigations as well as interviews with the staff support that any suspicion or knowledge of sexual abuse, sexual harassment, neglect, or retaliation will be reported to the supervisors through to the shift commander to the investigators.

(b) 200.08 Administrative Investigative Procedures & Guidelines PREA Investigation:

In accordance with PREA standards, if a complaint is filed by an offender, staff member, or any other entity including an anonymous report, the following process must be adhered to; The NSO shall ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with legal authority to conduct criminal investigations, unless the

allegation does not involve potentially criminal behavior. The NSO shall document all such referrals.

See comments above.

The complete policy can be viewed on the website at <https://norfolk-sheriff.com/images/docs/2-230-Inmate-Sexual-Abuse-Harassment-PREA-rev0418.pdf>

(c) As stated, there is a Memorandum of Understanding (MOU) with the Norfolk District Attorney's Officer for the reporting and investigation of crimes committed within Norfolk County Correctional Center (NCCC).

Finding of compliance is based on the following: Police, MOU with Norfolk Prosecutor's office, interviews with staff and investigators, as well as review of the investigation all support a finding of compliance.

## 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*)

#### (a) The training plan addresses the following:

- Definitions of PREA
- Zero tolerance
- How to fulfill responsibilities regarding sexual abuse, sexual harassment and all PREA-related incident
- Reporting procedures
- Dynamics of abuse and harassment in confinement



- Common reactions of abuse victims
- Tools to detect and respond to abuse
- Avoidance of inappropriate relationships
- Inter personal skills with inmates including non-gender conforming inmates
- Relevant laws

In addition, the Risk Assessment process, gender announcements and the audit process is addressed in training.

In addition the following policies ensure the required training occurs:

216.23 PREA Training

The NSO shall train all employees;

its zero-tolerance policy for sexual abuse and sexual harassment;

how to fulfill their responsibilities under NSO sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures;

offenders' right to be free from sexual abuse and sexual harassment;

the right of offenders 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 response to signed of threatened and actual sexual abuse;

how to avoid inappropriate relationships with offenders;

how to communicate effectively and professionally with offenders, including gay, transgender, or gender nonconforming offenders; and

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

and

518.18 Staff Training

All staff with offender contact shall be trained in the following:

the NSO's zero tolerance policy for sexual abuse and sexual harassment;

detection, prevention, reporting, and response to sexual abuse or sexual harassment;

offenders' rights to be free from sexual abuse and sexual harassment;

the rights of staff and offenders to be free from retaliation for reporting sexual abuse and /or sexual harassment;

the dynamics of sexual abuse and sexual harassment in confinement;

the common reactions of victims of sexual abuse and sexual harassment;

how to detect and respond to signs of threatened and actual sexual abuse;

how to avoid inappropriate relationships with offenders;

how to communicate effectively and professionally with offenders including LGBT offenders; and

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

(b) PREA Training states,

Such training shall be tailored to the gender of the offenders at the NSO.

This facility only houses male offenders. If a staff person transferred from a female facility, they would receive the PREA training before working in this facility.

(c) 216.23 PREA Training states,

The NSO shall provide each employee annual refresher training every two (2) years to ensure that they know the current sexual abuse and sexual harassment policies and procedures. In

years in which an employee does not receive refresher training, the NSO shall provide refresher information on current sexual abuse and sexual harassment policies. The NSO shall document, through employee signature or electronic verification that employees understand the training they have received.

Refresher information occurred with an announcement regarding the revised policy CSD 518 Prison Rape Elimination Act, which was read at roll call briefings. In addition, posters are visible throughout the facility.

- (d) 518.18 Staff Training and 216.23 PREA Training both state,  
The NSO shall document, through employee signature or electronic verification that employees understand the training they have received. Staff take a quiz after the training to support an understanding of the training.

Finding of compliance is based on the following:

Policies support that training will be conducted at least every two years with refresher information provided annually. The auditor requested copies of the training quiz; six copies were provided demonstrating compliance. The auditor requested documentation showing staff has been trained. A computerized document demonstrated that 172 status employees have received PREA training in 2018. Review of the training curriculum demonstrates that the required topics are addressed.

## 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*)

(a) The following excerpts from policy ensure volunteers and contractors are trained on their responsibilities to prevent, detect and respond appropriately to any allegations of sexual abuse and sexual harassment.

216.23 PREA Training 4. The NSO shall ensure that all volunteers and contractors who have contact with offenders have been trained on their responsibility under the NSO's sexual abuse and sexual harassment prevention, detection, and response policies and procedures.

485.09 Orientation and Training PREA Training:

The NSO shall ensure that all volunteers and contractors who have contact with offenders have been trained on their responsibility under the NSO's sexual abuse and sexual harassment prevention, detection, and response policies and procedures.

All volunteers receive an orientation. At that point, a packet is provided with the following documents:

- Cover letter
- Policy receipt form
- Information specific to contractors and volunteers regard their obligation

(b) 216.23 PREA Training:

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 offenders, but all volunteers and contractors who have contact with offenders shall be notified of the NSO's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report sexual abuse. The NSO shall maintain documentation confirming that volunteers and contractors understand the training they have received.

485.09 Orientation and Training PREA Training:

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 offenders, but all volunteers and contractors who have contact with offenders shall be notified of the NSO's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report sexual abuse.

(c) 216.23 PREA TRAINING

The NSO shall maintain documentation confirming that volunteers and contractors understand the training they have received.

Finding of compliance is based on the following: Two separate policies address the requirements which demonstrate that the facility is attentive to the needs of contractors as well as volunteers in informing and ensuring they understand their obligations under this law. Contractors, based on the level of service they provide, get either 40 hours of training before undertaking their assignment, 24 hours or 16 hours. Forty volunteer and contractor Acknowledgment forms were reviewed showing compliance. As noted earlier, the interview with the contractual staff demonstrated compliance as well as the follow-up documentation for a background check and training. In addition, one randomly requested acknowledgement form for a contractor who provides services one time a week was provided showing compliance with ensuring that contractors and volunteers are notified of the agency's policy and their obligations to report.

## Standard 115.33: Inmate education

### 115.33 (a)

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

### 115.33 (b)

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

### 115.33 (c)

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

### 115.33 (d)

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

**115.33 (e)**

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

**115.33 (f)**

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

**Auditor Overall Compliance Determination**

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

(a) The following policy excerpts demonstrate compliance with the requirements of this standard:

493.07 Correctional Center Offender Admissions:

Responsibilities of the Intake Caseworker

Offenders shall be informed of the NSO's zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment.

518.10 Offender Screening

Within twenty-four (24) hours of arrival, the NSO shall ensure that offenders receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment, sexual abuse/assault information including prevention/intervention, self-protection, reporting sexual abuse/assault, treatment, and counseling. All sexual abuse/assault information shall be communicated orally and in writing, in a language clearly understood by the offender. Offender's housing assignments shall be made according to potential vulnerabilities or tendencies of acting out with sexually aggressive behavior.

This is accomplished by providing the Inmate Handbook and a brochure explaining PREA in detail to the inmates upon arrival.

(b) 441.11 PREA education states,

Within thirty (30) days of intake, the NSO shall provide comprehensive education to offenders either in person or via video regarding their right to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents, and regarding the NSO policies and procedures for responding to such incidents.

Orientation is conducted every Friday. A representative from BARCC personally conducts orientation pertaining to PREA and the services provided by BARCC.

(c) This does not apply to this facility.

(d) 441.11 PREA education:

The NSO shall provide offender education in formats accessible to all offenders, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled as well as to offenders who have limited reading skills. Inmates are tested upon arrival for education levels. Educational needs would be identified at this time and addressed by the ADA Coordinator/education staff to ensure that those who have limited reading skills are education. All inmates are assessed by medical staff and mental health staff who would identify any medical impairments that may limit the inmate's ability to understand. Referral to the ADA Coordinator would ensure their individual needs are being addressed.

(e) 441.11 PREA education

The NSO shall maintain documentation of offender participation in these education sessions.

Documentation of attendance at orientation was provided.

(f) PREA education

In addition to providing such education, the NSO shall ensure that key information is continuously and readily available or visible to offenders through posters, offender handbooks, or other written formats.

Numerous posters providing information on PREA were visible throughout the facility. Inmates interviewed acknowledged that they knew of PREA by reading the posters.

## Standard 115.34: Specialized training: Investigations

### 115.34 (a)

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

### 115.34 (b)

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

- Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).]  Yes  No  NA

#### 115.34 (c)

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

#### 115.34 (d)

- Auditor is not required to audit this provision.

#### Auditor Overall Compliance Determination

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

(a) 216.23 PREA Training states the following:

The NSO shall ensure that to the extent the agency itself conducts sexual abuse investigations; its investigators have received training in conducting such investigations in confinement settings.

Currently there are 6 trained investigators. Two investigators handle the PREA allegations but it was determined by the facility it would be better if they had additional staff available. Training is conducted with the Massachusetts Department of Correction investigator training.

(b) The training curriculum addressed 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
- Post Allegation

(c) 200.08 Administrative Investigative Procedures & Guidelines PREA Investigation:

In accordance with PREA standards, if a complaint is filed by an offender, staff member, or any other entity including an anonymous report, the following process must be adhered to; The NSO shall provide investigators with specialized training that should include 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. Documentation shall be maintained that the investigators have completed the required specialized training in conducting sexual abuse investigations.

(d) 216.23 PREA Training:

The NSO shall maintain documentation that the NSO investigators have completed the required specialized training in conducting sexual abuse investigations.  
Training certificates were reviewed for the investigators.

Finding of compliance is based on the following: Policy supports the requirements of the standards. Review of the investigations with corresponding certificates of training supported compliance. Interview with the investigators demonstrated knowledge regarding Miranda and Garrity warnings, interviewing victims, dynamics of abuse in a confinement setting and evidence collection. Investigators are on call if needed. They indicated they are being notified of need to initiate investigations immediately.

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

### 115.35 (a)

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

### 115.35 (b)

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

### 115.35 (c)

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

### 115.35 (d)



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

### Auditor Overall Compliance Determination

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

#### (a) 216.23 PREA Training:

The NSO shall ensure that all full-time and part-time medical and mental health care practitioners who work regularly in the facility have been trained in:  
 how to detect and assess signs of sexual abuse and sexual harassment;  
 how to preserve physical evidence of sexual abuse;  
 how to respond effectively and professionally to victims of sexual abuse and sexual harassment;  
 how and to whom to report allegations or suspicions of sexual abuse; and  
 medical and mental health care practitioners shall also receive the training mandated for employees under 115.31 or for contractors and volunteers 115.32 depending on the practitioner's status at the facility.

#### (b) 610.10 Continuing Education for Qualified Health Services Personnel states,

The ADS of Health Services and the Training Department should maintain a training file on all health service personnel that demonstrated orientation, current training in CPR and completion of forty (40) hours of annual training. In-Service or continuing education may include, but not limited to, the topics of:  
 physical assessment;  
 mental assessment;  
 suicide prevention and intervention;  
 disaster plan;  
 medical emergencies;  
 recognition and treatment of chemical dependency;  
 infection control;  
 patient education;  
 policy and procedure review; and  
 any and all training as identified by the Training Department or the ADS of Health Services.

#### (c) 518.18 Staff Training:

NSO shall maintain documentation that medical and mental health practitioners have received the training referenced in this standard.

#### (d) PREA Training:

The NSO shall ensure that all full-time and part-time medical and mental health care practitioners who work regularly in the facility have been trained in:  
how to detect and assess signs of sexual abuse and sexual harassment;  
how to preserve physical evidence of sexual abuse;  
how to respond effectively and professionally to victims of sexual abuse and sexual harassment;  
how and to whom to report allegations or suspicions of sexual abuse; and  
medical and mental health care practitioners shall also receive the training mandated for employees under 115.31 or for contractors and volunteers 115.32 depending on the practitioner's status at the facility.

Contractual staff are used in the area of medical health (per diem) and mental health. Training is provided to medical and mental health staff who works regularly in the facility. In addition to PREA training provided to all staff, medical and mental health staff receives specialized training. The follow up PREA assessment quiz includes questions specifically on providing informed consent before providing information about an incident that occurred in the community setting, evidence preservation, notification to shift commander of allegations and suspicions of sexual abuse or harassment.

Documentation of completion of training was requested and provided for eight medical and mental health staff.

Finding of compliance is based on the following: Policy which 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, when known to the agency: prior acts of sexual abuse?  Yes  No

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

#### 115.41 (f)

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

#### 115.41 (g)

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

#### 115.41 (h)

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

#### 115.41 (i)

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

#### Auditor Overall Compliance Determination

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

(a), (b), (c), (d) The following policies support compliance with this standard:

493.07 Correctional Center Offender

Responsibilities of the Intake Caseworker

All offenders shall be assessed during the intake process for their risk of being sexually abused by other offenders or sexually abusive towards other offenders.

Offender screening shall take place within twenty-four (24) hours of arrival at the facility for potential vulnerabilities or tendencies of acting out with sexually aggressive behavior. Housing Assignments are made accordingly. Such assessments shall be conducted using an objective screening instrument. The intake screening shall consider, at a minimum, the following criteria to assess offenders risk for sexual victimization:

whether the offender has a mental, physical, or developmental disability;

the age of the offender;

the physical build of the offender;

whether the offender has been previously incarcerated;

whether the offender's criminal history is exclusively nonviolent;

whether the offender has prior convictions for sex offenses against an adult or child;

whether the offender is gay, bisexual, or transgender;

whether the offender has previously experienced sexual victimization;

the offender's own perception of vulnerability; and

whether the offender is detained solely for civil immigration process.

518.10 Offender Screening

The NSO shall perform an intake screening within twenty-four (24) hours of arrival at the facility for potential vulnerabilities or tendencies of acting out with sexually aggressive behavior. Housing assignments are made accordingly. Such assessments shall be conducted using an objective screening instrument to obtain and use information about the offender's history to reduce the risk of sexual abuse by or upon the offender.

The intake screening shall consider, at a minimum, the following criteria to assess offenders for risk of sexual victimization:

whether the offender has a mental, physical, or developmental disability;

the age of the offender;

the physical build of the offender;

whether the offender has previously been incarcerated;

whether the offender's criminal history is exclusively nonviolent;

whether the offender has prior convictions for sex offenses against an adult or child;

whether the offender is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming;

whether the offender has previously experienced sexual victimization;

the offender's own perception of vulnerability; and

whether the offender is detained solely for civil immigration purposes.

The risk screen developed and used at this facility addresses all of these requirements. It is prepared to address needs of offenders detained solely for civil immigration, which they have housed in the past. The screen is completed upon arrival by the intake case manager. Case managers have received training by the PREA Coordinator/Classification Director in how to complete the risk assessment to provide consistency in assessments.

(e) 518.10 Offender Screening states,

The NSO shall perform an intake screening within twenty-four (24) hours of arrival at the facility for potential vulnerabilities or tendencies of acting out with sexually aggressive

behavior. . . .The initial screening shall consider prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known to the NSO, in assessing offenders for risk of being sexually abusive.

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

- (f) 518.10 Offender Screening states,  
Within a set time period, not to exceed thirty (30) days from the offender's arrival at the facility, the facility will reassess the offender's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening.

The Classification Director, who also serves at the PREA Coordinator and supervises case managers assures that new information generates an updated risk assessment.

- (g) 518.10 Offender Screening states,  
An offender'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 offender's risk of sexual victimization or abusiveness.

The Classification Director, who also serves at the PREA Coordinator and supervises case managers assures that new information generates an updated risk assessment when referred by staff, when requested by staff, when an investigation has been completed which revealed information that warranted a new risk assessment.

- (h) Policy 518.10 Offender Screening states,  
Offenders may not be disciplined for refusing to answer, or for not disclosing complete information in response to questions asked.

- (i) Risk assessments are maintained in the Record office which has appropriate controls on which staff can access the area.

Finding of compliance is based on the following: Policy supports compliance with all aspects of the standards. Eight inmates were randomly asked if they felt they would be disciplined for not answering the questions; they answered no. Interview with the intake case worker supports compliance with completing the risk screen upon arrival. She stated as well that the screens are placed in the record office file which has appropriate controls on who can access the information. Risk screens were requested for all inmates who arrived from June 1 to June 5, 2018. Nineteen screens were provided, reviewed and found to support compliance with the standard.

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

### **115.42 (a)**

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

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

#### 115.42 (b)

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

#### 115.42 (c)

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

#### 115.42 (d)

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

#### 115.42 (e)

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

#### 115.42 (f)

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

#### 115.42 (g)

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

#### Auditor Overall Compliance Determination

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

(a) The facility Classification Plan states the following:

PREA Requirements: The initial risk screening information required by 115.41 shall be used for the following:

To inform housing, bed, work, education, and program assignments with the goal of keeping separate those offenders at high risk of being sexually victimized from those at high risk of being sexually abusive;

(b) 441.10 Counseling and Program Placement supports the requirement of the standard with the following:

The NSO shall provide academic and vocational counseling so that offenders are placed in the phase of the educational/vocational programs most suited to their needs and abilities.

The NSO shall use classification information to manage education placements with the goal of keeping separate those offenders at high risk of being sexually victimized from those at high risk of being sexually abusive. The NSO shall make individualized determinations about how to ensure the safety of each offender.



The Classification Plan supports that individualized decisions are made as well with the following excerpt:

PREA Requirements: The initial risk screening information required by 115.41 shall be used for the following:

To make individualized determinations about how to ensure the safety of each offender.

(c) The Classification Plan has the following requirement:

PREA Requirements: The initial risk screening information required by 115.41 shall be used for the following:

To decide whether to assign a transgender or intersex offender to a facility for male or female offenders, and in making other housing and programming assignments, the NSO shall consider on a case-by-case basis whether a placement would ensure the offender's health and safety, and whether the placement would present management or security problems.

(d) (e) 441.10 Counseling and Program Placement states,

The NSO shall provide academic and vocational counseling so that offenders are placed in the phase of the educational/vocational programs most suited to their needs and abilities.

In deciding education placements for a transgender or transsexual offender, the NSO shall consider on a case-by-case basis whether a placement would ensure an offender's health and safety, and whether the placement would present any security or management problems. Education placements for each transgender or intersex offender shall be reassessed at least twice each year to review any threats to safety experienced by the offender. A transgender or intersex offender's own views with respect to his or her own safety shall be given serious consideration.

(f) 2-230 Inmate Sexual Abuse/Harassment (PREA) states,

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

This was also observed in the post orders in the housing unit. As stated, no inmates identified as transgender or intersex was at the facility during the time of the audit. The auditor found no reason to dispute this statement during the audit process.

(g) 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 and some inmates and observation of post orders.

## Standard 115.43: Protective Custody

### 115.43 (a)

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

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

#### 115.43 (b)

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

#### 115.43 (c)

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

#### 115.43 (d)

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

#### 115.43 (e)

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

#### Auditor Overall Compliance Determination

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

(a) The Classification Plan states the following:

PREA Requirements: The initial risk screening information required by 115.41 shall be used for the following:

Offenders 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 a facility cannot conduct such an assessment immediately, the facility may hold the offender in involuntary segregated housing for less than twenty-four (24) hours while completing the assessment.

(b) The Classification Plan further states,

Offenders 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 a facility cannot conduct such an assessment immediately, the facility may hold the offender in involuntary segregated housing for less than 24 hours while completing the assessment.

i) Offenders 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 NSO shall document:

- i) The opportunities that have been limited;
- ii) The duration of the limitation; and
- iii) The reasons for such limitations.

(c) The Classification Plan further attests,

The NSO shall assign such offenders to involuntary segregated housing only using alternative means of separation from likely abusers can arranged, and such an assignment shall not exceed a period of 30 days.

(d) Classification Plan

PREA Requirements: The initial risk screening information required by 115.41 shall be used for the following:

k) If an involuntary segregated housing assignment is made pursuant to section h), the NSO shall document:

- i) the basis for the facility's concern for the offender's safety; and
- ii) the reason why no alternative means of separation can be arranged.

(e) The Classification Plan states,

3. PREA Requirements: The initial risk screening information required by 115.41 shall be used for the following:

l) Every thirty (30) days, the NSO shall afford each such offender a review to determine whether there is a continuing need for separation from the general population.

Finding of compliance is based on the following: The Pre-Audit Questionnaire 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. 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.

## REPORTING

### Standard 115.51: Inmate reporting

#### 115.51 (a)

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

#### 115.51 (b)

- Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?  Yes  No
- Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?  Yes  No
- Does that private entity or office allow the inmate to remain anonymous upon request?  Yes  No
- Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security?  Yes  No

#### 115.51 (c)

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

## 115.51 (d)

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

### Auditor Overall Compliance Determination

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

(a) The following policies require compliance with this subpart:

200.09 PREA investigations

Offender Reporting

The NSO shall provide multiple internal ways for offenders to privately report sexual abuse and sexual harassment, retaliation by other offenders or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents.

518.11 Reporting allegations

The NSO shall provide multiple internal ways for offenders to privately report sexual abuse and sexual harassment, retaliation by other offenders or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents.

Inmates are provided information regarding how to make reports in different ways. 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 command center. This is noted on PREA posters throughout the facility; posters are located next to the phones. All inmates were knowledgeable regarding this number being available. No investigations during the past 12 months were initiated from use of this hotline number.

(b) The following policy excerpts support compliance with this standard:

200.09 PREA investigations Offender Reporting

The NSO shall provide at least one way for offenders to report abuse or harassment to a public or private entity or office that is not part of the agency, and that is able to receive and immediately forward offender reports of sexual abuse or sexual harassment to NSO officials, allowing the offender to remain anonymous upon request.

518.11 Reporting allegations

The NSO shall also provide at least one (1) way for offenders to report abuse or harassment to a public or private entity or office that is not part of the agency, and that is able to receive and immediately forward offender reports of sexual abuse and sexual harassment to agency officials, allowing the offender to remain anonymous upon request. Offenders detained solely for civil immigration purposes shall be provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security.

At the time of the audit, the facility was using the services of BARCC to address. However, due to the laws regarding confidentiality, BARCC cannot make a report on behalf of an inmate. Contact was made with the prosecuting attorney's office. Correspondence was received that they are willing to accept reports of abuse and harassment, including anonymous reports, and immediately forward them to the Sheriff's Office. The PREA brochure has been updated to reflect this option. At the time of the audit, the facility did not detain civil immigrants but have in the past and repositioned to meet this standard if this occurs in the future.

(c) The following policy excerpts demonstrate compliance:

200.09 PREA investigations

Offender Reporting

Staff shall accept reports made verbally, in writing, anonymously, and from third parties and shall promptly document any verbal reports.

518.11 Reporting allegations

Staff shall accept reports made verbally, in writing, anonymously, and from third parties and shall promptly document any verbal reports.

Staff interviews confirmed that staffs are aware of this expectation 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.

(d) The following policies require compliance with this subpart:

200.09 PREA investigations

Offender Reporting The NSO shall provide a method for staff to privately report sexual abuse and sexual harassment of offenders.

518.11 Reporting allegations

The NSO shall provide a method for staff to privately report sexual abuse and sexual harassment of offenders.

Staff interviews revealed that they could go directly to the PREA Coordinator, Superintendent or their union to report sexual abuse privately.

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. The auditor tested the phone line from two different inmate phones in the facility and was able to make connection without the use of a PIN number. As stated, the PREA brochure given to inmates upon arrival has been updated to reflect that the Norfolk Prosecutor's Office will accept all outside allegations of sexual abuse and sexual harassment and forward them immediately to the Norfolk Sheriff's Office.

## **Standard 115.52: Exhaustion of administrative remedies**

### **115.52 (a)**

- Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of

explicit policy, the agency does not have an administrative remedies process to address sexual abuse.  Yes  No  NA

#### 115.52 (b)

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

#### 115.52 (c)

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

#### 115.52 (d)

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

#### 115.52 (e)

- Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)  Yes  No  NA
- Are those third parties also permitted to file such requests on behalf of inmates? (If a third-party files such a request on behalf of an inmate, the facility may require as a condition of processing

the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)  Yes  No  NA

- If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)  Yes  No  NA

#### 115.52 (f)

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

#### 115.52 (g)

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

#### Auditor Overall Compliance Determination

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



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

Policy supports the requirements of the subparts of this standard as illustrated below.

(a) 491.17 PREA Grievances describes the process for how an inmate can file a grievance related to sexual abuse and sexual harassment while confined at this facility.

(b) 491.08 INFORMAL RESOLUTION OF OFFENDER GRIEVANCES

The NSO shall not require an offender to use the informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse.

(c) 491.17 PREA Grievances

The NSO shall ensure that an offender who alleges sexual abuse may submit a grievance without submitting it to staff member who is the subject of the complaint. The NSO shall make certain such grievance is not referred to a staff member who is the subject of the complaint.

(d) 491.16 TIME PERIODS

Time limits shall not be imposed when an offender submits a grievance regarding an allegation of sexual abuse.

The NSO shall issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within ninety (90) days of the initial filing of the grievance.

Computation of the ninety (90) day time period shall not include time consumed by offenders in preparing any administrative appeal. The NSO may claim an extension of time to respond, up to seventy (70) days, if the normal time period for response is insufficient to make an appropriate decision. At any level of the administrative process, including the final level, if the offender does not receive a response within the time allotted for a reply, including any properly noticed extension, the offender may consider the absence of a response to be a denial at that level.

(e) Third Parties:

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

If a third party files such a request on behalf of an offender, the NSO 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 process.

If the offender declines to have the request processed on his or her behalf, the NSO shall document the offender's decision.

(f) Emergency Grievances:

The NSO shall establish procedures for the filing of an emergency grievance alleging that an offender is subject to a substantial risk of imminent sexual abuse.

After receiving an emergency grievance alleging an offender is subject to a substantial risk of imminent sexual abuse, the NSO shall immediately forward the grievance (or any portion thereof that alleges the substantial risk of sexual abuse) to a level of review at which immediate corrective action may be taken, shall provide an initial response within forty-eight (48) hours, and shall issue a final decision within five (5) calendar days. The initial response and final decision shall document

the NSO's determination whether the offender is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance.

(g) Discipline for False Report:

The NSO may discipline an offender for filing a grievance related to an alleged sexual abuse only where the agency demonstrates that the offender filed the grievance in bad faith.

Finding of compliance is based on the following: As stated, two grievances initiated a PREA investigation. The auditor requested a received a list of all grievances file for the past 12 months and found no additional grievances related to an allegation of sexual abuse, sexual harassment, staff neglect leading to sexual abuse or sexual harassment, or retaliation. Instructions on filing a grievance are in the inmate handbook. Three inmates were randomly asked about the accessibility of grievances and reported there are no issues with receiving them.

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

### 115.53 (a)

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

### 115.53 (b)

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

### 115.53 (c)

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

### Auditor Overall Compliance Determination

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

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

The following policy excerpts demonstrate compliance with subparts a through c of this standard.

(a) 518.14 Treatment and Services

The NSO shall provide offenders with access to external victim advocate for emotional support services related to sexual abuse by giving offenders mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, state, or national victim advocacy or rape crisis organizations, and for persons detained solely for civil immigration purposes, immigration services agencies. The NSO shall enable reasonable communication between offenders and these organizations and agencies, in as confidential a manner as possible.

(b) The NSO shall inform offenders, 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.

(c) The NSO shall maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide offenders with confidential emotional support services related to sexual abuse. The agency shall maintain copies of agreements or documentation showing attempts to enter into such agreements.

As noted earlier, a contract is maintained with BARCC who provides confidential emotional support through the mail and via the telephone. A number is posted near the phones on how to access the service. Inmates are not required to use their PIN; there is no cost to the inmate to make this call. The auditor tested the line on three different telephones in the facility and was able to call directly to the BARCC hotline. Inmates are given information on these services when they arrive, however no inmates interviewed were aware of the service. Two phone calls were made to this number in the past 12 months, no letters were received by BARCC or sent to an inmate by BARCC. An interview was conducted with the BARCC Project Coordinator which demonstrated commitment on this organization's part to be more accessible to the inmate population and meet the needs that the service is designed to provide.

Finding of compliance is based on the following: The facility is in compliance with the standard; however, due to the lack of awareness, a plan has been implemented to provide the information again when inmates are seen at a later time for follow up case management needs. The BARCC coordinator will review this information at the weekly orientation which will now include inmates received pending trial.

## 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*)

522.11 PROCEDURES FOR FILING A COMPLAINT states the following:

Complaints Made by Persons Outside of the Norfolk Sheriff's Office

Complaints, regardless of nature, may be lodged in person, by mail (regular and electronic), or by phone (to the Superintendent/Department Head/Division Head) at any time. Every reasonable effort shall be made to facilitate the convenient, courteous and prompt receipt and processing of citizen complaints. An employee, who interferes with, discourages, or delays the making of such complaints shall be subject to disciplinary action.

Persons making complaints by mail, telephone or in person will normally be contacted by the assigned investigator for the purpose of completing an Investigative Services Intake Form. In addition, information regarding how to file an allegation/complaint of staff misconduct, to include forms for filing an allegation/complaint, shall be posted on the Norfolk Sheriff's Office Web Page.

The auditor found the information on how to file a complaint on the following website: <https://norfolk-sheriff.com/index.php/PREA-reporting-form>. The Pre-Audit Questionnaire indicated that no third party complaints had been received in the previous 12 months. The auditor found no evidence to dispute this statistic during the audit process.

Finding of compliance is based on the following: Policy which supports the requirements, review of the website and interviews with the Superintendent and the PREA Coordinator acknowledging that third party complaints will be immediately addressed.

## 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*)

(a) 522.11 Reporting Allegations states,  
The NSO shall 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 the facility; retaliation against offenders or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation to the FSC. The FSC shall immediately contact the Special Sheriff/Superintendent and the PREA Coordinator and ensure that an investigation is conducted and documented whenever a sexual assault or threat is reported by an offender or staff member. Failure to report these allegations or incidents by staff may result in disciplinary action up to and including termination.

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.

(b) Policy 2-230 Inmate Sexual Abuse/Harassment states,

“Apart from reporting to their designated supervisors, staff shall not reveal any information related to a sexual abuse report to anyone other than to the extent necessary, to make treatment, investigation, and other security and management decisions.” Staff was also keenly aware of the requirement to maintain confidentiality after the allegation is made.

(c) 2-230 Inmate Sexual Abuse/Harassment states,

Medical and mental health contractors shall report sexual abuse and inform inmates of their duty to report, and the limitations of confidentiality, at the initiation of services. Medical and mental health staff are required to follow the policy above. In training specific to medical and mental health staff, they are made aware of their obligation to report any suspicion of sexual abuse, sexual harassment or allegations made by the inmates to the shift commander. Medical staff inform the inmate; mental health staff have an intake sheet which discusses this requirement which the inmate must sign. One investigation was initiated from a mental health staff reporting information received from an inmate further demonstrating compliance.

(d) 522.11 Reporting Allegations states,

If the victim is under the age of eighteen (18) or considered a vulnerable adult under state or local vulnerable adult persons statute, the NSO shall report the allegation to the designated state or local services agency under applicable mandatory reporting laws. This facility does not house inmates under the age of 18. If a vulnerable was to file an allegation, it would be referred to the ADA Coordinator for reporting to the proper agency.

(e) Review of the investigations and interview with the investigators support that all allegations are referred to the investigators 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, first responders and other 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*)

Policy 2-230 Inmate Sexual Abuse/Harassment states,

The NSO shall take immediate action when an offender is at substantial risk of imminent sexual abuse. The Pre-Audit Questionnaire indicates there have been no instances requiring immediate action due to an inmate being a substantial risk of imminent sexual abuse.

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.

## 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*)

(a) 200.09 PREA investigations

Reporting to Other Confinement Facilities

Upon receiving an allegation that an offender was sexually abused while confined at another facility, the Special Sheriff/Superintendent shall notify the head of the facility or appropriate office of the agency where the alleged abuse occurred.

(b) 200.09 PREA investigations



#### Reporting to Other Confinement Facilities

Such notification shall be provided as soon as possible, but no later than seventy-two (72) hours after receiving the allegation.

#### (c) 200.09 PREA investigations

##### Reporting to Other Confinement Facilities

The NSO shall document that it has provided such notification.

#### (d) 200.09 PREA investigations

##### Reporting to Other Confinement Facilities

The facility head or agency official that receives such notification shall ensure that the allegation is investigated in accordance with these standards.

Finding of compliance is based on the following: The policy excerpts noted above support a finding of compliance. The Pre-Audit Questionnaire indicates that two allegations were sent to another facility indicating that an inmate was sexually abused while confined at that facility. Two allegations were received from other facilities indicating that an inmate was sexually abused while at this facility. Interviews with the investigators and PREA Coordinator and review of the investigations support a finding of compliance with the standard.

### Standard 115.64: Staff first responder duties

#### 115.64 (a)

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

#### 115.64 (b)

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



## Auditor Overall Compliance Determination

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

(a) The following policy excerpts support compliance with this standard.

### 200.09 PREA investigations

#### Staff First Responder Duties

Upon learning of an allegation that an offender was sexually abused, the first security staff member to respond to the report shall be required to:

Separate the alleged victim and abuser.

Preserve and protect any crime scene until appropriate steps can be taken to collect evidence. If the abuse occurred within a time period that still allows for the collection of physical evidence, request the victim not to take any actions that could destroy evidence, including washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.

### 518.12 RESPONDING TO SEXUAL ASSAULT COMPLAINTS

1. If an offender or staff member reports being victimized by a sexual assault, the staff person receiving such a complaint shall immediately inform the Facility Shift Commander (FSC) and complete a confidential Intelligence Report to assure separation of the victim from his/her assailant. The FSC shall immediately contact the Special Sheriff/Superintendent and the PREA Coordinator to initiate an investigation and document whenever a sexual assault or threat is reported by an offender or staff member.

a) The FSC will ensure that the crime scene and the cell(s) of the victim and the alleged perpetrator(s) shall be immediately secured and managed in accordance with CSD 506, Search. No one shall be allowed to enter the crime scene area(s) prior to the completion of the collection of evidence by the NSO Investigators, and without the authorization of the Special Sheriff/Superintendent or his/her designee.

(b) 200.09 PREA investigations

#### Staff First Responder Duties

If the first staff responder is not a security staff member, the responder shall be required to request the victim not take any action that could destroy physical evidence, and then notify security staff.

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. All staff interviews demonstrated knowledge with this requirement. The Pre-audit questionnaire indicates there has been no allegations that warranted this response. The auditor found no reason to dispute this statistic during the audit process. The pending investigation did not require this response.

## 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*)

#### **518.12 RESPONDING TO SEXUAL ASSAULT COMPLAINTS**

1. If an offender or staff member reports being victimized by a sexual assault, the staff person receiving such a complaint shall immediately inform the Facility Shift Commander (FSC) and complete a confidential Intelligence Report to assure separation of the victim from his/her assailant. The FSC shall immediately contact the Special Sheriff/Superintendent and the PREA Coordinator to initiate an investigation and document whenever a sexual assault or threat is reported by an offender or staff member.

a) The FSC will ensure that the crime scene and the cell(s) of the victim and the alleged perpetrator(s) shall be immediately secured and managed in accordance with CSD 506, Search. No one shall be allowed to enter the crime scene area(s) prior to the completion of the collection of evidence by the NSO Investigators, and without the authorization of the Special Sheriff/Superintendent or his/her designee.

b) The Special Sheriff/Superintendent shall immediately notify the Sheriff and the designated NSO Investigator.

2. The offender victim shall be immediately taken to the Health Services Unit for appropriate evaluation, intervention and treatment to minimize as much as possible the medical and psychological trauma of a sexual assault, unless emergency medical treatment and hospitalization is warranted. In order to preserve evidence, a NSO Investigator or his/her designee shall ensure that the clothing from the victim is removed prior to the hospital departure, and secure the victim's clothing in a clean white sheet and place the white sheet inside an evidence bag located inside the PREA Bag. In addition, the victim shall refrain from showering or washing. If the victim is an employee, he/she can be evaluated at an alternate medical site if requested.

A NSO nurse shall conduct an evaluation to provide any initial treatment and document the extent of physical injury. The Health Services staff shall document any statements made by the victim on an Intelligence Report and forward it to the NSO Investigator.

If the determination is made that the offender should be sent to an outside hospital and the offender victim consents, the victim shall be sent to a hospital with a Sexual Assault Nurse Examiner (SANE) program where he/she will receive preventative treatment.

When an offender or staff member victim reports having been sexually assaulted well after the alleged occurrence, steps 1-3 shall be followed.

Finding of compliance is based on the following: Review of the coordinated plan and interview with all staff who are knowledgeable regarding the plan.

## 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*)

200.09 PREA investigations states,

Preservation of Ability to Protect Offenders from Contact with Abusers

Neither the NSO nor any other government entity responsible for the collective bargaining on the NSO's behalf shall enter into or renew any collective bargaining agreement or other agreement that limits the NSO's ability to remove alleged staff sexual abusers from contact with any offenders pending the outcome of an investigation or determination of whether and to what extent discipline is warranted.

The auditor reviewed the following documents and found no limits to the Sheriff's Office to remove alleged staff abusers.

- Memorandum of Agreement Norfolk Sheriff's Office and NEPBA Local 570 Supervisory Officers Union for a Successor Agreement
- Agreement between Norfolk County Sheriff's Office and Local R1-202 NAGE

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

- Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?  Yes  No

#### 115.67 (d)

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

#### 115.67 (e)

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

#### 115.67 (f)

- Auditor is not required to audit this provision.

### Auditor Overall Compliance Determination

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

#### (a) 200.09 PREA investigations

##### Protection Against Retaliation

The NSO shall protect all offenders and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other offenders or staff, and shall designate which staff members or departments are charged with monitoring retaliation.

A case manager is designated as the person responsible for retaliation monitoring.

#### (b) (c) 200.09 PREA investigations

##### Protection Against Retaliation

For at least ninety (90) days following a report of sexual abuse, the NSO shall monitor the conduct and treatment of offenders or staff who reported the sexual abuse to see if there are any changes that may suggest possible retaliation by offenders or staff, and shall act promptly to remedy any such retaliation. Items the NSO will monitor include any offender disciplinary reports, housing, or program changes or negative performance reviews or reassignments of staff. The NSO shall continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need.

(d) Policy 2-230 Inmate Sexual Abuse/Harassment includes the requirement for periodic status checks.

(e) Policy 2-230 Inmate Sexual Abuse/Harassment states,

If any other individual who cooperates with an investigation expresses a fear of retaliation, the NSO will take appropriate measures to protect that individual against retaliation.

Finding of compliance is based on the following: Interview with the designated retaliation monitor supported compliance based on his responses to questions, experience at the facility (almost 30 years) and specific documentation he provided showing how he accomplishes this task. The interviews with the 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.

## 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*)

Classification Plan, PREA Requirements states as follows:

The initial risk screening information required by 115.41 shall be used for the following:

h) Offenders 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 a facility cannot conduct such an assessment immediately, the facility may hold the offender in involuntary segregated housing for less than twenty-four (24) hours while completing the assessment.

i) Offenders 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 NSO shall document: the opportunities that have been limited; the duration of the limitation; and the reasons for such limitations.

j) The NSO shall assign such offenders to involuntary segregated housing only using alternative means of separation from likely abusers can arranged, and such an assignment shall not exceed a period of thirty (30) days.

k) If an involuntary segregated housing assignment is made pursuant to section h), the NSO shall document:

the basis for the facility's concern for the offender's safety; and the reason why no alternative means of separation can be arranged.

l) Every thirty (30) days, the NSO shall afford each such offender a review to determine whether there is a continuing need for separation from the general population.

m) The NSO shall employ multiple protection measures, such as housing changes or transfers for offender victim or abusers, removal of alleged staff or offender abusers from contact with victims, and emotional support services for offenders or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations.

Any use of segregated housing to protect an offender who is alleged to have suffered sexual abuse shall be subject to requirements set forth in sections h) through l).

Finding of compliance is based on the following: The Pre-Audit Questionnaire indicates they have not had to use restrictive housing to protect an inmate who is alleged to have suffered sexual abuse. The auditor found no reason to dispute this statistic during the audit process. Policy addresses the requirements in the event of an occurrence in the future.

## 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*)

(a) 200.09 PREA investigations states,

The NSO shall conduct an administrative investigation into any and all allegations of sexual abuse and sexual harassment. It shall do so promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports.

Criminal investigations are referred to the Norfolk County Prosecutor's Office as established through an MOU.

(b) 522.13 Investigations states,

The NSO shall provide investigators with specialized training that should include 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. See comments for 115.34.

522.13 Investigations PREA Investigations also states the following:

When the NSO conducts its own investigations into allegations of sexual abuse and sexual harassment, it shall do so promptly, thoroughly, and objectively, for all allegations, including third-party and anonymous reports.

(c) 200.09 PREA investigations states,

Investigators shall gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; shall interview alleged victims, suspected perpetrators, and witnesses; and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator.

(d) 200.09 PREA investigations:

When the quality of evidence appears to support criminal prosecution, the NSO shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution.

(e) 200.09 PREA investigations has the following excerpt: 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 offender or staff. The agency shall not require an offender who alleges sexual abuse to submit to a polygraph examination or other truth telling device as a condition for proceeding with the investigation of such an allegation.

(f) 200 Administrative Investigative Procedures and Guidelines states,

Administrative investigations shall include an effort to determine whether staff actions or failures to act contributed to any sexual abuse. Administrative investigations 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.

(g) Criminal investigations are conducted by the State Police Unit of the Norfolk Country Prosecutor's Office in accordance with the MOU.

(h) 522.13 Investigations PREA Investigations states,  
Substantiated allegations of conduct that appears to be criminal shall be referred for prosecution.

(i) 200.12 Investigative Documentation and Record require the following:  
The NSO shall retain all written administrative and criminal reports of sexual abuse for as long as the alleged abuser is incarcerated or employed by the NSO, plus five years.

(j) 200.12 Investigative Documentation and Record states,  
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.

(l) When the state police investigate, it is based on the agreement (MOU) with the Norfolk County's Prosecutor's office. The Chief Investigator is the main contact at the Sheriff's Office who remains informed of the progress of the investigation. 522 Responsibility of the Investigative Services Unit states,

Provide a direct liaison with outside law enforcement agencies, i.e. state/local police, district attorney's office and attorney general's office. Etc.

Finding of compliance is based on the following: As noted above, policy mandates compliance with the requirements of the standard. Seven completed administrative investigations were reviewed and demonstrated compliance with the standards. Interview with the two main PREA investigators confirmed compliance as well. There is one open criminal investigation; the Chief investigator maintains contact with the State Police regarding the progress.

## 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*)

200.08 Administrative Investigative Procedures and Guidelines states under subcategory Guidelines for Administrative Investigation,

The NSO shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.

Finding of compliance is based on the following: Policy excerpts noted above as well as review of the investigations and interviews 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 resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?  Yes  No
- Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?  Yes  No
- Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?  Yes  No
- Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?  Yes  No

### 115.73 (d)

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

#### 115.73 (e)

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

#### 115.73 (f)

- Auditor is not required to audit this provision.

#### Auditor Overall Compliance Determination

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

(a) 200.13 Reporting to offenders states,  
 Following an investigation into an offender's allegation that he suffered sexual abuse in a NSO facility, the NSO shall inform the offender as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded (See Attachment C - PREA Investigation Competition Memo).

(b) 522.13 Investigations Reporting to offenders:  
 If the NSO did not conduct the investigation, it shall request the relevant information from the investigative agency in order to inform the offender.

(c) 522.13 Investigations PREA Investigations Reporting to offenders notes the following:  
 Following an offender's allegation that a staff member has committed sexual abuse against the offender, the NSO shall subsequently inform the offender (unless the NSO has determined that the allegation is unfounded) whenever:  
 the staff member is no longer posted within the offender's unit;  
 the staff member is no longer employed at the NSO;  
 the NSO learns that the staff member has been indicted on a charge related to sexual abuse with the facility; or the NSO learns that the staff member has been convicted on a charge related to sexual abuse within the facility.

(d) 522.13 Investigations PREA Investigations states,

Following an offender's allegation that he or she has been sexually abused by another offender, the NSO shall subsequently inform the alleged victim whenever:  
the NSO learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility.  
the NSO learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.

- (e) 200.13 Reporting to offenders states,  
All such notifications or attempted notification shall be documented.

Finding of compliance is based on the following: Policy excerpts demonstrate compliance with the requirements. Review of all investigations included a copy of the memo of notification to the offender. The investigator is required to provide the notification. The interview with the investigations support that they confirm this is their obligation as the investigator.

## 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*)

(a) 230.16 Disciplinary sanctions for staff

Staff shall be subject to disciplinary sanctions up to and including termination for violating CSD 519, Staff Sexual Misconduct with Offenders and/or CSD 239, Sexual Harassment and all other forms of Harassment Prevention.

(b) 518.15 Sexual Assault by a Staff Member

Termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual abuse.

(c) 518.15 Sexual Assault by a Staff Member

Disciplinary sanctions for violations 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.

(d) 518.15 Sexual Assault by a Staff Member

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.

Finding of compliance is based on the following: Policy excerpts quoted above meet the requirements of the standard. The Pre-Audit Questionnaire notes that no staff 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 Sheriff and Superintendent support that these requirements will be followed.

## **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*)

#### (a) 485.14 PREA Violations

Any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with offenders and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies.

#### (b) PREA Violations

The NSO shall take appropriate remedial measures, and shall consider whether to prohibit further contact with offenders, in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer.

Finding of compliance is based on the following: Policy excerpts quoted above meet the requirements of the standard. The Pre-Audit Questionnaire 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 Sheriff and Superintendent support 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)**

- 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*)

(a) 430.13 Disciplinary sanctions for PREA Violations

Offenders shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the offender engaged in offender on offender sexual abuse or following a criminal finding of guilt for offender on offender sexual abuse.

(b) 430.13 Disciplinary sanctions for PREA Violations

Sanctions are commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories as required by 430.13 Disciplinary sanctions for PREA Violations

(c) 430.13 Disciplinary sanctions for PREA Violations

The disciplinary process shall consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed is noted in 430.13 Disciplinary sanctions for PREA Violations.



(d) 430.13 Disciplinary sanctions for PREA Violations

The NSO may require the offending offender to participate in therapy, counseling, or other interventions designed to address and correct underlying reasons and motivations for the abuse as a condition for accessing programming or other benefits.

(e) 430.13 Disciplinary sanctions for PREA Violations

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

(f) 430.13 Disciplinary sanctions for PREA Violations

For the purpose of disciplinary action, 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.

(g) 430.13 Disciplinary sanctions for PREA Violations

The NSO may, in its discretion, prohibit all sexual activity between offenders and may discipline offenders for such activity. The NSO may not, however, deem such activity to constitute sexual abuse if it determines that the activity is not coerced.

Finding of compliance is based on the following: Policy supports the requirements of the standard. The Pre-Audit Questionnaire notes that no disciplinary sanctions have occurred as a result of a substantiated inmate on inmate sexual abuse or sexual harassment complaint in the past 12 months. The auditor found no evidence to dispute this during the audit process.

## **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*)

(a) This is not applicable to this facility as it is a jail.

(b) This is not applicable to this facility as it is a jail.

#### (c) 601.13 Receiving and Screening Procedures

All findings shall be recorded on the Medical Entrance Screening Form approved by the Medical Director. The screening procedure shall include, but not be limited to, the following:

If the initial intake screening indicates that an offender has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff shall ensure that the offender is offered a follow-up meeting with a medical or mental health practitioner within fourteen (14) days of the intake screening.

#### (d) 601.13 Receiving and Screening Procedures

All findings shall be recorded on the Medical Entrance Screening Form approved by the Medical Director. The screening procedure shall include, but not be limited to, the following:

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, education, and program assignments, or otherwise as required by federal, state, or local law.

(e) Medical and mental health staff are trained 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 support a finding of compliance. As all inmates are reviewed by medical and mental health staff, the notation of prior victimization will be addressed at the initial intake encounter. Inmates wanting to receive further mental health assistance are placed on the caseload and assessed and provided treatment according to their needs. The reported on the Pre-Audit Questionnaire that approximately 5% of the population have indicated they have had been sexually abused in their past. Medical and mental health staff obtain informed consent by having the inmate sign a form.

## **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*)

(a) 518.14 Treatment and Services states, Offender victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment.

(b) Medical staff are on duty 24 hours a day, seven days a week. Policy requires that they be immediately notified if a report of sexual abuse is made.

(c) 518.14 Treatment and Services states,  
All victims shall be offered prophylactic treatment and follow-up for sexually transmitted disease or other communicable diseases (e.g., HIV, Hepatitis B) through the Health Services Unit, as appropriate.

(d) 601.14 Unimpeded Access to Health states, Offender victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections as medically appropriate. Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigations arising out of the incident.

Finding of compliance is based on the following: Policy excerpts noted above support a finding of compliance. The Pre-Audit Questionnaire reports that there has been non incidents in the previous 12 months that warranted emergency medical treatment. The auditor found no reason to dispute this statement based on all observations made during the audit process.

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

### **115.83 (a)**

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

### **115.83 (b)**

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

### **115.83 (c)**

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

### **115.83 (d)**

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

### 115.83 (e)

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

### 115.83 (f)

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

### 115.83 (g)

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

### 115.83 (h)

- If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a 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*)

#### (a) 601.14 UNIMPEDED ACCESS TO HEALTH CARE states,

The NSO shall provide unimpeded access to health care for all offenders to the following levels of care that may be provided on-site, off-site, or in the community:

PREA - the NSO shall offer ongoing medical and mental health evaluation and, as appropriate, treatment to all offenders who have been victimized by sexual abuse. The evaluation and treatment of such victims shall include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following transfer to, or placement in, other facilities, or their release from custody. The medical and mental health services provided to victims shall be consistent with the community level of care. Offender victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections as medically appropriate. Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigations arising out of the incident.

#### 650.13 MENTAL HEALTH Evaluation

The NSO shall offer ongoing mental health evaluation and as appropriate, treatment to all offenders who, during the present term of incarceration, have been victimized by sexual abuse in any institution.

- (b) 2-230 Inmate Sexual Abuse/Harassment states,  
The evaluation and treatment of victims will 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.
- (c) 2-230 Inmate Sexual Abuse/Harassment states,  
The NSO will provide victims with medical and mental health services consistent with the community level of care.
- (d) This facility houses only male inmates; this is not applicable.
- (e) This facility houses only male inmates; this is not applicable.
- (f) 601.14 UNIMPEDED ACCESS TO HEALTH states,  
The NSO shall provide unimpeded access to health care for all offenders to the following levels of care that may be provided on-site, off-site, or in the community:  
PREA - the NSO shall offer ongoing medical and mental health evaluation and, as appropriate, treatment to all offenders who have been victimized by sexual abuse. The evaluation and treatment of such victims shall include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following transfer to, or placement in, other facilities, or their release from custody. The medical and mental health services provided to victims shall be consistent with the community level of care. Offender victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections as medically appropriate. Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigations arising out of the incident.
- (g) 601.14 UNIMPEDED ACCESS TO HEALTH states,  
Offender victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections as medically appropriate. Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigations arising out of the incident.
- (h) This is a jail therefore this is not applicable to this facility.

Finding of compliance is based on the following: Policy excerpts noted above support a finding of compliance. The Pre-Audit Questionnaire reports that there has been non incidents I the previous 12 months that warranted emergency medical treatment. The auditor found no reason to dispute this statement based on all observations made during the audit process.

## **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*)

- (a) 200.09 PREA Investigations states,  
Sexual Abuse Incident Reviews The NSO shall 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.
- (b) 200.09 PREA investigations, Sexual Abuse Incident Reviews states,  
Such review shall ordinarily occur within thirty (30) days of the conclusion of the investigation.
- (c) 200.09 PREA investigations, Sexual Abuse Incident Reviews states,  
The review team shall include upper management officials, with input from line supervisors, investigators, and medical or mental health practitioners. The review team consists of the PREA Coordinator, PREA Manager, Investigators, Medical and Mental Health staff.
- (d) 200.09 PREA investigations, Sexual Abuse Incident Reviews states,  
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 or otherwise caused by the perpetrator's or victim's race, ethnicity, gender identity; gay, bisexual, transgender, or intersex identification, status or perceived status; or gang affiliation, or was motivated by other group dynamics at the facility;  
examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area enabled the abuse;  
assess the adequacy of staffing levels in the area during different shifts;  
assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; and prepare a report of its findings including, but not necessarily limited to determinations made pursuant to sections a.-e., and any recommendations for improvement and submit such report to the facility head and PREA compliance manager.
- (e) Inmate Sexual Abuse/Harassment (PREA) states, The facility will implement the recommendations for improvement, or document the reason for not doing so.

Finding of compliance is based on the following: Policy excerpts noted above support the requirements of the standard. Incident Review Committee minutes were requested for December, April, and June. Review of the minutes found the facility to be in compliance with the requirements of the standards. Findings are sent to the Sheriff. No recommendations for change have been recommended based on the review. The auditor concerns with the committee's findings after review of the minutes and the investigations.

## **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*)

(a) (b) & (c)

518.20 Data collection/analysis states the following:

The NSO shall collect accurate, uniform data for every allegation of sexual abuse and will review aggregate data on these allegations at least annually. The incident-based data collected shall 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.

(d) 518.20 Data collection/analysis further states,

The NSO shall maintain, review, and collect data from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.

(e) 518.20 Data collection/analysis

The NSO shall also obtain incident-based and aggregate data from every private facility with which it contracts for the confinement of its offenders.

Finding of compliance is based on the following: Review of the Annual reports located on the website, policy requirements and interview with the PREA Coordinator and Superintendent support that this standard is in compliance.

## 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*)

(a) 518.20 Data collection/analysis is as follows:

The NSO shall review data collected and aggregated in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including: identifying problem areas; tacking corrective action on an ongoing basis; and preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole.

(b) 518.20 Data collection/analysis,

Such report shall include a comparison of the current year's data and corrective actions with those from prior years and shall provide an assessment of the NSO's progress in addressing sexual abuse.

(c) 518.20 Data collection/analysis,

The NSO's report shall be approved by the Sheriff/Special Sheriff/Superintendent and made readily available to the public at least annually through the NSO website. Before making aggregated sexual abuse data publicly available, the NSO shall remove all personal identifiers.

(d) 518.20 Data collection/analysis,

The NSO may redact specific material from the reports when publication would present a clear and specific threat to the safety and security of the facility, but must indicate the nature of the material redacted.

Finding of compliance is based on the following: Policy excerpts noted above support a finding of compliance. The annual report is located on the website. Assessment of comparisons reveal little information but affirms that allegations are low, supporting that staff excel at prevent in the facility.

## **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*)

- (a) 518.20 Data collection/analysis states,  
The NSO shall ensure that the data collected is securely retained. The PREA Coordinator ensures the data is securely retained.
- (b) 518.20 Data collection/analysis states,  
The NSO's report shall be approved by the Sheriff/Special Sheriff/Superintendent and made readily available to the public at least annually through the NSO website. Before making aggregated sexual abuse data publicly available, the NSO shall remove all personal identifiers. The report is available on the website, no personal identifiers are included.
- (c) 518.20 Data collection/analysis states,  
The NSO's report shall be approved by the Sheriff/Special Sheriff/Superintendent and made readily available to the public at least annually through the NSO website. Before making aggregated sexual abuse data publicly available, the NSO shall remove all personal identifiers. The report is approved by the Sheriff. Interview with the Sheriff concludes that he has approved all reports located on the website.
- (d) 518.20 Data collection/analysis states,  
The NSO shall maintain sexual abuse data collected for at least ten (10) years after the date of its initial collection unless federal, state, or local law requires otherwise. Sexual abuse data is maintained since the beginning of the requirements, 2014.

Finding of compliance is based on the following: Policy supports the requirements of the standards. The interview with the PREA Coordinator supports that data is securely maintained and will be maintained for the required 10 years. In addition, data is available on the website for the years 2014, 2015, 2016 and 2017.

## AUDITING AND CORRECTIVE ACTION

### Standard 115.401: Frequency and scope of audits

#### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.401 (a)

- During the three-year period starting on August 20, 2013, and during each three-year period thereafter, did the agency ensure that each facility operated by the agency, or by a private

organization on behalf of the agency, was audited at least once? (N/A before August 20, 2016.)  
 Yes  No  NA

#### 115.401 (b)

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

#### 115.401 (h)

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

#### 115.401 (i)

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

#### 115.401 (m)

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

#### 115.401 (n)

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

#### Auditor Overall Compliance Determination

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

#### Standard 115.403: Audit contents and findings

##### 115.403 (f)

- The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports within 90 days of issuance by auditor. The review period is for prior audits completed during the past three years PRECEDING THIS AGENCY AUDIT. In the case of single facility agencies, the auditor shall ensure that the facility's last audit report was published. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued

in the past three years, or in the case of single facility agencies that there has never been a Final Audit Report issued.)  Yes  No  NA

**Auditor Overall Compliance Determination**

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

The report dated October 16, 2015 can be viewed on the website at the following address:  
[www.norfolksheriff.com/publicinfo/PREA](http://www.norfolksheriff.com/publicinfo/PREA)

## 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.

*Amy J. Fairbanks*  
**Auditor Signature**

October 21, 2018  
**Date**