

**STANDARDS** FOR THE PREVENTION,  
DETECTION, RESPONSE, AND  
MONITORING OF SEXUAL ABUSE IN  
**COMMUNITY CORRECTIONS**

NATIONAL  
**PRISON  
RAPE**  
ELIMINATION  
COMMISSION

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## PREFACE

Ours has been a daunting task, albeit a deeply motivating and compelling one—to provide the President, members of Congress, the Attorney General, and the Secretary of Health and Human Services with national standards by which to detect, prevent, reduce, and punish prison rape.

As we submit these standards to the Attorney General for review and approval, I and my colleagues on the Commission believe that they are as urgently needed now as they were in 2003 when Congress mandated this groundbreaking project as part of the Prison Rape Elimination Act. Sexual abuse of incarcerated individuals remains a persistent problem, with life-altering consequences for victims, for the integrity of correctional institutions, and for fundamental principles of justice. We discuss the problem in great detail in our report; this standards document and its companion volumes are our blueprint for lasting nationwide change.

The standards development process benefited from, and indeed could not have happened without, the contributions of dozens of private and governmental organizations and more than 400 individuals—corrections professionals, academics, researchers, practitioners, and survivors of sexual abuse in confinement—who provided testimony at hearings, advice at expert committee and stakeholder meetings, and input during an extensive public comment period. In finalizing these standards and incorporating their expertise, our discussions have been long and lively and our debates rigorous. We are particularly grateful for the insights and lessons learned from early reformers—corrections professionals who have been working to prevent sexual abuse in their facilities since long before the passage of the Prison Rape Elimination Act and who continue to do so.

Each set of standards has been customized to ensure validity for particular conditions of confinement. The members of the National Prison Rape Elimination Commission are confident that the implementation of these national standards can have a substantial and salutary effect on the safety of prisons, jails, lockups, immigration detention centers, juvenile detention facilities, and community correctional facilities.

We are proud to entrust the enactment and implementation of these standards to the many capable policymakers and professionals who will now take up the torch. It has been an honor for us to play a part in the elimination of sexual abuse in confinement. A just and civil society should strive for nothing less.

A handwritten signature in black ink, appearing to read "Reggie B. Walton". The signature is fluid and cursive, with a long horizontal stroke extending to the right.

The Honorable Reggie B. Walton, Chair



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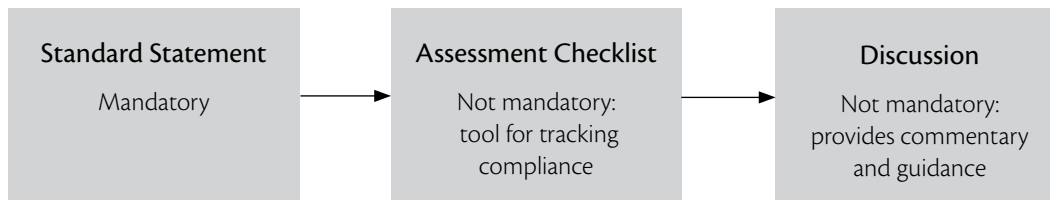
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# INTRODUCTION

Sexual abuse of defendants/offenders, whether adult or juvenile, in community corrections violates the law. It also violates their basic human rights, impedes the likelihood of their successful reentry into the community, and violates the Government’s legal obligation to provide safe and humane community corrections supervision. No sentence or condition of supervision, regardless of the crime, should ever include rape. A core priority of any community corrections agency or facility must be safety, which means protecting the safety of all—the public, the staff, and the defendant/offender population. In recognition of this, Congress formed the National Prison Rape Elimination Commission (NPREC or Commission) to develop national standards that will help eliminate rape and other forms of sexual abuse in community corrections.

The Prison Rape Elimination Act (PREA) of 2003 requires agencies to comply with the national standards proposed by the Commission and approved and promulgated by the Attorney General to eliminate sexual abuse in community corrections. Fundamental to an agency’s success will be its commitment to zero tolerance of sexual abuse—a recognition that sexual abuse in community corrections is unacceptable under any circumstances. Agencies must demonstrate zero tolerance not merely by words and written policy, but through their actions, including what they do to prevent sexual abuse and their response when it occurs.

The standards developed by NPREC are organized as follows:



Each standard statement contains mandatory requirements. A check box precedes each standard, indicating whether the standard requirements apply to community corrections facilities; pretrial, probation, and parole agencies; or both. Under each standard statement is an assessment checklist. The assessment checklists are designed as a tool for agencies and facilities to self-assess and track their progress toward meeting the standards. They are also meant to be a starting point for the external audit of an agency’s or facility’s compliance with the standards. The agency head, facility head, PREA coordinator, or a designee must complete the assessment checklists for every standard. Although answering “yes” to each checklist item is not mandatory, meeting the requirements in the standard is mandatory. Therefore, when completing a given checklist, if an official answers “no” to a checklist question but believes the agency or facility is meeting the requirements of the standard using a different process or procedure, he or she should explain how the alternative process or procedure meets the standard. The PREA coordinator or other official should attach documentation of compliance with the standard to the checklist unless compliance is self-evident. This documentation will be used in complying with the audit requirement in the standards.

After each assessment checklist is a discussion of the standard. Discussion sections provide explanation for the rationale of the standard and, in some cases, offer guidance for achieving compliance with it. Although the discussion sections sometimes offer further clarification on the meaning of



terms or phrases used in the standard, the glossary should be used as the primary source for the meaning of terms or phrases. The discussion sections do not contain any additional mandatory requirements. When mandatory requirements are mentioned in a discussion section, they have been drawn directly from the standard statement.

Some of the community corrections standards have not been deemed mandatory for pretrial, probation, or parole agencies. Even though these standards may not be mandatory for these agencies, the Commission encourages pretrial, probation, and parole agencies to review these standards and consider adopting some or all of the provisions as best practices.

In crafting these standards, NPREC has kept in mind the following overarching considerations: (1) agency and facility heads should retain the flexibility, responsibility, and authority to establish systems, practices, and protocols that will eliminate sexual abuse in community corrections; (2) successful compliance with the standards and elimination of sexual abuse require ongoing systemic efforts to assess and adjust policies, practices, and the allocation of resources to address problems and improve safety; and (3) greater transparency of the agency's sexual abuse data and efforts to prevent, detect, and respond to sexual abuse will improve public trust and confidence in our Nation's community corrections systems and aid in the elimination of sexual abuse while under supervision.

These standards are the product of lengthy study, consultation, and reflection. The Commission held eight public hearings, during which more than 100 witnesses testified, including corrections leaders, survivors of sexual abuse in confinement, researchers, investigators, prosecutors, and advocates for victims and the incarcerated. One of these public hearings was devoted to issues related to community corrections. In addition, the Commission convened an expert committee comprised of diverse stakeholders with broad community corrections expertise to help inform the content of the standards during the drafting process. Site visits to a cross-section of community corrections facilities enabled the Commission to receive feedback on the draft standards from a variety of community corrections staff. Finally, during its 60-day public comment period, the Commission received and considered comments on the standards, many extensive in nature, from more than 225 individuals or entities representing a wide range of perspectives. At the final stages of the process, these comments were discussed with a group of community corrections experts from agencies across the country to further modify the draft standards.

While recognizing that community corrections facilities are in many ways significantly different than prisons, jails, and other confinement facilities, the Commission has tailored this set of standards to the differing uses and context of community corrections. These facilities vary from those that may resemble minimum security corrections facilities to include residential housing settings within the community. The standards cover situations in which individuals in pre- or post-sentence circumstances are supervised in residential facilities in the community pursuant to a court order or condition of supervision. The community corrections standards address not only facilities housing adults, but also those that house juveniles. Despite differences with prisons and jails, it is still necessary to provide protection from sexual abuse for those individuals who reside in community corrections facilities and are under community corrections supervision. In addition to community corrections facilities, the standards also address the responsibilities of pretrial, probation, and parole officials who supervise offenders in the community. Defendants/offenders in the community

must also be protected from sexual abuse from pretrial, probation, and parole employees as well as other defendants/offenders. Officials must also understand through training how to respond to reports of abuse made by defendants/offenders while under supervision in the community or during incarceration. The standards provide guidance for receiving and acting on these reports.

The Commission believes that full adoption of these standards is necessary to achieve the elimination of sexual abuse in community corrections as Congress intended in passing PREA.



# GLOSSARY

The following terms are used throughout the standards, and agencies should note and understand the definitions of these terms as provided below to ensure proper compliance with the standards. The Commission wishes to draw special attention to the fact that the definitions of sexually abusive conduct that appear here differ from the definitions used by the Bureau of Justice Statistics (BJS). The Commission recognizes that the BJS definitions have been used by agencies for data collection purposes but has formulated somewhat different definitions to capture the full range of conduct the standards seek to address. Additionally, the Commission has deliberately excluded definitions for defendant/offender-on-defendant/offender indecent exposure and voyeurism. Legal definitions for indecent exposure and voyeurism rely on the concept of a sphere of privacy, and although defendants/offenders have a legally cognizable privacy interest, that interest is extremely limited by security interests. Because the extent of defendants/offenders' privacy rights necessarily varies according to legitimate security needs, so too would the circumstances in which it would be appropriate to penalize defendants/offenders for indecent exposure and voyeurism, complicating the task of setting forth a clear policy and consistent practice of enforcement. The reality is that defendants/offenders could be in states of undress around other defendants/offenders and staff, raising the possibility that inmates might be penalized for conduct that is part of the ordinary course of life under community corrections supervision.

**Agency:** The unit of a governing, corporate, or nonprofit authority with direct responsibility for the operation of any community corrections program that supervises defendants/offenders, whether adults or juveniles, including the implementation of policy as set by the governing, corporate, or nonprofit authority.

**Agency head:** The chief authority of a Federal, State, or local community corrections system.

**Allegation:** An oral, written, or electronic statement that sexual abuse has occurred or might occur that is provided to a staff member, volunteer, or outside agency.

**Audit:** A thorough investigatory review of information, including written records and interviews with staff and defendants/offenders, to determine whether and the extent to which an agency's or facility's policies, practices, and protocols comply with the PREA standards.

**Auditor:** An individual or entity that the jurisdiction employs or retains by contract to perform audits. An auditor may also be authorized by law, regulation, or the judiciary to perform audits; however, an auditor cannot be an agency employee. An auditor is able and prequalified by the U.S. Department of Justice to perform audits competently and without bias. Prequalification does not require prior employment with any particular agency.

**Community corrections:** Supervision of individuals, whether adults or juveniles, in a community setting as a condition of incarceration, pretrial release, probation, parole, or post-release supervision. These settings would include day and evening reporting centers.

**Contractor:** A person who provides services other than direct services to defendants/offenders on a recurring basis according to a contractual agreement with the agency (e.g., maintenance contractors).

**Credibility assessment:** An investigator's process of conducting interviews and weighing evidence to determine the truthfulness of victim, witness, and suspect statements.

**Critical incident:** An occurrence or event, natural or human-caused, which requires an immediate response to protect life, facility safety, or property.

**Cultural competence:** The ability to work and communicate effectively with people of diverse racial, ethnic, religious, and social groups based on an awareness and understanding of differences in thoughts, communications, actions, customs, beliefs, and values.

**Defendant:** A person, whether adult or juvenile, under the jurisdiction of an agency in pre-adjudication status.

**Employee:** A person who works directly for the agency or facility, or a person who provides direct services to defendants/offenders on a recurring basis according to a contractual agreement with the agency (e.g., contracted food service providers).

**Facility:** A place, institution, building (or part thereof), set of buildings, or area (whether or not enclosing a building or set of buildings) where defendants/offenders reside pursuant to a court order or condition of supervision for purposes of confinement, care, and/or treatment. A facility may be owned by a public, private, or nonprofit agency.

**Facility head:** The chief authority of an individual confinement facility operated by a Federal, State, or local correctional or law enforcement agency or by a private entity (whether for-profit or nonprofit).

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

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

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

**Jurisdiction:** A legal entity of government with geographic boundaries, such as the United States, a State, a county, or a municipal entity.

**Medical practitioner:** A health professional who, by virtue of education, credentials, and experience, is permitted by law to evaluate and care for patients within the scope of his or her professional practice. A "qualified medical practitioner" refers to such a professional who has also successfully completed specialized training for treating sexual abuse victims.

**Mental health practitioner:** A mental health professional who, by virtue of education, credentials, and experience, is permitted by law to evaluate and care for patients within the scope of his or her professional practice. A “qualified mental health practitioner” refers to such a professional who has also successfully completed specialized training for treating sexual abuse victims.

**Need to know:** A criterion for limiting access of certain sensitive information to individuals who require the information to make decisions or take action with regard to a defendant/offender’s safety or treatment, or to the investigative process.

**Offender:** A person, whether adult or juvenile, under the jurisdiction of an agency in post-adjudication status.

**Parole:** The discretionary release authority of an agency to determine when and under what conditions a defendant/offender is released from a period of incarceration and to determine responses to violations of parole conditions.

**Parole or post-release supervision agency:** The correctional agency responsible for supervising defendants/offenders released by a parole board, by statutorily defined release supervision conditions, or by executive clemency. Its functions may include prerelease investigations, parole plan preparation for prospective parolees, and the supervision of adults having parole or other conditional release status.

**Parolee:** A person who has been placed on parole by a releasing authority.

**Pat-down search:** A superficial running of the hands over the body of a defendant/offender by a staff member to determine whether the defendant/offender possesses contraband.

**PREA coordinator:** A senior-level position that reports directly to the agency head. The PREA coordinator’s responsibilities include developing, implementing, and overseeing the agency’s plan to comply with the PREA standards. He or she is also responsible for ensuring the completion of the assessment checklists in this body of standards. The PREA coordinator is a full-time position in all agencies that operate their own community corrections facilities housing more than 500 defendants/offenders in one location. The PREA coordinator may be a part-time position in agencies that operate their own community corrections facilities with less than 500 defendants/offenders in one location or those agencies that solely contract with community corrections providers for the placement of defendants/offenders. The PREA coordinator may also be a part-time position in probation, pretrial, and parole agencies.

**Preponderance of the evidence standard:** The standard of proof used in most civil cases that requires the party bearing the burden of proof to present evidence that is more credible and convincing than the evidence presented by the other party. This standard is satisfied if the evidence shows that it is more probable than not that an event occurred. Preponderance of the evidence is a lesser standard of proof than “beyond a reasonable doubt,” which is required to convict in a criminal trial.

**Pretrial:** The status of a person who may be detained or released while awaiting trial for an alleged offense. Pretrial release may involve restrictive conditions ordered by the court and supervised by a pretrial services or diversion agency.

**Pretrial services agency:** An agency of the criminal justice system that interviews and verifies information on defendants prior to initial court appearance, makes recommendations to the court for release decision making in some jurisdictions, and supervises pretrial defendants in the community under conditions set by the court.

**Probation:** A court-ordered disposition that permits a convicted or adjudicated offender to serve a sentence or suspended sentence in the community under the control, supervision, and care of a probation officer and under specific conditions of supervision. A probation sentence may include serving time in jail, payment of fines, and other required penalties and conditions of behavior.

**Probationer:** A person who is placed on probation status and required to meet prescribed conditions of behavior.

**Protocol:** Written instructions that guide the implementation of policies.

**Report:** Any allegation of sexual abuse. See definition of *allegation*.

**Sexual abuse:** Encompasses (1) defendant/offender-on-defendant/offender sexual abuse, (2) defendant/offender-on-defendant/offender sexual harassment, (3) staff-on-defendant/offender sexual abuse, and (4) staff-on-defendant/offender sexual harassment.

**(1) Defendant/offender-on-defendant/offender sexual abuse:** Encompasses all incidents of defendant/offender-on-defendant/offender sexually abusive contact and penetration.

**Defendant/offender-on-defendant/offender sexually abusive contact:** Non-penetrative touching (either directly or through the clothing) of the genitalia, anus, groin, breast, inner thigh, or buttocks without penetration by a defendant/offender of another defendant/offender without the latter's consent, or of a defendant/offender who is coerced into sexual contact by threats of violence, or of a defendant/offender who is unable to consent or refuse.

**Defendant/offender-on-defendant/offender sexually abusive penetration:** Penetration by a defendant/offender of another defendant/offender without the latter's consent, or of a defendant/offender who is coerced into sexually abusive penetration by threats of violence, or of a defendant/offender who is unable to consent or refuse. The sexual acts included are:

- Contact between the penis and the vagina or the anus;
- Contact between the mouth and the penis, vagina, or anus; or
- Penetration of the anal or genital opening of another person by a hand, finger, or other object.

**(2) Defendant/offender-on-defendant/offender sexual harassment:** Repeated and unwelcome sexual advances, requests for sexual favors, verbal comments, or gestures or actions of a derogatory or offensive sexual nature by one defendant/offender directed toward another.

**(3) Staff-on-defendant/offender sexual abuse:** Encompasses all occurrences of staff-on-defendant/offender sexually abusive contact, staff-on-defendant/offender sexually abusive penetration, staff-on-defendant/offender indecent exposure, and staff-on-defendant/offender voyeurism. Staff solicitations of defendants/offenders to engage in sexual contact or penetration constitute attempted staff-on-defendant/offender sexual abuse.

**Staff-on-defendant/offender sexually abusive contact:** Non-penetrative touching (either directly or through the clothing) of the genitalia, anus, groin, breast, inner thigh, or buttocks by a staff member of a defendant/offender with or without the latter's consent that is unrelated to official duties.

**Staff-on-defendant/offender sexually abusive penetration:** Penetration by a staff member of a defendant/offender with or without the latter's consent. The sexual acts included are:

- Contact between the penis and the vagina or the anus;
- Contact between the mouth and the penis, vagina, or anus; or
- Penetration of the anal or genital opening of another person by a hand, finger, or other object.

**Staff-on-defendant/offender indecent exposure:** The display by a staff member of his or her uncovered genitalia, buttocks, or breast in the presence of a defendant/offender.

**Staff-on-defendant/offender voyeurism:** An invasion of a defendant/offender's privacy by staff for reasons unrelated to official duties or when otherwise not necessary for safety and security reasons, such as peering at a defendant/offender who is using a toilet in an area observable by staff, requiring a defendant/offender to expose his or her buttocks, genitals, or breasts, or taking images of all or part of a defendant/offender's naked body or of a defendant/offender performing bodily functions and distributing or publishing them.

**(4) Staff-on-defendant/offender sexual harassment:** Repeated verbal comments or gestures of a sexual nature to a defendant/offender by a staff member. Such statements include demeaning references to gender, sexually suggestive or derogatory comments about body or clothing, or obscene language or gestures.

**Staff:** Employees and volunteers.

**Strip search:** A search that requires a person to remove or arrange some or all of his or her clothing so as to permit a visual inspection of the underclothing, breasts, buttocks, or genitalia of such person.



**Substantiated allegation:** An allegation that was investigated and the investigation determined that the alleged event occurred.

**Supervised release:** The process of monitoring defendants/offenders who have been placed on some type of release status following a sentence of incarceration.

**Transgender:** A term describing persons whose gender identity and/or expression do not conform to the gender roles assigned to them at birth.

**Unfounded allegation:** An allegation that was investigated and the investigation determined that the alleged event did not occur.

**Unsubstantiated allegation:** An allegation that was investigated and the investigation produced insufficient evidence to make a final determination as to whether or not the event occurred.

**Victim advocate:** An individual, who may or may not be affiliated with the agency, who provides victims with a range of services during the forensic exam and investigatory process. These services may include emotional support, crisis intervention, information and referrals, and advocacy to ensure those victims' interests are represented, their wishes respected, and their rights upheld.

**Video monitoring system:** An integrated security system consisting of installed cameras monitored by employees, which augments and/or enhances the ability of employees to provide the sight and sound supervision necessary to prevent, detect, contain, and respond to incidents of sexual abuse.

**Visual body cavity search:** A visual inspection of a body cavity, defined as a rectal cavity or vagina, for the purpose of discovering whether contraband is concealed in it.

**Volunteer:** An individual who donates his or her time and effort on a recurring basis to enhance the activities and programs of the agency.

# I. PREVENTION AND RESPONSE PLANNING

## Prevention Planning (PP)

Community Corrections Facilities

Pretrial, Probation, and Parole

### PP-1 Zero tolerance of sexual abuse

The agency has a written policy mandating zero tolerance toward all forms of sexual abuse and enforces that policy by ensuring all of its facilities and community supervision functions comply with the PREA standards. The agency employs or designates a PREA coordinator to oversee agency efforts to comply with the PREA standards.

Assessment Checklist	YES	NO
(a) Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse?		
(b) Does the agency ensure that all of its facilities comply with the PREA standards?		
(c) Does the agency employ or designate a PREA coordinator to oversee agency efforts to comply with the PREA standards?		

#### Discussion

Eliminating sexual abuse in community corrections requires first and foremost a commitment to safety as a core mandate of community corrections operations. Agency and facility heads will be responsible not only for ensuring that staff and defendants/offenders are informed of the agency's and facility's zero-tolerance policy toward sexual abuse but for setting a tone that signals true commitment to a culture of safety and security for all defendants/offenders and staff. The agency head will also be responsible for employing or designating a PREA coordinator to manage and oversee the agency's efforts to comply with the PREA standards. The PREA coordinator's job should include: (1) developing written policies that follow community corrections best practices and meet the intent of the PREA standards, (2) developing and implementing a training plan that fulfills the PREA training standards, (3) monitoring defendant/offender screening procedures and investigations according to the PREA standards, (4) supervising the agency's data collection efforts, and (5) providing appropriate access and materials to auditors. By definition, the PREA coordinator will be a senior-level position reporting directly to the agency head. In that capacity, the PREA coordinator should provide routine updates to the agency head, including at executive-level meetings, on his or her areas of responsibility, progress reports on standards implementation and compliance, and notice of any problems or challenges that need to be addressed.

To ensure successful compliance with the PREA standards, the PREA coordinator may need to develop strategies to address the culture of the agency or facility(ies) to determine the levels of staff and defendant/offender resistance or openness to PREA standards implementation. Examples of strategies may include conducting or coordinating assessments by surveying staff members and defendants/offenders to understand their attitudes, beliefs, and values that support or conflict with a "reporting" culture that creates safety and security. Based on the results of the assessment, the PREA coordinator and facility head(s) should work with key staff on all levels to design strategies that create a cultural "readiness" for change (e.g., development of

new policies, staff briefings, video briefings from leadership for staff, and strategic planning meetings), training programs, and other systems to change the culture to one in which staff and defendants/offenders embrace the goals and values of PREA and institutional safety.

- Community Corrections Facilities
- Pretrial, Probation, and Parole

## PP-2 Contracting to house or supervise defendants/offenders under community corrections authority

If public community corrections agencies contract for housing or supervision of their defendants/offenders, they do so only with private agencies or other entities, including nonprofit or other government agencies, committed to eliminating sexual abuse, as evidenced by their adoption of and compliance with the PREA standards. Any new contracts or contract renewals include the entity’s obligation to adopt and comply with the PREA standards and specify that the public agency will monitor the entity’s compliance with these standards as part of its monitoring of the entity’s performance. Only in emergency circumstances, in which all reasonable attempts to find a private agency or other entity in compliance with the PREA standards have failed, should a contract be entered into with an entity that fails to comply with these standards. The public agency must document these efforts.

Assessment Checklist	YES	NO
(a) Does the public agency contract for the housing and supervision of defendants/offenders only with private agencies and other entities, including nonprofit or other government agencies, that agree to adopt and comply with the PREA standards?		
(b) Do all new contracts and contract renewals include an obligation to adopt and comply with the PREA standards?		
(c) Do all new contracts and contract renewals specify that the public agency will monitor the entity’s compliance with the PREA standards as part of its monitoring of the entity’s performance?		
(d) Does the public agency have a policy that only allows contracting with entities not in compliance with the PREA standards in emergency circumstances in which all reasonable attempts to contract with an entity in compliance with PREA have failed?		

### Discussion

The goal of this standard is to ensure that all defendants/offenders, regardless of whether they reside in public or private confinement settings or are supervised by public or private entities, are protected from sexual abuse. Public agencies that contract with private agencies or other entities, including other government agencies, to confine or supervise their defendants/offenders are responsible for ensuring such protection of all defendants/offenders by contracting only with those companies or other entities that adopt and comply with the PREA standards. If all reasonable attempts to find an entity in compliance with the PREA standards have failed, under these emergency circumstances an agency may contract with an entity not in compliance with these standards. However, if an agency has contracted with a noncompliant entity, there should be a periodic review to determine if circumstances have changed that would allow contracting with an entity compliant with PREA standards.

☒ Community Corrections Facilities

**PP-3** Defendant/offender supervision

Facility staff provides the defendant/offender supervision necessary to protect defendants/offenders from sexual abuse. The facility administrators and supervisors responsible for reviewing critical incidents must examine areas in the facility where sexual abuse has occurred or may be likely to occur to assess whether physical barriers may allow the abuse to go undetected, the adequacy of staffing levels in those areas during different shifts, and the need for monitoring technology to supplement facility staff supervision. When problems or needs are identified, facility administrators and supervisors take corrective action (DC-3).

Assessment Checklist	YES	NO
(a) Does facility staff provide the supervision of defendants/offenders necessary to protect them from sexual abuse?		
(b) Do the facility administrators and supervisors responsible for reviewing critical incidents examine areas in the facility where sexual abuse has occurred or may be likely to occur to assess the following?		
• Physical barriers that may allow the abuse to go undetected		
• Adequacy of staffing levels in those areas during different shifts		
• Monitoring technology needs		
(c) When problems or needs are identified, do facility administrators and supervisors take corrective action? (Attach description of corrective actions taken.)		

**Discussion**

Adequate staff supervision of defendants/offenders is an essential component of any agency’s sexual abuse prevention strategy. It enables facility staff to identify aggressive or coercive defendant/offender behavior before it escalates to sexual abuse, to identify signs of inappropriate staff relationships developing with defendants/offenders before they become abuse, to respond immediately to prevent or end incidents of abuse by defendants/offenders or staff, and, when an incident does occur, to rapidly take the steps necessary for an effective response.

Some community corrections facilities will be large enough and have a physical layout that will allow for direct supervision by facility staff of defendants/offenders. Through direct supervision, staff can have continuous direct contact with defendants/offenders, enabling them to interact with and observe defendants/offenders at all or most times. When feasible, the Commission recommends that these facilities strive to meet this standard by employing a direct supervision model.

For many residential facilities, given their size, physical structure, and mission, it is not possible or optimal to have continuous direct contact between facility staff and defendants/offenders. However, facility staff should be properly trained to continually monitor activities within the facility. The standard requires the facility administrators and supervisors responsible for reviewing critical incidents to examine known areas where sexual abuse has occurred or may be likely to occur to assess and take corrective action regarding any physical barriers that may allow the abuse to go undetected, any problems with staffing levels in those areas at different times of the day, and any needs for monitoring technology to supplement facility staff supervision. In examining known areas where sexual abuse has occurred

or may be likely to occur, for example, they may find blind spots or inadequate staffing patterns on particular shifts, which require new or different staff deployment schemes. Such reviews may require more frequent rounds by staff or surprise inspections in particularly problematic areas. Facility staff should examine each area carefully and take corrective action to ensure that defendants/offenders in all areas of the facility are safe from sexual abuse. Moreover, when patterns of abuse have been identified in reviews (DC-1, DC-3), either at a given time of day, in a particular area, or involving certain types of defendants/offenders, facility leadership should take action to ensure increased supervision during those times, in those areas, or for those groups of defendants/offenders.

Community Corrections Facilities

**PP-4** Limits to cross-gender viewing and searches

Except in the case of emergency, the facility prohibits cross-gender strip and visual body cavity searches. Except in the case of emergency or other extraordinary or unforeseen circumstances, the facility restricts nonmedical staff from viewing defendants/offenders of the opposite gender who are nude or performing bodily functions and similarly restricts cross-gender pat-down searches. Medical practitioners conduct examinations of transgender individuals to determine their genital status only in private settings and only when an individual’s genital status is unknown.

Assessment Checklist	YES	NO
(a) Except in the case of emergency, does the facility prohibit cross-gender searches of the following types?		
• Strip		
• Visual body cavity		
(b) Except in the case of emergency or other extraordinary or unforeseen circumstances, does the facility restrict cross-gender viewing by nonmedical staff of defendants/offenders who are nude or performing bodily functions?		
(c) Except in the case of emergency or other extraordinary or unforeseen circumstances, does the facility restrict cross-gender pat-down searches?		
(d) Are examinations of transgender individuals to determine their genital status conducted only by medical practitioners in private settings and only when an individual’s genital status is unknown?		

**Discussion**

The goal of this standard is to protect the privacy and dignity of defendants/offenders and to reduce opportunities for staff-on-defendant/offender sexual abuse by prohibiting cross-gender strip and visual body cavity searches, setting limits on cross-gender viewing of defendants/offenders by nonmedical staff, and restricting cross-gender pat-down searches.

This standard imposes a strong prohibition on cross-gender strip and visual body cavity searches, except in the case of emergency. Performance of these more intrusive strip searches and body cavity searches should be undertaken only by specially trained, designated employees of the same gender and conducted in conformance with hygienic procedures and professional practices.

This standard does not place a prohibition on cross-gender pat-down searches and viewing of defendants/offenders, but requires these actions to be strictly limited in practice and

only in the case of emergency or other extraordinary or unforeseen circumstances. The Commission recognizes that many State and local laws already restrict cross-gender viewing of defendants/offenders and encourages agencies to consult and follow their relevant State and local laws. The Commission likewise acknowledges that cross-gender supervision, in general, can prove beneficial in certain confinement settings and in no way intends for this standard to limit employment (or position assignment) opportunities for men or women.

Agencies are encouraged to use a number of tools to aid compliance with the portion of this standard prohibiting viewing defendants/offenders of the opposite gender who are nude or performing bodily functions. In small residential facilities, this may not be an issue given the physical layout and private bathroom areas where residents are able to close doors. In larger community corrections facilities, the layout of the facility may require other methods to comply with this standard, including the use of privacy panels for shower and toilet areas and making verbal announcements when a staff member of the opposite gender is in an area.

Many community corrections facilities may not engage in either strip or visual body cavity searches. However, if staff is permitted to conduct such searches, each agency is encouraged to have a strong, legally based policy regarding all searches (including same-gender searches) that gives proper regard to the defendant/offender’s rights to privacy and dignity.

In some facilities, although perhaps not often in community corrections, employees conduct strip or body cavity searches of transgender individuals ostensibly to determine their genital status. All too frequently, such examinations are not necessary because the individual’s genital status was already determined at an initial medical screening. To protect the privacy and dignity of transgender individuals, this standard prohibits examinations to determine genital status when that status has already been ascertained. Additionally, this standard requires examinations to determine genital status be conducted in private and by medical practitioners.

- Community Corrections Facilities
- Pretrial, Probation, and Parole

## PP-5 Accommodating defendants/offenders with special needs

The agency or facility ensures that defendants/offenders who are limited English proficient (LEP), deaf, or disabled are able to report sexual abuse to staff directly, through interpretive technology, or through nondefendant/offender interpreters. Accommodations are made to convey all written information about sexual abuse policies, including how to report sexual abuse, verbally to defendants/offenders who have limited reading skills or who are visually impaired.

Assessment Checklist	YES	NO
(a) Are all LEP, deaf, and disabled defendants/offenders able to report sexual abuse to staff directly, through interpretive technology, or through non-defendant/offender interpreters?		
(b) Are accommodations made to convey all written information about sexual abuse policies, including how to report sexual abuse, verbally to defendants/offenders with limited reading skills or who are visually impaired?		

### Discussion

The ability of all defendants/offenders to communicate effectively and directly with staff, without having to rely on defendant/offender interpreters, is crucial for ensuring that they are able to report sexual abuse as discreetly as possible. It is never desirable or sufficient for

defendants/offenders to serve as interpreters or translators for other defendants/offenders to report abuse because it compromises confidentiality and places some defendants/offenders in a position of undue influence over others. It is likewise critical that all defendants/offenders be informed of the agency’s policies, including how to report, in a way and format that they understand. If the language and communication needs of the defendant/offender population are unknown, the facility head or PREA coordinator may need to conduct an assessment of those needs and develop policies and protocols to address them. Having strong policies and protocols will help staff ensure the safety of LEP, deaf, and disabled defendants/offenders as well as those defendants/offenders who have limited reading skills or who are visually impaired.

Community Corrections Facilities       Pretrial, Probation, and Parole

## PP-6 Hiring and promotion decisions

The agency or facility does not hire or promote anyone who has engaged in sexual abuse in an institutional setting or who has engaged in sexual activity in the community facilitated by force, the threat of force, or coercion. Consistent with Federal, State, and local law, the agency or facility makes its best effort to contact all prior institutional employers for information on substantiated allegations of sexual abuse and must run criminal background checks for all applicants and employees being considered for promotion and examine and carefully weigh any history of criminal activity at work or in the community, including convictions or adjudications for domestic violence, stalking, and sex offenses. The agency or facility also asks all applicants and employees directly about previous misconduct during interviews and reviews.

Assessment Checklist	YES	NO
(a) Consistent with Federal, State, and local law, does the agency or facility make its best effort to contact all prior institutional employers for information on substantiated allegations of sexual abuse?		
(b) Does the agency or facility disqualify applicants or employees being considered for promotion upon learning of the following?		
• Any history of substantiated allegations of sexual abuse in an institutional setting		
• That they have engaged in sexual activity in the community facilitated by force, the threat of force, or coercion		
(c) Does the agency or facility run criminal background checks for all applicants and employees being considered for promotion?		
(d) Does the agency or facility carefully consider any history of criminal activity at work or in the community, including the following?		
• Any convictions or adjudications for domestic violence		
• Any convictions or adjudications for stalking		
• Any convictions or adjudications for sex offenses committed in the community		
(e) Does the agency or facility ask all applicants and employees directly about previous misconduct during interviews and reviews?		

### Discussion

An agency will not be able to meet its zero-tolerance goal if it employs or promotes anyone who has engaged in sexual abuse in an institutional setting or who has engaged in sexual activity facilitated by force, the threat of force, or coercion. Coercion includes but is not



limited to using a position of authority or power to compel someone to engage in sexual activity. Changing agency and facility culture and eliminating sexual abuse can be difficult enough without adding the unnecessary additional risk of hiring or retaining individuals whose conduct has demonstrated a lack of personal commitment to PREA's goals. In addition to making its best effort to contact all prior institutional employers for information on substantiated allegations of sexual abuse, the agency or facility should have a consistent, proactive policy on asking applicants and employees directly about previous misconduct during interviews or reviews. In jurisdictions in which prospective employers are limited in their inquiry of previous employment or criminal background, the agency should consider having job applicants sign waivers, if not prohibited by law, stating that they waive their legal rights to claim libel, defamation, or slander regarding any information given during reference checks about their disciplinary history involving sexual abuse.

Although many agencies and facilities already run routine criminal background checks for applicants, the standard requires agencies to run such checks, where allowable by law, both for all applicants and for employees being considered for promotion to ensure that agencies and facilities are always up to date on any criminal activity perpetrated by applicants or employees since gaining employment. The standard does not prescribe how to evaluate criminal histories because the Commission recognizes that the agency or facility will have to consider each criminal history on a case-by-case basis and within a larger context of the person's background, life experiences, and work history. When considering previous criminal activity, the agency or facility will have to weigh a number of factors, including the nature and number of offenses and how much time has passed since any convictions, to determine whether to hire or promote an individual.

## Response Planning (RP)

### Community Corrections Facilities

#### RP-1 Evidence protocol and forensic medical exams

The agency or facility follows a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. The protocol must be adapted from or otherwise based on the 2004 U.S. Department of Justice's Office on Violence Against Women publication "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," subsequent updated editions, or similarly comprehensive and authoritative protocols developed after 2004. As part of the agency's or facility's evidence collection protocol, the agency or facility refers all victims of defendant/offender-on-defendant/offender sexually abusive penetration or staff-on-defendant/offender sexually abusive penetration to forensic medical exams performed by qualified forensic medical examiners. Forensic medical exams are provided free of charge to the victim. The agency or facility makes available or provides referrals to a victim advocate to accompany the victim through the forensic medical exam process.



Assessment Checklist	YES	NO
(a) Has the agency or facility developed a written protocol adapted from or otherwise based on the U.S. Department of Justice’s “A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents,” any subsequent updated editions, or similarly comprehensive and authoritative protocols developed after 2004 that will govern its response to incidents of sexual abuse?		
(b) Does the agency or facility provide victims of defendant/offender-on-defendant/offender sexually abusive penetration or staff-on-defendant/offender sexually abusive penetration with access to a forensic medical exam?		
(c) Where available in the local jurisdiction, are all forensic medical exams provided by the agency or facility performed by a qualified forensic medical examiner?		
(d) Are forensic medical exams provided free of charge to the victim?		
(e) Does the agency or facility make available or provide a referral to a victim advocate to accompany the victim through the forensic medical exam process?		

### Discussion

At the time of publication of this body of standards, the 2004 U.S. Department of Justice’s Office on Violence Against Women publication “A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents” is considered the “gold standard” of sexual assault evidence protocols by the law enforcement and forensic medical examiner communities. The protocol can be found electronically at the following Web address: <http://www.ncjrs.gov/pdffiles1/ovw/206554.pdf>. The agency or facility head should review the national protocol or a subsequent updated edition and incorporate it into the agency’s or facility’s current protocol or use it to develop a new agency or facility protocol by adapting the national protocol to fit the agency’s or facility’s needs, resources, and policies. The agency or facility head may find it particularly helpful to consult Appendix A of the national protocol, which provides guidance on how jurisdictions can customize the national protocol to meet specific local needs, challenges, policies, and statutes.

Not all parts of the evidence protocol may apply to activities undertaken by a community corrections facility or supervision agency. An agency or facility may not have either medical or investigative employees. They may refer any allegations of sexual abuse immediately to community law enforcement entities who handle all aspects of the investigation. However, any agency or facility should ensure that it follows those aspects of the protocol necessary to preserve evidence up to the point when local law enforcement or medical practitioners are brought into the process. This standard is meant to ensure that actions by agency or facility staff do not jeopardize future criminal prosecutions or administrative proceedings by compromising crucial evidence.

If the agency or facility does employ medical or mental health practitioners, the agency or facility head should ensure that all medical and mental health practitioners who treat defendant/offender victims of sexual abuse understand the importance of conducting prompt examinations to identify medical and mental health needs and minimize the loss of evidence. It is critical that victims’ acute medical and mental health needs be evaluated and addressed before evidence is collected on-site or before they are transported off-site for evidence collection. Key elements of proper evidence collection, discussed at length in the national protocol, include: (1) instructing victims not to wash, brush their teeth, change their clothes, urinate, defecate, smoke, drink, or eat until they have been initially evaluated by a forensic medical examiner (OR-3) and (2) educating individuals involved in the handling, documentation, transfer, and storage of evidence about how to preserve evidence and maintain the

chain of custody. Victims must be offered the opportunity to undergo a forensic medical exam, but the decision is a voluntary one for the victim to make. If there are no medical or mental health practitioners employed with the agency or facility, other agency or facility employees should be trained as first responders to ensure they do not compromise the collection of evidence (OR-3).

Additionally, the forensic medical exam is an important element of both evidence collection and treatment for recent sexual abuse victims. When possible, it is considered best practice to transport victims to outside health care providers for forensic medical exams to avoid any conflict or appearance of conflict of interest regarding potential evidence or treatment of the victim. If an agency or facility does not have access to any community providers able to perform forensic medical exams or if a specific defendant/offender in need of an exam has been deemed a flight risk or too dangerous to transport out of the facility, it should take steps to contract with qualified independent medical practitioners to perform the forensic exams at the facility. When an individual defendant/offender has been deemed a flight risk or too dangerous to transport out of the facility, the facility head should document in writing at the time the decision is made the factors that led to the decision not to transport the defendant/offender off-site. Please see Appendix A for more on the responsibilities of forensic medical examiners.

Community Corrections Facilities

**RP-2 Agreements with outside public entities and community service providers**

The agency or facility maintains or attempts to enter into written memoranda of understanding (MOUs) or other agreements with an outside public entity or office that is able to receive and immediately forward defendant/offender reports of sexual abuse to agency or facility heads (RE-1). The agency also maintains or attempts to enter into MOUs or other agreements with community service providers that are able to: (1) provide defendants/offenders with confidential emotional support services related to sexual abuse and (2) help victims of sexual abuse during their transition from a community corrections facility into the community. The agency or facility maintains copies of written agreements or documentation showing attempts to enter into agreements.

Assessment Checklist	YES	NO
(a) Does the agency or facility maintain an agreement or attempt to enter into an agreement with an outside public entity or office that is able to receive and immediately forward defendant/offender reports of sexual abuse to agency or facility heads?		
(b) Does the agency maintain or attempt to enter into agreements with community service providers that are able to do the following?		
• Help victims of sexual abuse during their transition from community corrections facilities into the community		
• Provide defendants/offenders with confidential emotional support services related to sexual abuse		
(c) Does the agency or facility maintain copies of agreements or documentation showing attempts to enter into agreements?		

**Discussion**

Working to establish partnerships with outside public entities and community service providers will enable the agency or facility to meet the requirements of standards RE-1, RE-3, and MM-2 most effectively. Forging these partnerships will allow the agency or facility to

provide the range of services available in the community and will give defendants/offenders the choice to speak to someone not affiliated with the agency if they feel more comfortable doing so. As a result of their status in the community, defendants/offenders may already have greater access to community resources than incarcerated individuals. However, the Commission believes the community corrections agency or facility should still attempt to establish partnerships to ensure that defendants/offenders are provided resources for reporting sexual abuse and obtaining support services.

When an agency or facility establishes an MOU with an outside public entity or office to receive defendant/offender reports of sexual abuse, it should make clear that the outside public entity is responsible for forwarding those reports back to the agency or facility immediately upon receipt, unless the defendant/offender requests confidentiality (RE-1). For cases in which facilities are located in areas lacking adequate community service providers willing to provide victim support services to defendants/offenders, the agency or facility head is required by RE-3 to identify regional and/or national agencies or groups that defendants/offenders may be able to access by telephone or, if no other alternative is possible, by mail and provide defendants/offenders with that contact information.

Although the Commission recognizes that community corrections agencies or facilities may not be able to persuade outside public entities or community service providers to enter into formal agreements, it nonetheless requires agencies or facilities to try to enter into agreements. For community corrections agencies or facilities that successfully enter into agreements with outside public entities and community service providers, the Commission recommends that agreements contain the following elements: (1) the purpose of the agreement; (2) the respective roles and responsibilities of the community corrections agency or facility and outside public entity or community service provider; (3) the procedures for how and when community service providers may enter a residential facility; (4) the safety precautions that community service providers should take when working with defendants/offenders; and (5) any laws, rules, and/or regulations relevant to the service being provided, including laws granting privilege and agency or facility rules governing confidentiality for disclosures about sexual abuse made to community service providers.

## ☒ Community Corrections Facilities

### RP-3 Agreements with outside law enforcement agencies

If an agency or facility does not have the legal authority to conduct criminal investigations or has elected to permit an outside agency to conduct criminal or administrative investigations of staff or defendants/offenders, the agency or facility maintains or attempts to enter into a written MOU or other agreement specific to investigations of sexual abuse with the law enforcement agency responsible for conducting investigations. If the agency or facility confines defendants/offenders under the age of 18 or applicable age of majority within that jurisdiction, or other defendants/offenders who fall under State and local vulnerable persons statutes, the agency or facility maintains or attempts to enter into an MOU with the designated State or local services agency with the jurisdiction and authority to conduct investigations related to the sexual abuse of vulnerable persons within community corrections facilities. When the agency or facility already has an existing agreement or long-standing policy covering responsibilities for all criminal investigations, including sexual abuse investigations, it does not need to enter into a new

agreement. The agency or facility maintains a copy of the written agreement or documentation showing attempts to enter into an agreement.

Assessment Checklist	YES	NO
(a) If the agency or facility does not have the legal authority to conduct criminal investigations or has elected to permit an outside agency to conduct criminal or administrative investigations of staff or defendants/offenders, has the agency or facility established or attempted to establish a written MOU or other agreement specific to investigations of sexual abuse with the law enforcement agency responsible for conducting investigations?		
(b) If the agency or facility confines defendants/offenders under the age of 18 or other defendants/offenders who fall under State and local vulnerable persons statutes, has the agency or facility established or attempted to establish an MOU with the designated State or local services agency with the jurisdiction and authority to conduct investigations related to the sexual abuse of vulnerable persons within community corrections facilities?		
(c) Does the agency or facility maintain a copy of the agreement or documentation showing attempts to enter into an agreement?		

### Discussion

Standing agreements between community corrections agencies or facilities and outside law enforcement agencies outlining how they will work together while investigating an incident of sexual abuse are important for ensuring that investigations into allegations of sexual abuse are timely and effective. Although the Commission recognizes that community corrections agencies or facilities may not be able to persuade outside law enforcement agencies to enter into agreements, it nonetheless requires agencies or facilities to try to enter into agreements. For community corrections agencies or facilities that successfully enter into agreements with outside law enforcement agencies, the Commission recommends that agreements contain the following elements: (1) the criteria, protocol, and timetables for referring an allegation of sexual abuse to the outside law enforcement agency for investigation; (2) the respective roles and responsibilities for conducting sexual abuse investigations; (3) the respective roles and responsibilities of the community corrections and law enforcement agencies for collecting evidence in accordance with the community corrections or law enforcement agency's evidence protocol; (4) detailed information on how criminal and administrative investigations will be coordinated between the agencies; (5) description of what information will and will not be shared between agencies; (6) the protocol for reporting progress on investigations to community corrections officials; (7) the location of where closed case files will be maintained; (8) the protocol for informing the victim of the progress and outcome of the investigation(s); and (9) a schedule of regular meetings between the agency and law enforcement supervisors to review the efficacy of the agreement and to recommend or make any changes, as necessary.

If the agency or facility confines any defendants/offenders under the age of 18 or applicable age of majority within that jurisdiction, or defendants/offenders who fall under State or local vulnerable persons statutes, an outside services agency will likely have the authority and jurisdiction to conduct separate investigations into allegations of sexual abuse committed against such vulnerable persons. If this is the case, the agency or facility should enter or attempt to enter into an MOU with the State or local services agency, as they would with any law enforcement agency with the authority to conduct investigations, and follow the same recommendations listed above.

☒ Community Corrections Facilities

## RP-4 Agreements with the prosecuting authority

The agency or facility maintains or attempts to enter into a written MOU or other agreement with the authority responsible for prosecuting violations of criminal law. The agency or facility maintains a copy of the written agreement or documentation showing attempts to enter into an agreement.

Assessment Checklist	YES	NO
(a) Has the agency or facility established or attempted to establish a written MOU or other agreement with the authority responsible for prosecuting violations of criminal law?		
(b) Does the agency or facility maintain a copy of the agreement or documentation showing attempts to enter into an agreement?		

### Discussion

Greater collaboration and communication between community corrections agencies or facilities and prosecutors can dramatically affect the success of sexual abuse prosecutions, improving accountability and preventing the recurrence of incidents of sexual abuse. The Commission urges the agency or facility head to maintain regular, ongoing discussions with prosecutors about issues related to any allegations of criminal conduct in the agency or facility.

Although the Commission recognizes that community corrections agencies or facilities may not be able to persuade prosecuting authorities to enter into agreements, it nonetheless requires agencies or facilities to try to enter into agreements. For community corrections agencies or facilities that successfully enter into agreements with prosecutors, the Commission recommends that agreements contain the following elements: (1) the purpose of the agreement (e.g., to ensure effective prosecution of sexual abuse in community corrections settings); (2) identification of the liaison position within each agency/facility; (3) a schedule for joint training of investigators and prosecutors; (4) objective criteria for prosecution referral; (5) a description of the necessary evidence and relevant paperwork prosecutors will need from the agency or facility to prosecute a case of sexual abuse; (6) timeframes for submission of criminal cases to prosecutors; (7) a requirement that prosecutors report back to community corrections agencies or facilities after each case is reviewed; (8) the respective roles and responsibilities of the community corrections agency or facility and the prosecuting authority if the prosecutor decides to prosecute; and (9) a schedule of regular meetings between the agency or facility and prosecution supervisors to review the efficacy of the agreement and to recommend or make any changes, as necessary.

## II. PREVENTION

### Training and Education (TR)

Community Corrections Facilities

Pretrial, Probation, and Parole

#### TR-1 Employee training

The agency or facility trains all employees to be able to fulfill their responsibilities under agency or facility sexual abuse prevention, detection, and response policies and procedures; the PREA standards; and under relevant Federal, State, and local law. The agency or facility trains all employees to communicate effectively and professionally with all defendants/offenders. Additionally, the agency or facility trains all employees on a defendant/offender's right to be free from sexual abuse, the right of defendants/offenders and employees to be free from retaliation for reporting sexual abuse, the dynamics of sexual abuse, and the common reactions of sexual abuse victims. Current employees are educated as soon as possible following the agency's or facility's adoption of the PREA standards, and the agency or facility provides periodic refresher information to all employees to ensure that they know the agency's or facility's most current sexual abuse policies and procedures. The agency or facility maintains written documentation showing employee signatures verifying that employees understand the training they have received.

Assessment Checklist	YES	NO
(a) Do employees receive the training necessary to fulfill their responsibilities under agency or facility sexual abuse prevention, detection, and response policies and procedures; the PREA standards; and relevant Federal, State, and local law?		
(b) Does the agency or facility train all employees to communicate effectively and professionally with all defendants/offenders and emphasize the communication skills necessary when addressing issues of sexual abuse?		
(c) Does the agency or facility train all employees on the following topics?		
• A defendant/offender's right to be free from sexual abuse		
• The right of defendants/offenders and employees to be free from retaliation for reporting sexual abuse		
• The dynamics of sexual abuse (i.e., gender, cultural differences)		
• The common reactions of sexual abuse victims		
(d) Does the agency or facility provide periodic refresher training to ensure that all employees are educated on the agency's or facility's most current sexual abuse policies and procedures?		
(e) Following training, does the agency or facility require employees to sign documentation stating that they understand the training they have received and maintain documentation of these signatures?		

#### Discussion

Under this standard, each agency or facility must provide employees with the knowledge and skills to prevent sexual abuse from occurring, to identify signs that sexual abuse may be occurring, and to take the appropriate actions when they learn of recent or historical incidents of sexual abuse. Additionally, it is important that all employees are trained to communicate effectively and professionally with all defendants/offenders, including those of different races, ethnicities, cultural or religious backgrounds, ages, genders, and sexual orientations as well as

defendants/offenders with differing cognitive abilities. It is also important that all staff members are trained to communicate effectively and professionally about issues related to sexual abuse. Good communication encourages greater trust between employees and defendants/offenders, which may remove one of the obstacles to defendant/offender reporting of sexual abuse.

Employee training can take place in multiple venues, including roll calls, on-the-job training, new employee orientations, and pre-service or in-service academies. It is recommended that an agency’s or facility’s sexual abuse training programs be accompanied by clear sexual abuse prevention policies developed with an eye toward overcoming any anticipated employee resistance to or concerns about such policies. When putting together a training plan, agency or facility administrators and/or PREA coordinators may find it helpful to consult the many resources and training materials already available, including those developed by other local, State, and Federal correctional agencies; the National Institute of Corrections (NIC); and the Bureau of Justice Assistance (BJA).

A full list of suggested employee training topics and procedures is provided in Appendix B. Although Appendix B is not an exhaustive or exclusive list, agencies or facilities may wish to use these items as a starting point for developing their own employee training curriculum and programs.

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## TR-2 Volunteer and contractor training

The agency or facility ensures that all volunteers and contractors who have contact through the agency or facility with defendants/offenders have been trained on their responsibilities under the agency’s sexual abuse prevention, detection, and response policies and procedures; the PREA standards; and relevant Federal, State, and local law. The level and type of training provided to volunteers and contractors is based on the services they provide and level of contact they have with defendants/offenders, but all volunteers and contractors who have contact with defendants/offenders must be notified of the agency’s or facility’s zero-tolerance policy regarding sexual abuse. Volunteers must also be trained in how to report sexual abuse. The agency or facility maintains written documentation showing volunteer and contractor signatures verifying that they understand the training they have received.

Assessment Checklist	YES	NO
(a) Does the agency or facility ensure that all volunteers and contractors who have contact through the agency with defendants/offenders have been trained on their responsibilities under the agency’s sexual abuse prevention, detection, and response policies and procedures; the PREA standards; and relevant Federal, State and local law?		
(b) Does the agency or facility tailor its training for volunteers and contractors based on the services they provide and the level of contact they have with defendants/offenders?		
(c) Are all volunteers and contractors who have contact with defendants/offenders notified of the agency’s or facility’s zero-tolerance policy regarding sexual abuse and trained in how to report sexual abuse to staff and/or other parties, when appropriate?		
(d) Are all volunteers trained in how to report sexual abuse to facility staff and/or other parties, when appropriate?		
(e) Following training, does the agency or facility require volunteers and contractors to sign documentation stating that they understand the training they have received and maintain documentation of these signatures?		



## Discussion

Because many volunteers have frequent contact with defendants/offenders, it is important that all volunteers for the agency or facility receive basic training on the PREA standards, the agency's or facility's zero-tolerance policy, and their responsibilities for reporting sexual abuse to facility security staff. Additionally, any contractors who have any contact with defendants/offenders, however minimal, will also need to be trained on the agency's zero-tolerance policy. The agency or facility may choose to provide more detailed training for all or some subset of volunteers, including many of the same topics suggested for employee training in Appendix B.

Volunteer training may take many forms, including the provision of written information in manual or pamphlet form, as long as there is some record that volunteers have received and understand the information. Volunteers may be trained off-site by their volunteer organization as long as the organization's training program meets the minimum requirements outlined in this standard. In these instances, the agency or facility must verify that the off-site training meets the requirements of this standard and maintain documentation that volunteers have received and understand this training, as mandated by the standard. If the agency or facility trains volunteers, agency or facility administrators and/or PREA coordinators may find it helpful to consult the many resources and training materials already available, including those developed by other local, State, and Federal correctional agencies; NIC; and BJA.

Community Corrections Facilities

Pretrial, Probation, and Parole

## TR-3 Defendant/offender education

During the intake process into a facility or upon initial stages of supervision, staff informs defendants/offenders of the agency's or facility's zero-tolerance policy regarding sexual abuse and how to report incidents or suspicions of sexual abuse. Within a reasonably brief period of time, the agency or facility provides comprehensive education to defendants/offenders regarding their right to be free from sexual abuse and to be free from retaliation for reporting abuse, the dynamics of sexual abuse, the common reactions of sexual abuse victims, and agency or facility sexual abuse response policies and procedures. Current defendants/offenders are educated as soon as possible following the agency's or facility's adoption of the PREA standards, and the agency or facility provides periodic refresher information to all defendants/offenders to ensure that they know the agency's or facility's most current sexual abuse policies and procedures. Periodic refresher training may or may not be necessary in community corrections facilities given the shorter time period defendants/offenders may reside in these facilities. The agency or facility provides defendant/offender education in formats accessible to all defendants/offenders, including those who are LEP, deaf, visually impaired, or otherwise disabled as well as defendants/offenders who have limited reading skills. All information provided to defendants/offenders is communicated in a manner that is appropriate for the defendant/offender's age and level of cognitive and emotional development. The agency or facility maintains written documentation of defendant/offender participation in these education sessions.



Assessment Checklist	YES	NO
(a) During the intake process and upon initial stages of supervision, does staff inform defendants/offenders of the agency's or facility's zero-tolerance policy regarding sexual abuse?		
(b) During the intake process and upon initial stages of supervision, does staff tell defendants/offenders how to report incidents or suspicions of sexual abuse?		
(c) Does the agency or facility provide comprehensive education to defendants/offenders within a reasonably brief period of time following the intake process or upon initial stages of supervision?		
(d) Does the comprehensive education for defendants/offenders include the following topics?		
• A defendant's/offender's right to be free from sexual abuse and free from retaliation for reporting abuse		
• The dynamics of sexual abuse in community corrections		
• The common reactions of sexual abuse victims		
• Agency or facility sexual abuse response policies and procedures		
(e) Does the agency or facility provide periodic refresher training to ensure that all defendants/offenders are educated on the agency or facility's most current sexual abuse policies and procedures?		
(f) Does the agency or facility make training information available in formats accessible to all defendants/offenders, including those who are LEP, deaf, visually impaired, or otherwise disabled and defendants/offenders who have limited reading skills?		
(g) Is all information provided to defendants/offenders communicated in a manner that is appropriate for the defendant/offender's age and level of cognitive and emotional development?		
(h) Does the agency or facility verify a defendant/offender's attendance at training sessions and maintain this written verification?		

### Discussion

Defendants/offenders need to be educated about the agency's or facility's sexual abuse policies so they understand how to protect themselves against sexual abuse, how to report sexual abuse, what will happen following a report, and the consequences for committing sexual abuse. A strong defendant/offender education program will send a message to defendants/offenders that sexual abuse is taken seriously and that the agency or facility will protect defendants/offenders who report incidents of sexual abuse and refer investigations for disciplinary action and/or criminal prosecution. If the agency or facility is responsible for the supervision of young defendants/offenders, the education program should be suited for that population. For example, younger defendants/offenders will need to learn about the agency's or facility's zero-tolerance policy in a way that does not frighten or confuse them, perhaps by explaining to the young defendants/offenders that no relationships beyond friendship are permitted.

In addition to determining an appropriate time frame for providing comprehensive education to new defendants/offenders, the agency or facility should develop a plan for providing the defendant/offender education program to current defendants/offenders to ensure that training is provided within a reasonable period of time after the adoption of the PREA standards, as required by this standard. Although the standard requires periodic refresher training, this may or may not be necessary in community corrections facilities given the shorter time period defendants/offenders may reside in these facilities.

Staff conducting the training should consider using some of the following tools, depending on the learning needs of the training population: videos, written materials, and structured discussions. As with developing a staff or volunteer training program, when putting together a defendant/offender training plan, agency administrators and/or PREA coordinators may find it helpful to consult the many resources and training materials already available, including those developed by other local, State, and Federal correctional agencies; NIC; and BJA.

Staff may need to train defendants/offenders in small groups and in settings with few distractions, due to the sensitive nature of the material. In addition to training sessions provided at specific times, the agency or facility should ensure key information is continually and readily available and/or visible to the defendant/offender population through posters, defendant/offender handbooks, or other written formats.

- Community Corrections Facilities       Pretrial, Probation, and Parole

## TR-4 Specialized training: Investigations

In addition to the general training provided to all employees (TR-1), the agency or facility ensures that investigators employed by the agency or facility and conducting sexual abuse investigations have received comprehensive and up-to-date training in conducting such investigations in community corrections settings. Specialized training must include population-appropriate techniques for interviewing sexual abuse victims, proper use of *Miranda*- and *Garrity*-type warnings, sexual abuse evidence collection in community corrections settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. The agency or facility maintains written documentation that investigators have completed the required specialized training in conducting sexual abuse investigations.

Assessment Checklist	YES	NO
(a) Does the agency or facility ensure that all investigators employed by the agency or facility conducting sexual abuse investigations have received training in conducting such investigations in confinement settings?		
(b) Does specialized training for sexual abuse investigators include the following?		
• Techniques for interviewing sexual abuse victims		
• Proper use of <i>Miranda</i> - and <i>Garrity</i> -type warnings		
• Sexual abuse evidence collection in community corrections settings		
• Criteria and evidence required to substantiate a case for administrative action or prosecution referral		
(c) Does the agency or facility verify that investigators have completed specialized training in conducting sexual abuse investigations and maintain written verification?		

### Discussion

Substantiating and resolving incidents of sexual abuse requires highly competent investigations. Sexual abuse investigations in community corrections settings are particularly complicated, and an agency will not be successful in addressing abuse if it does not ensure that investigators are sufficiently trained. Many community corrections or pretrial, probation, or parole agencies will not employ their own investigators and will instead refer cases to local law enforcement. Under those circumstances, the requirements of this standard will not apply; instead, agency or facility heads will need to make efforts to develop an MOU with law enforcement entities (RP-3).

Because the trauma of sexual abuse can be especially devastating to victims who may already feel powerless and isolated, special care should be given to the quality and training of the investigator to ensure that victims and witnesses are treated in a manner that facilitates victims' recovery and cooperation. Young defendants/offenders may be particularly reluctant to speak with investigators. Investigators working in or with agencies or facilities that house or supervise young defendants/offenders will benefit from training in techniques for communicating effectively with young victims without re-traumatizing them. It is critically important for sexual abuse investigators to be trained in how to interview sexual abuse victims and witnesses of all ages and backgrounds, who may be reluctant to speak to investigators or generally uncooperative. Such training may include strategies for communicating effectively and professionally with all types of defendants/offenders but may also include simple ideas such as making sure that victims and witnesses are interviewed in locations where they feel comfortable talking about the incident. Additionally, all investigators should know how and when to administer *Miranda*- and/or *Garrity*-type warnings to subjects of investigations.

Collecting evidence in community corrections settings requires that investigators understand where to look for evidence in these settings, including DNA evidence, and how staff will secure and preserve crime scenes. Sexual abuse investigators should also know how and when to photograph injuries. In addition to knowing how to collect evidence in a community corrections setting, investigators also need to know how to evaluate that evidence according to the different standards of proof required to substantiate a case for administrative action or prosecution referral. It may also be helpful for investigators to have an understanding of how cases are evaluated for prosecutorial merit.

When developing training curricula for investigators, the agency or facility may find it helpful to consult training materials developed by other Federal, State, and local correctional agencies; NIC; and BJA. In the event individual investigators have previously received the comprehensive training described above and within a time period consistent with the agency's or facility's requirements, the agency or facility does not need to re-train the investigators. In such instances, the agency or facility will need to verify the investigators' preexisting knowledge and understanding of the requirements listed in this standard and their responsibilities under agency or facility policy; the PREA standards; and Federal, State, or local law.

Community Corrections Facilities       Pretrial, Probation, and Parole

## TR-5 Specialized training: Medical and mental health care

The agency or facility ensures that all medical and mental health care practitioners employed or contracted with by the community corrections or pretrial, probation, or parole agency have been trained in how to detect and assess signs of sexual abuse and how to preserve physical evidence of sexual abuse. All medical and mental health care practitioners must be trained in how to respond effectively and professionally to victims of sexual abuse and how and to whom to report allegations or suspicions of sexual abuse. The agency or facility maintains documentation that medical and mental health practitioners have received this specialized training.

Assessment Checklist	YES	NO
(a) Does the agency or facility ensure that all medical and mental health care practitioners employed by or contracted with the agency or facility have been trained in how to detect and assess signs of sexual abuse?		
(b) Does the agency or facility ensure that all medical practitioners employed by or contracted with the agency or facility have been trained in how to preserve physical evidence?		
(c) Are all staff or contract medical and mental health care practitioners trained in how to respond effectively and professionally to all victims of sexual abuse?		
(d) Does the agency or facility provide training in how and to whom to report allegations or suspicions of sexual abuse?		
(e) Does the agency or facility verify that all staff or contract medical and mental health practitioners have received specialized training in detecting, assessing, and responding to sexual abuse victims and maintain this written verification?		

### Discussion

Defendants/offenders are often more likely to report sexual abuse to medical or mental health practitioners rather than to other staff. It is therefore critical that agencies or facilities provide training for medical and mental health practitioners on how to detect sexual abuse and how to elicit, receive, and forward reports of sexual abuse. If the agency or facility is responsible for the supervision of young defendants/offenders, medical and mental health practitioners should be trained and experienced in working with children and young victims of sexual abuse. Many community corrections and pretrial, probation, and parole agencies may not employ or contract with their own medical or mental health practitioners. Under those circumstances, the requirements of this standard will not apply.

This standard requires that staff or contract medical or mental health practitioners who regularly work at a facility or with an agency be specially trained. The Commission recognizes that there may be occasions in which a practitioner works on an extremely short, ad hoc basis. For example, a practitioner may be serving as an emergency substitute for a sick staff member. The standard does not require the agency to ensure such practitioners have received the special training, although it may want to do so to guarantee that at least one specially trained practitioner is on duty at all times.

In the event medical and mental health care practitioners have previously received the training described above and within a time period consistent with the agency's or facility's requirements, the agency does not need to re-train the medical and mental health care staff. In such instances, the agency will need to verify the staff members' preexisting knowledge and understanding of the requirements listed in this standard and their responsibilities under agency policy; the PREA standards; and Federal, State, or local law.

## Screening for Risk of Sexual Victimization and Abusiveness (SC)

Community Corrections Facilities

### SC-1 Screening for risk of victimization and abusiveness

All defendants/offenders are screened during intake to assess their risk of being sexually abused by other defendants/offenders or sexually abusive toward other defendants/offenders. Employees must review information received with the defendant/offender as well as discussions with the defendant/offender. Employees must conduct this screening using a written screening instrument tailored to the gender of the population being screened. Although additional factors may be considered, particularly to account for emerging research and the agency's or facility's own data analysis, screening instruments must contain the criteria described below. For defendants/offenders under the age of 18 or applicable age of majority within that jurisdiction, screening must be conducted by medical or mental health practitioners. If the facility does not have medical or mental health practitioners available, these young defendants/offenders are given an opportunity to participate in screenings in private. All screening instruments must be made available to the public upon request.

- At a minimum, employees use the following criteria to screen male defendants/offenders for risk of victimization: mental or physical disability, young age, slight build, nonviolent history, prior convictions for sex offenses against an adult or child, sexual orientation of gay or bisexual, gender nonconformance (e.g., transgender or intersex identity), prior sexual victimization, and the defendant/offender's own perception of vulnerability.
- At a minimum, employees use the following criteria to screen male defendants/offenders for risk of being sexually abusive: prior acts of sexual abuse and prior convictions for violent offenses.
- At a minimum, employees use the following criteria to screen female defendants/offenders for risk of sexual victimization: prior sexual victimization and the defendant/offender's own perception of vulnerability.
- At a minimum, employees use the following criteria to screen female defendants/offenders for risk of being sexually abusive: prior acts of sexual abuse.

Assessment Checklist	YES	NO
(a) Are all defendants/offenders screened during intake to assess their risk of being sexually abused by other defendants/offenders and/or their risk of being sexually abusive toward other defendants/offenders?		
(b) Does the facility provide employees with a written screening instrument tailored to male or female populations, depending on the makeup of the facility's population?		
(c) Do screening instruments for risk of sexual victimization for male defendants/offenders include the following criteria?		
• Mental or physical disability		
• Young age		
• Slight build		
• Nonviolent history		
• Conviction for sex offenses against an adult or child		
• Sexual orientation of gay or bisexual		
• Gender nonconformance (e.g., transgender or intersex identity)		
• Prior sexual victimization		
• Defendant/offender's own perception of vulnerability		
(d) Do screening instruments for risk of being sexually abusive for male defendants/offenders include the following criteria?		
• Prior acts of sexual abuse		
• Prior convictions for violent offenses		
(e) Do screening instruments for risk of sexual victimization for female defendants/offenders include the following criteria?		
• Prior sexual victimization		
• Defendant/offender's own perception of vulnerability		
(f) Do screening instruments for risk of being sexually abusive for female defendants/offenders include the following criteria?		
• Prior acts of sexual abuse		
(g) Are screening instruments available to the public upon request?		
(h) Are young defendants/offenders screening by medical or mental health practitioners, or if such practitioners are not available, is the screening conducted in private?		

## Discussion

There is currently a paucity of research on effective methods for screening for sexual abusers and victims in community corrections; however, new research may be forthcoming. The Commission strongly recommends that agency and facility heads consult emerging research periodically and tailor their screening instruments to the latest research as well as to the culture, makeup, and geographical regions of the facilities they operate. Agency heads should also consult their collected data (DC-2) to identify any patterns or similar characteristics among sexual abusers and victims in their facilities. In particular, at the time of publication of this body of standards, relatively little is known about predicting heightened risk for sexual victimization or abusiveness for female defendants/offenders. Similarly, less research has been undertaken to identify risk factors for engaging in sexual abuse for male defendants/offenders. The Commission urges researchers to examine these and other relatively unexplored areas, such as screening of non-English speakers and youth, to provide more guidance and direction to corrections practitioners. Further research is also needed to

identify characteristics that may make male or female defendants/offenders more susceptible to sexual abuse by staff.

Defendants/offenders should be screened for risk of sexual victimization or abusiveness as soon as possible following their arrival at a facility. Employees must review information received with the defendant/offender as well as discussions with the defendant/offender. Equally important, however, is ensuring that employees review initial screening results on a periodic basis, depending on the length of stay of the defendant/offender. It is highly likely that more defendants/offenders will be identified as potentially vulnerable or abusive during the initial screening than are actually vulnerable or abusive. For example, there will be many male defendants/offenders with histories of violent felonies who are not actually prone to being sexually abusive. Therefore, the standard requires that screenings be reviewed during intake process and reviewed again if the defendant/offender remains at the facility for any significant length of time. The Commission recommends that employees review the screening results no later than 60 days after the initial screening and every 90 days thereafter.

When screening defendants/offenders for their risk of being sexually abused or abusive, the agency or facility must use the minimum criteria listed in the standard and determine how best to weigh those criteria, depending on the culture and makeup of the facility. The agency or facility will need to decide how to evaluate the impact of the passage of time on the predictive utility of prior convictions for sex offenses or other violent crimes and prior incidents of victimization or abusiveness. For example, a defendant/offender with a single incident of sexual victimization that occurred more than 20 years ago may not be at a greater risk for sexual victimization today. The agency or facility may find it helpful to use other criteria as well. As mentioned above, additional criteria should be developed based on emerging research and the facility's culture, makeup, geographic region, and collected data. Another factor that may be useful for predicting high risk of sexual victimization for male defendants/offenders includes being in the racial minority within a given facility characterized by marked racial tension. Additionally, having effeminate features or mannerisms and not being street smart may also put male inmates at greater risk for sexual victimization. Finally, having an overtly aggressive attitude or intimidating attitude or having a particular gang affiliation may be associated with increased risk for sexually abusing other defendants/offenders.

When asking screening questions related to sexual orientation, it is critical that employees show sensitivity and discretion. It is equally important that employees tell defendants/offenders before they begin the screening that they are not required to answer any of the questions if they would prefer not to. Not all defendants/offenders will feel comfortable answering questions about their sexual orientation, and employees should respect refusals to answer those questions and not press for answers. Defendants/offenders who openly identify as gay or bisexual should be asked if they feel that they need heightened protection while incarcerated. Defendants/offenders who are transgender or intersex should also be asked if they feel that they need heightened protection. Employees should carefully consider and endeavor to respect the views of gay, bisexual, transgender, and intersex defendants/offenders who request or do not want heightened protection.



☒ Community Corrections Facilities

## SC-2 Use of screening information

Employees use information from the risk screening (SC-1) to inform housing, bed, work, education, and program assignments. In many community corrections facilities, it is difficult, if not impossible, to keep defendants/offenders totally separate or segregated from each other. However, the facility can determine, based on the screening information, whether a particular defendant/offender should receive greater supervision, should have more frequent contact with staff, or is more appropriately housed in some alternative type of placement. The facility makes individualized determinations about how to ensure the safety of each defendant/offender. Lesbian, gay, bisexual, transgender, or other gender-nonconforming defendants/offenders are not placed in particular housing assignments solely on the basis of their sexual orientation, genital status, or gender identity.

Assessment Checklist	YES	NO
(a) Do employees use information from the risk screening to inform housing, bed, work, education, and program assignments?		
(b) If a defendant/offender discloses prior sexual victimization or abusiveness during intake screening, does staff provide appropriate referral for treatment based on his or her reasonable professional judgment?		
(c) Does the facility make individualized determinations about how to ensure the safety of each defendant/offender, including lesbian, gay, bisexual, transgender, or other gender-nonconforming defendants/offenders?		

### Discussion

For the sexual abuse screening information to be meaningful, it must be used to inform housing, bed, work, education, and program assignments for each defendant/offender. Because of the inherent risk in assigning defendants/offenders to rooms with multiple occupants, as is the case with many community corrections facilities, employees should consider the results of the screening with particular care and draw on appropriate professional common sense and judgment to determine appropriate pairings of individuals. Total separation or segregation of particular defendants/offenders may not be possible in community corrections facilities. The facility should determine whether a defendant/offender requires greater supervision or more frequent contact with staff. In some cases, the facility may need to determine that alternative placements will better ensure the defendant/offender's safety.

Under this standard, the facility will need to consider each defendant/offender on a case-by-case basis when determining the appropriate placements for housing, work, programs, and education, rather than using blanket policies based on particular elements of a defendant/offender's screening assessment. Preconceived notions, stereotypes, or bias should have no place in the housing decisions made for lesbian, gay, bisexual, transgender, and other gender-nonconforming defendants/offenders. Additionally, lesbian, gay, bisexual, transgender, and other gender-nonconforming defendants/offenders should never be placed solely because of their sexual orientation, genital status, or gender identity. Given that many officials are particularly perplexed about how to house transgender defendants/offenders safely and properly, the Commission also strongly urges agencies or facilities to give careful thought and consideration to the placement of each transgender defendant/offender and not to automatically place transgender individuals in male or female housing based on their birth gender or current genital status.



If an agency or facility is responsible for the confinement of individuals under the age of 18 or applicable age of majority within that jurisdiction, a strong effort should be made to house these individuals separately from adults. Although young defendants/offenders in general may be victimized more often, defendants/offenders under the age of 18 or applicable age of majority within that jurisdiction are not fully emotionally or physically developed and therefore may be particularly susceptible to abuse if housed with older defendants/offenders.

### III. DETECTION AND RESPONSE

#### Reporting (RE)

- Community Corrections Facilities       Pretrial, Probation, and Parole

#### RE-1 Defendant/offender reporting

The agency or facility provides multiple internal ways for defendants/offenders to report easily, privately, and securely sexual abuse, retaliation by other defendants/offenders or staff for reporting sexual abuse, and staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse. The agency or facility also provides at least one way for defendants/offenders to report the abuse to an outside public entity or office not affiliated with the agency that has agreed to receive reports and forward them to the agency or facility head (RP-2), except when a defendant/offender requests confidentiality. Staff accepts reports made verbally, in writing, anonymously, and from third parties and immediately puts into writing any verbal reports.

Assessment Checklist	YES	NO
(a) Does the agency or facility provide multiple internal ways for defendants/offenders to report easily, privately, and securely sexual abuse, retaliation by other defendants/offenders or staff for reporting sexual abuse, and staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse (e.g., locked drop boxes in common areas for reports or requests; grievance procedures; sick-call systems; access to a central or headquarters office)? (Please attach documentation explaining the specific internal reporting mechanisms the agency or facility has in place.)		
(b) Does the agency or facility provide at least one way for defendants/offenders to report sexual abuse to an outside public entity or office not affiliated with the agency or facility that has agreed to receive reports and forward them to the agency or facility head, except when the defendant/offender requests confidentiality (e.g., ombudsperson; outside law enforcement agency; inspector general's office; attorney general's office) (RP-2)? (Please attach documentation explaining the specific outside reporting mechanism(s) the agency or facility has made available to defendants/offenders.)		
(c) Does staff accept reports made verbally, in writing, anonymously, and by third parties?		
(d) Does staff immediately put into writing any verbal reports?		

#### Discussion

The agency or facility should make reporting sexual abuse as easy, private, and secure as possible. The more the agency or facility demonstrates through policy, practice, and staff behaviors its commitment to protecting sexual abuse victims and punishing abusers, the more victims will feel safe coming forward. Although a potential increase in disclosures and investigations may initially tax resources, increased reporting may also signal that defendants/offenders are becoming more trustful of the system, which, in turn, may deter potential abusers from engaging in sexually abusive behaviors. Over time, the agency or facility's initial investment in efforts to make reporting easier and to conduct thorough investigations will serve everyone's interests. Victims will be better supported, abusers will be held accountable, and staff and defendants/offenders will ultimately be able to live and work in safer, more secure environments.

The agency or facility should take seriously all reports of sexual abuse, regardless of the form or format in which they were conveyed. Although the agency or facility may choose to provide different mechanisms for internal reporting, including locked drop boxes in common areas for defendants/offenders to drop reports, requests, or grievances or dedicated phones or programmed phones with toll-free hotline numbers to internal investigative departments, staff should be prepared to accept and respond to all types of reports and manners of reporting. The method used to accept reports will vary by the size and composition of the community corrections facility and the methods of contact used by the defendant/offender to connect with pretrial, probation, or parole officials. The Commission is not dictating one particular method of reporting.

The standard's requirement that the agency or facility enable defendants/offenders to report to at least one outside public entity or office not affiliated with the agency or facility will signal to defendants/offenders that the agency's or facility's chief concern is making sure that defendants/offenders feel safe and comfortable reporting sexual abuse. If the agency or facility has established an MOU with an outside public entity or office that has agreed to accept and forward defendant/offender reports of sexual abuse, the outside public entity should be prepared to send those reports to the agency or facility head immediately upon receipt, unless the defendant/offender requests confidentiality (RP-2). If the agency or facility confines defendants/offenders under the age of 18 or applicable age of majority within that jurisdiction, or other defendants/offenders who fall under State or local vulnerable persons statutes, the agency or facility may allow such defendants/offenders to report directly to the designated State or local services agency that has the authority to conduct investigations into allegations of sexual abuse involving victims that fall under vulnerable persons statutes (RP-3). In addition to developing numerous avenues for receiving reports, staff should be trained and expected to take proactive steps to talk to defendants/offenders periodically about any unwanted sexual behaviors or threats they may be experiencing from other defendants/offenders or staff.

#### ☒ Community Corrections Facilities

## RE-2 Exhaustion of administrative remedies

Under agency or facility policy, a defendant/offender has exhausted his or her administrative remedies with regard to a claim of sexual abuse either (1) when the agency or facility makes a final decision on the merits of the report of abuse (regardless of whether the report was made by the defendant/offender, made by a third party, or forwarded from an outside official or office) or (2) when 90 days have passed since the report was made, whichever occurs sooner. A report of sexual abuse triggers the 90-day exhaustion period regardless of the length of time that has passed between the abuse and the report. A defendant/offender seeking immediate protection from imminent sexual abuse will be deemed to have exhausted his or her administrative remedies 48 hours after notifying any agency or facility staff member of his or her need for protection.

Assessment Checklist	YES	NO
(a) Does agency or facility policy reflect that a defendant/offender has exhausted administrative remedies with regard to a claim of sexual abuse under the following circumstances?		
<ul style="list-style-type: none"> <li>• When the agency or facility makes a final decision on the merits of the report of abuse (regardless of whether the report was made by the defendant/offender, made by a third party, or forwarded from an outside official or office) or</li> <li>• When 90 days have passed since the report was made, whichever occurs sooner</li> </ul>		
(b) Does agency or facility policy reflect that a defendant/offender seeking immediate protection from imminent sexual abuse has exhausted administrative remedies 48 hours after notifying any agency or facility staff member of his or her need for protection?		

### Discussion

Currently, under the Federal Prison Litigation Reform Act (PLRA), correctional agencies are able to raise a defendant/offender’s “failure to exhaust administrative remedies” as an affirmative defense against a defendant/offender’s legal claims brought in Federal court. The definition of “prison” under PLRA includes facilities that “incarcerate or detain juveniles or adults accused of, convicted of, sentenced for, or adjudicated delinquent for, violations of criminal law.” In addition, the definition of “prisoner” under the law includes “any person incarcerated or detained in any facility who is accused of, convicted of, sentenced for, or adjudicated delinquent for, violations of criminal law or the terms and conditions of parole, probation, pretrial release, or a diversionary program.”

The purpose of the exhaustion requirement in PLRA is to ensure that agencies or facilities have an opportunity to respond to a defendant/offender’s complaint before that defendant/offender files a lawsuit. Agencies or facilities are free to determine the procedures by which a defendant/offender “exhausts administrative remedies” by policy. In practice, many agencies or facilities have adopted policies that require a defendant/offender to file a grievance within a relatively short timeframe after the incident of abuse and then to make multiple appeals of the agency’s or facility’s response within specific timeframes to satisfactorily exhaust administrative remedies. Policies that require defendants/offenders to navigate a complicated grievance procedure within a short time after the abuse can result in the dismissal of meritorious legal claims by victims of sexual abuse. Although the statute of limitations to file a lawsuit may be one year or two depending on the type of claim and the jurisdiction, defendants/offenders who fail to file a grievance within one or two weeks after being abused may be permanently barred from court for failing to “exhaust administrative remedies.”

Victims of sexual abuse are particularly vulnerable to having their claims dismissed for this reason because the trauma of sexual abuse and fear of retaliation often prevent them from reporting the incident shortly after it occurs. Furthermore, because grievance procedures are generally not designed as the sole or primary method for reporting incidents of sexual abuse by defendants/offenders to staff, victims who do immediately report abuse to authorities may not realize they need to file a grievance as well to satisfy agency exhaustion requirements. For example, a victim might call the agency’s or facility’s sexual abuse reporting hotline immediately but fail to file a grievance within the short timeframe allowed and later be barred from bringing a valid legal claim because of that failure.

This standard recognizes agencies' or facilities' legitimate interest in having a reasonable opportunity to respond to notice of abuse before being required to defend themselves in court. It also recognizes that PREA's goals are not furthered if defendants/offenders are deemed to have forfeited their ability to seek judicial redress for abuse because they have not reported the abuse within a set timeframe after it occurs. The standard requires agencies or facilities to adopt policies by which a defendant/offender is deemed to have exhausted his or her administrative remedies no later than 90 days after a report of sexual abuse is made and regardless of the time that has elapsed between the abuse and the report. Any report of sexual abuse should trigger a response by the agency or facility, including an investigation into the merits of the allegation (IN-1, IN-2), the provision of appropriate medical and mental health treatment (MM-1, MM-2), and efforts to protect the alleged victim and other defendants/offenders from retaliation and future abuse (OR-5). It is possible that the agency or facility will not have completed its investigation into the report within 90 days, but that is ample time within which the agency or facility can take appropriate steps to protect the defendant/offender and to demonstrate its efforts to find the truth for the purposes of defending against a lawsuit.

Finally, the standard recognizes that there may be urgent, emergency situations when a defendant/offender seeks an immediate injunction from the court to provide protection from imminent harm. In such cases, the standard requires an exception to the 90-day waiting period. Because it is incumbent on the agency or facility to provide protection immediately to a defendant/offender who reports a risk of imminent harm, the agency shall deem the defendant/offender's administrative remedies exhausted 48 hours after such a report is made to any agency or facility employee. A court can determine whether the defendant/offender's request merits an injunction, but the defendant/offender seeking the court's protection should not be required to wait more than 48 hours because the nature of such a request is urgent. If the agency or facility has in fact responded properly to the report or if the report was of such a nature that it did not warrant action on the part of the agency or facility, a court can make that determination at the time the injunction is sought.

#### Community Corrections Facilities

### **RE-3** Defendant/offender access to outside confidential support services

The facility provides defendants/offenders with access to outside victim advocates for emotional support services related to sexual abuse. The facility provides such access by giving defendants/offenders the current mailing addresses and telephone numbers, including toll-free hotline numbers, of local, State, and/or national victim advocacy or rape crisis organizations and enabling reasonable communication between defendants/offenders and these organizations. The facility ensures that communications with such advocates are private, confidential, and privileged, to the extent allowable by Federal, State, and local law. The facility informs defendants/offenders, prior to giving them access, of the extent to which such communications will be private, confidential, and/or privileged.

Assessment Checklist	YES	NO
(a) Does the facility provide defendants/offenders with the current mailing addresses and telephone numbers, including toll-free hotline numbers, of local, State, and/or national victim advocacy or rape crisis organizations and enable reasonable communication between defendants/offenders and these organizations? (Please attach documentation explaining how the facility provides defendants/offenders with access to outside confidential support services related to sexual abuse.)		
(b) Are defendants/offenders able to communicate with outside victim advocates privately in settings in which conversations cannot be overheard?		
(c) Does the facility explain to defendants/offenders, prior to giving them information related to outside support services, the rules governing privacy, confidentiality, and/or privilege that apply for disclosures of sexual abuse made to outside victim advocates, including any limits to confidentiality under relevant Federal, State, or local law?		

### Discussion

Victims of sexual abuse, whether confined or not, often require the support of an advocate. Working with these advocates, such as rape crisis counselors, is not only an essential part of treatment for some victims, but can also help victims overcome any reluctance to report the incident to the appropriate officials. Although some community corrections facilities may be large enough to have qualified mental health practitioners on staff who can treat sexual abuse victims, some victims may be reluctant to confide in those practitioners because they see them as part of the institution that failed to protect them from abuse. Other facilities may simply rely on referrals of defendants/offenders to outside practitioners once a defendant/offender reports a problem. By giving defendants/offenders the option and information to communicate with outside advocates on their own, the facility will ensure that victims have the greatest access to necessary care.

To meet the requirements of this standard, an agency or facility may need to enter an MOU with a community service provider and may find it useful to provide regular opportunities for defendants/offenders to meet face-to-face with advocates (RP-2). In addition to these opportunities, free hotlines that connect defendants/offenders to rape crisis service groups and/or other victim advocacy groups are encouraged. Facilities that have limited community resources to draw from should at a minimum provide defendants/offenders with contact information for regional and/or national human rights, advocacy, and/or counseling organizations. Telephone use to contact outside advocates and/or letters sent to service organizations should not be subject to any rules or restrictions governing telephone use or mail. Administrators need to make certain that defendants/offenders are able to access outside confidential support services as easily and as privately as possible. Defendants/offenders should never have to explain to staff members their reasons for wanting to speak or write to outside advocates before being allowed to communicate with those providers.

The Commission recognizes that in most jurisdictions, outside providers will be unable to provide truly confidential support services due to State or local mandatory child abuse reporting laws. In these jurisdictions, juveniles who have been victims of abuse in a facility or while under supervision should still have the opportunity to access outside support services if they do not feel comfortable using the services provided in house.

Community Corrections Facilities

Pretrial, Probation, and Parole

## RE-4 Third-party reporting

The agency or facility receives and investigates all third-party reports of sexual abuse (IN-1). At the conclusion of the investigation, the agency or facility notifies in writing the third-party individual who reported the abuse and the defendant/offender named in the third-party report of the outcome of the investigation. The agency or facility distributes publicly information on how to report sexual abuse on behalf of a defendant/offender.

Assessment Checklist	YES	NO
(a) Does the agency or facility receive and investigate all third-party reports of sexual abuse?		
(b) At the conclusion of the investigation, does the agency or facility notify in writing the third-party individual who reported the abuse and the defendant/offender named in the third-party report of the outcome of the investigation?		
(c) Does the agency or facility distribute publicly information on how to report sexual abuse on behalf of a defendant/offender?		

### Discussion

Information about how to report sexual abuse on behalf of a defendant/offender should be available in multiple languages and in a convenient, easily accessible format. Information may be made available by phone, on a Web site, as part of any preliminary information provided verbally to visitors, in brochures, in flyers, or on posters in visiting areas. Information should at a minimum be made available to family members. Regardless of how the agency or facility chooses to distribute the information, the information itself should convey: (1) the contact information for the agency or facility official, department, or unit responsible for receiving and responding to third-party allegations; (2) instructions for what information to include when reporting sexual abuse; (3) notice that the allegation will be discussed with the victim named in the report; (4) a statement explaining the allegation will be disclosed only to those who need to know to ensure victim safety and to investigate the allegation; and (5) notice that the agency or facility will inform the individual who reported the abuse of the outcome of the investigation. The agency or facility should periodically review and update, if necessary, the information distributed regarding third party reporting.

## Official Response Following a Defendant/Offender Report (OR)

Community Corrections Facilities

Pretrial, Probation, and Parole

## OR-1 Staff and agency or facility head reporting duties

All staff members are required to report immediately and according to agency or facility policy any knowledge, suspicion, or information they receive regarding an incident of sexual abuse that occurred in a facility setting or while under supervision; retaliation against defendants/offenders or staff who reported abuse; and any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or retaliation. Apart from reporting to designated



supervisors or officials, staff must not reveal any information related to a sexual abuse report to anyone other than those who need to know, as specified in agency or facility policy, to make treatment, investigation, and other security and management decisions. Unless otherwise precluded by Federal, State, or local law, staff medical and mental health practitioners are required to report sexual abuse and must inform defendants/offenders of their duty to report at the initiation of services. If the victim is under the age of 18 or applicable age of majority within that jurisdiction, or considered a vulnerable adult under a State or local vulnerable persons statute, staff must report the allegation to the designated State or local services agency under applicable mandatory reporting laws.

Assessment Checklist	YES	NO
(a) Has the agency or facility notified staff members that they are required to report immediately and according to agency or facility policy any knowledge, suspicion, or information they receive regarding an incident of sexual abuse that occurred in a facility setting or while under supervision, including any knowledge of retaliation against defendants/offenders or staff who reported abuse and any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or retaliation?		
(b) Has the agency or facility notified staff members that they are required to limit information related to any incident of sexual abuse to those who need to know, as specified in agency or facility policy, to make treatment, investigation, and other security and management decisions?		
(c) Has the agency or facility notified staff medical and mental health practitioners of their reporting duties, including their duty to inform defendants/offenders of the practitioners' duty to report at the initiation of services?		
(d) If the victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency or facility head report the allegation to the designated State or local services agency under applicable mandatory reporting laws?		

### Discussion

Attaining compliance with this standard will require that agency or facility leadership effectively conveys to staff members that they are mandatory reporters with no discretion to decide whether to report sexual abuse allegations or any other knowledge or suspicion of sexual abuse or harassment. Agency or facility leadership should make it clear through policy and practice that the agency or facility tolerates neither a staff code of silence nor the mishandling or inappropriate sharing of information (i.e., spreading rumors or conveying information to individuals who have no need to know), and staff should be trained on the difference between spreading rumors and proper reporting. Additionally, it is critical that all staff members understand exactly what, when, how, and to whom they are required to report, including whether their responsibilities differ based on the type of offense or the persons involved. The agency or facility head should know exactly how and to whom he or she is required to report if the incident involves a victim under the age of 18 or applicable age of majority within that jurisdiction, or a victim considered a vulnerable adult under a State or local vulnerable persons statute (e.g., statutes that address the mentally ill, mentally or physically disabled, or the elderly).

Unless otherwise precluded by Federal, State, or local law, the standard requires staff medical and mental health practitioners to report sexual abuse and to inform defendants/offenders of their duty to report at the initiation of services. Informing defendants/offenders of their duty to report at the initiation of services is critical so that defendants/offenders know up front what they can expect to be kept confidential and what they can expect will be



reported. Although the Commission recognizes that some medical and mental health practitioners may be reluctant to report because of fears that victims will not seek treatment, it nonetheless requires medical and mental health practitioners to report to protect the safety of the individual being abused or threatened with abuse.

- Community Corrections Facilities
- Pretrial, Probation, and Parole

## OR-2 Reporting to other agencies or facilities

When the agency or facility receives an allegation that a defendant/offender was sexually abused while in a community corrections facility or while under supervision, the head of the agency or facility where the report was made notifies in writing the head of the agency or facility where the alleged abuse occurred. The head of the agency or facility where the alleged abuse occurred ensures the allegation is investigated.

Assessment Checklist	YES	NO
(a) When the agency or facility receives an allegation that a defendant/offender was sexually abused while in a community corrections facility or while under supervision, does the head of the agency or facility where the report was made notify in writing the head of the agency or facility where the alleged abuse occurred?		
(b) If the agency or facility head receives notice that a former defendant/offender has alleged sexual abuse, does he or she ensure that the allegation is investigated?		

### Discussion

Defendants/offenders who have been sexually abused while confined at a lockup, jail, or prison or while housed in a community corrections facility may feel safer reporting the abuse once they are no longer housed at the facility where the abuse occurred. For example, a defendant/offender who was sexually abused at a jail may wait until he or she is transferred to a prison to report. Similarly, someone abused while confined in a State prison may choose to report once he or she is in the custody of a community corrections agency. The opposite may also occur. A defendant/offender who is abused while under the supervision of a pretrial, probation, or parole agency may not report the alleged abuse until he or she is housed in a prison, jail, or community corrections facility. The head of the agency or facility where the report is made needs to be prepared to notify the appropriate authorities immediately. By the same token, as required by the standard, the head of the agency or facility where the alleged abuse occurred must ensure that the allegation is investigated. This effort to communicate and share information across agencies and facilities should improve safety and security for all defendants/offenders and staff.

- Community Corrections Facilities

## OR-3 Staff first responder duties

Upon learning that a defendant/offender has alleged sexual abuse within a time period that still allows for the collection of physical evidence, the first facility staff member to respond to the report is required to (1) separate the alleged victim and abuser; (2) seal and preserve any crime scene(s); and (3) instruct the victim not to take any actions that could destroy physical evidence, including washing, brushing his or her teeth, changing his or her clothes, urinating, defecating, smoking, drinking, or eating.

Assessment Checklist	YES	NO
(a) Has the facility notified staff that upon learning of an incident of sexual abuse that occurred within a time period that still allows for the collection of physical evidence, they are required to separate victims from abusers, seal and preserve any crime scene(s), and instruct victims not to wash, brush their teeth, change their clothes, urinate, defecate, smoke, drink, or eat?		
(b) Has the facility notified staff members that upon learning of an incident of sexual abuse, they are required to instruct victims not to wash, brush their teeth, change their clothes, urinate, defecate, smoke, drink, or eat and then notify staff?		

### Discussion

In addition to reporting the abuse according to agency or facility policy, the first staff member who learns of a defendant/offender being sexually abused is responsible for ensuring that the victim is safe and any physical evidence is preserved until an investigator arrives. At the time of publication of this body of standards, the commonly accepted time limit for collecting physical evidence is 96 hours. To carry out their duties effectively, staff members will need to be able to counsel victims who may be in distress while maintaining security and control over the crime scene(s).

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## OR-4 Coordinated response

All actions taken in response to an allegation of sexual abuse are coordinated among staff first responders, medical and mental health practitioners, investigators, and agency or facility leadership. The agency's or facility's coordinated response ensures that victims receive all necessary immediate and ongoing medical, mental health, and support services and that investigators are able to obtain usable evidence to substantiate allegations and hold perpetrators accountable.

Assessment Checklist	YES	NO
(a) Are all actions taken in response to an incident of sexual abuse coordinated among staff first responders, medical and mental health practitioners, investigators, and agency or facility leadership?		
(b) Does the agency's or facility's coordinated response ensure that victims receive all necessary immediate and ongoing medical, mental health, and support services?		
(c) Does the agency's or facility's coordinated response ensure that investigators are able to obtain usable evidence to substantiate allegations and hold perpetrators accountable?		

### Discussion

In the community, coordinated sexual assault response teams (SARTs) are recognized as a best practice for responding to incidents of rape and other sexual abuse because they enable key responders from the medical, advocacy, and law enforcement fields to coordinate their actions and share information, helping the victim receive the best care and providing the investigator with the best chance to find the perpetrator. SARTs are generally composed of representatives from the medical and mental health fields, victim advocacy groups (usually from local or regional rape crisis centers), and law enforcement agencies.

Although some community corrections agencies or facilities already use some version of a SART or specialized first response team, or they participate in an existing specialized

community response team, the Commission recognizes that not all agencies are equipped to organize a specialized team or spearhead a community SART. Particularly in the community corrections arena, agencies or facilities may not have individuals working in each of these subject areas on staff. Rather, they must rely on individuals in the community who provide these resources. The Commission urges those agencies or facilities to work toward developing such a team by working with community or regional law enforcement agencies, outside medical and mental health providers, and sexual abuse advocacy groups to establish a coordinated plan to address victims' needs and improve sexual abuse investigation outcomes. At the time of publication of these standards, the Commission recommends that agencies consult the 2004 U.S. Department of Justice's Office on Violence Against Women publication "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents" for guidance and ideas on developing an approach to a coordinated response to sexual abuse.

Regardless of whether or not the agency or facility uses a designated response team or participates in a community SART, the standard requires that all actions taken in response to an allegation of sexual abuse be coordinated among staff first responders, medical and mental health practitioners, investigators, and facility leadership. To ensure the best treatment for victims and the greatest likelihood of holding perpetrators accountable, a number of actions should be coordinated, including: (1) assessing the victim's acute medical needs to determine if he or she needs to be stabilized and/or treated for injuries, conditions, or potential risks; (2) informing the victim of his or her rights under relevant Federal and/or State crime victims' rights laws; (3) giving the victim the option of undergoing a forensic medical exam for the purpose of collecting and documenting physical evidence of abuse; (4) having a victim advocate available to the defendant/offender victim during the forensic medical exam; (5) providing crisis intervention counseling for the victim before and after the forensic medical exam; (6) interviewing victims and witnesses; (7) collecting evidence; and (8) providing for any special needs a victim might have.

Community Corrections Facilities       Pretrial, Probation, and Parole

## **OR-5** Agency or facility protection against retaliation

The agency or facility protects all defendants/offenders and staff who report sexual abuse or cooperate with sexual abuse investigations from retaliation by other defendants/offenders or staff. The agency or facility employs multiple protection measures, including housing changes or transfers for defendant/offender victims or abusers, removal of alleged staff or defendant/offender abusers from contact with victims, and emotional support services for defendants/offenders or staff who fear retaliation for reporting sexual abuse or cooperating with investigations. The agency or facility monitors the conduct and/or treatment of defendants/offenders or staff who have reported sexual abuse or cooperated with investigations, including any defendant/offender disciplinary reports, housing changes, or program changes, for at least 90 days following their report or cooperation to assess changes that may suggest possible retaliation by defendants/offenders or staff. The agency or facility discusses any changes with the appropriate defendant/offender or staff member as part of its efforts to determine if retaliation is taking place and, when confirmed, immediately takes steps to protect the defendant/offender or staff member.

Assessment Checklist	YES	NO
(a) Does the agency or facility employ the following measures to protect defendants/offenders and staff from retaliation for reporting sexual abuse?		
• Housing changes or transfers for defendant/offender victims or abusers		
• Removal of alleged staff or defendant/offender abusers from contact with victims		
• Employee assistance services or other resources for staff who may need psychological or emotional support		
• Available support services for defendants/offenders who may need psychological or emotional support		
(b) Does the agency or facility monitor the conduct and/or treatment of defendants/offenders or staff who have reported sexual abuse or cooperated with investigations, including any defendant/offender disciplinary reports, housing changes, or program changes, for at least 90 days following their report or cooperation to see assess changes that may suggest possible retaliation by defendants/offenders or staff?		
(c) When changes have been identified, does the agency or facility discuss those changes with the appropriate defendant/offender or staff member as part of its efforts to determine if retaliation is taking place?		
(d) When retaliation has been confirmed, does the agency or facility immediately take steps to protect the defendant/offender or staff member?		

### Discussion

Fear of retaliation, such as being subjected to harsh or hostile conditions, being attacked by other defendants/offenders, or suffering harassment from staff, prevents many defendants/offenders and staff from reporting sexual abuse and impedes the ability of the agency or facility to protect the safety and security of its operations. Retaliation can take many forms. For example, one or more defendants/offenders may assault another defendant/offender for “snitching.” An accused staff member or his or her staff allies may suddenly start giving disciplinary tickets to the defendant/offender who made the allegation. A staff member who reports may find that he or she is being snubbed or isolated by other staff. The agency or facility should use every means possible, from information conveyed in training sessions to strict reporting policies to strong disciplinary sanctions for retaliation, to discourage retaliation in any form.

The agency or facility should be alert to the possibility of retaliation from the outset and should initiate and maintain protective measures for as long as it deems necessary. The agency or facility will have to weigh a number of circumstances when deciding how best to protect defendants/offenders and staff members who report sexual abuse. When collective bargaining agreements limit an agency’s or facility’s ability to remove accused staff members from contact positions with defendants/offenders who have alleged staff-on-defendant/offender sexual abuse or staff-on-defendant/offender sexual harassment, the agency or facility should develop and implement alternative protective measures. In general, agencies or facilities should try to secure collective bargaining agreements that do not limit their ability to protect defendants/offenders or staff from retaliation.

The agency’s or facility’s protective measures can be adjusted throughout the investigation as necessary, but this does not obviate the agency’s or facility’s obligation to take immediate and continuing steps to guard against retaliation.

## Investigations (IN)

Community Corrections Facilities

Pretrial, Probation, and Parole

### IN-1 Duty to investigate

The agency or facility investigates all allegations of sexual abuse, including third-party and anonymous reports, and notifies victims and/or other complainants in writing of investigation outcomes and any disciplinary or criminal sanctions, regardless of the source of the allegation. All investigations are carried through to completion, regardless of whether the alleged abuser or victim remains at the facility or under supervision.

Assessment Checklist	YES	NO
(a) Does the agency or facility investigate all allegations of sexual abuse from all sources, including third-party and anonymous reports?		
(b) Does the agency or facility notify victims and/or other complainants in writing of investigation outcomes and any disciplinary or criminal sanctions?		
(c) Are all investigations carried through to completion, regardless of whether the alleged abuser or victim remains at the facility or under supervision?		

#### Discussion

One of the challenges agencies and facilities face when investigating allegations of sexual abuse is defendant/offender and staff reluctance to report the abuse, whether as victims or as witnesses. This reluctance to report leads to delayed reporting, changed stories, noncooperation, and difficulties obtaining physical evidence. By investigating all allegations of sexual abuse and carrying those investigations through to completion, agencies or facilities send a strong message that sexual abuse is taken seriously and will not be tolerated, thereby encouraging all defendants/offenders to report.

Carrying investigations through to completion means making sure that an investigation continues even if an alleged staff perpetrator transfers, resigns, or retires or if an alleged defendant/offender perpetrator or victim is transferred or released from a community corrections facility or supervision during an investigation. Consistent application of these practices helps assure the reporting party and others who may be considering reporting sexual abuse or cooperating with the investigation that reports and cooperation will not be fruitless. This assurance is critical given the risks often inherent to reporting sexual abuse and cooperating in an investigation of sexual abuse, both for staff and defendants/offenders. Continuing investigations after the alleged perpetrator has left the facility or agency supervision helps ensure that an abuser does not escape accountability and will not remain undetected in another facility or in another jurisdiction and thus can be critical to preventing further abuse. This should be an important risk management consideration for any agency or facility.

This standard requires that victims and complainants be notified of the final investigative outcome (e.g., unfounded/unsubstantiated/substantiated) and any disciplinary or criminal sanctions imposed pursuant to a substantiated allegation of sexual abuse. When the investigative outcome is modified pursuant to review, appeal, or arbitration after notification has taken place, the victim/complainant should be notified of the modified outcome.

The “source” of an allegation of sexual abuse that triggers the duty to investigate may come in the form of evidence obtained during the investigation of a violent incident, or even death, within the facility that does not appear to have any connection to sexual abuse. Facilities should be attuned to the fact that sexual abuse may be the motivating factor behind seemingly unrelated assaults, suicides, and homicides within their facilities. Forensic autopsies should be employed whenever possible to determine whether sexual abuse occurred prior to the act of violence or suicide being investigated.

Community Corrections Facilities

Pretrial, Probation, and Parole

## IN-2 Criminal and administrative agency or facility investigations

Agency or facility investigations into allegations of sexual abuse are prompt, thorough, objective, and conducted by investigators who have received special training in sexual abuse investigations (TR-4). When outside agencies investigate sexual abuse, the agency or facility has a duty to keep abreast of the investigation and cooperate with outside investigators (RP-3). Investigations include the following elements:

- Investigations are initiated and completed within the timeframes established by the highest-ranking official, and the highest-ranking official approves the final investigative report.
- Investigators gather direct and circumstantial evidence, including physical and DNA evidence when available; interview alleged victims, suspected perpetrators, and witnesses; and review prior complaints and reports of sexual abuse involving the suspected perpetrator.
- When the quality of evidence appears to support criminal prosecution, prosecutors are contacted to determine whether compelled interviews may be an obstacle for subsequent criminal prosecution.
- Investigative findings are based on an analysis of the evidence gathered and a determination of its probative value.
- The credibility of a victim, suspect, or witness is assessed on an individual basis and is not determined by the person’s status as defendant/offender or staff.
- Investigations include an effort to determine whether staff negligence or collusion enabled the abuse to occur.
- Administrative investigations are documented in written reports that include a description of the physical and testimonial evidence and the reasoning behind credibility assessments.
- Criminal investigations are documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and provides a proposed list of exhibits.
- Substantiated allegations of conduct that appear to be criminal are referred for prosecution.

Assessment Checklist	YES	NO
(a) Are investigations of allegations of sexual abuse conducted only by investigators who have received special training in sexual abuse investigations (TR-4)?		
(b) When outside agencies investigate sexual abuse, does the agency or facility keep abreast of the investigation and cooperate with outside investigators (RP-3)?		
(c) Are investigations of allegations of sexual abuse initiated and completed within prompt timeframes established by the agency or facility?		
(d) Do investigations include a review of all direct and circumstantial evidence, including physical and DNA evidence when available; interviews of alleged victims, suspected perpetrators, and witnesses; and prior complaints and reports of sexual abuse or misconduct involving the suspected perpetrator?		
(e) Does the agency or facility contact prosecutors when the quality of evidence appears to support criminal prosecution to determine whether compelled interviews may be an obstacle for subsequent criminal prosecution?		
(f) Are investigative findings based on the analysis of the evidence gathered and a determination of its probative value?		
(g) Do investigators assess the credibility of a victim, suspect, or witness on an individualized basis, rather than using the person's status as defendant/offender or staff to assess credibility?		
(h) Do investigations include an effort to determine whether staff negligence or collusion enabled the abuse to occur?		
(i) Are administrative investigations documented in written reports that include a description of the physical and testimonial evidence and the reasoning behind credibility assessments?		
(j) Are criminal investigations documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and provides a proposed list of exhibits?		
(k) Are substantiated allegations of conduct that appear to be criminal referred for prosecution?		

### Discussion

This standard addresses both criminal and administrative investigations. There are significant differences in how each type of investigation is conducted, and it is critically important to keep criminal and administrative investigations separate. However, certain elements are important to both types of investigation, and the standard addresses these elements.

The standard requires that effective investigations be initiated and completed promptly so that physical evidence is available and usable before memories have faded. Prompt investigations also give credence to an agency's or facility's zero-tolerance commitment to end sexual abuse. Prompt investigations improve safety and morale by ensuring that wrongly accused suspects are exonerated as quickly as possible and that abusers are detected and removed and/or disciplined as quickly as possible. Agencies or facilities should ensure that established timelines provide sufficient time for investigators to complete the investigation and for the review process to be completed. However, investigations and their reviews should be completed within the constraints imposed by statutes of limitation or terms and conditions of collective bargaining agreements to ensure that the facility has the ability to impose discipline when allegations are substantiated.

This standard also reflects the importance of investigations being conducted by investigators with the skills, objectivity, and sensitivity to resolve allegations credibly and with



well-documented evidence. As the standard reflects, investigators must always be trained in conducting sexual abuse investigations (TR-4).

In cases of alleged staff-on-defendant/offender sexual abuse or harassment, the agency or facility will need to make extra efforts to ensure that those investigations are objective and thorough and should consider using outside investigators whenever possible to ensure the appearance as well as the reality of impartiality.

Because sexual abuse often has no witnesses and does not leave visible injury, investigators must be assiduous in searching out other kinds of direct and circumstantial evidence. To be successful, this requirement, like the other requirements of this standard, will need to be bolstered by investigator training and strong facility policies.

The type of direct and circumstantial evidence that can be gathered and analyzed will vary depending on the nature of the allegation. When forced intercourse or similar abuse is alleged, for example, properly conducted forensic exams may yield DNA evidence. When staff-defendant/offender relationships are alleged, investigators should search for potentially corroborating evidence such as telephone records, gifts, letters, and similar items. Investigators should also conduct a review of prior complaints of sexual abuse as well as disciplinary findings in those cases—including from other facilities or jurisdictions, whenever possible—as such information may suggest repeated patterns of behavior that bear on the credibility of the suspected abuser. Unless State law specifies otherwise, agencies or facilities should maintain those records for the duration of the defendant/offender’s sentence or staff member’s employment.

Credibility assessments play an important role in the investigation of sexual abuse, as in any other investigation, and particularly so when there is no physical evidence. Properly trained investigators and agency officials must assess the truthfulness of alleged victims, suspected abusers and witnesses (if there are any), based on a careful consideration of individual factors pertinent to each person (e.g., his or her possible motivations, opportunity, prior history of truthfulness, consistency of statements, etc.). Assumptions about truthfulness should not be based simply on the fact that a person is a defendant/offender or member of the staff. The Commission especially cautions against automatically believing staff and disbelieving defendants/offenders when their statements contradict each other.

As this standard reflects, an important aspect of investigations of sexual abuse allegations is determining whether any staff negligence or collusion may have played a role in facilitating or causing the sexual abuse. This inquiry is critical to preventing future sexual abuse and is an important risk management tool for agencies or facilities.

As do several other standards, this standard recognizes the importance of coordinating with prosecuting authorities in cases involving sexual abuse allegations. This standard does not advocate delaying the initiation of the administration investigation until the decision of whether to prosecute has been made. However, to avoid compromising criminal investigations, investigators must contact prosecuting authorities before taking any compelled statements of subjects in potentially criminal cases. Agencies or facilities also must refer criminal cases for prosecution whenever the evidence indicates that the abuse appears to be criminal.



Community Corrections Facilities

Pretrial, Probation, and Parole

### IN-3 Evidence standard for administrative investigations

Allegations of sexual abuse are substantiated if supported by a preponderance of the evidence or a lesser standard if allowed under agency or facility policy or State law.

Assessment Checklist	YES	NO
(a) Are allegations of sexual abuse substantiated if supported by a preponderance of the evidence or a lesser standard if allowed under agency or facility policy or State law?		

#### Discussion

The goal of this standard is to ensure that the agency or facility uses a standard of proof that is fair to all parties and appropriate for administrative action. This standard of proof applies to both staff administrative hearings as well as defendant/offender disciplinary hearings and requires investigators to use the preponderance of the evidence standard or a lesser standard if allowed by agency or facility policy or State law. The preponderance of the evidence standard is commonly used in administrative investigations as well as in civil suits involving sexual abuse. The preponderance of the evidence standard requires that an allegation be substantiated when the evidence shows that it is more likely than not that the alleged abuse occurred. Administrative cases do not require that allegations be proven beyond a reasonable doubt. Some agencies or facilities may establish lower thresholds for substantiating allegations of sexual abuse. This standard does not require that such agencies or facilities raise the threshold to the preponderance of evidence standard if a lesser standard is allowed under agency or facility policy or State law. Some jurisdictions may use, for example, a threshold of “some evidence,” which is allowable under this standard.

When available evidence is insufficient to substantiate an allegation, it may also be insufficient to prove that the alleged abuse did not occur. Such allegations may be determined to be unsubstantiated, but cannot properly be categorized as unfounded. Where there are numerous unfounded allegations in an agency or facility, administrators may want to review the quality of the investigations and closely scrutinize policies and protocols because numerous unfounded incidents may indicate problems with the way investigations are being conducted or reveal unknown incidents that actually did occur.

## Discipline (DI)

Community Corrections Facilities

Pretrial, Probation, and Parole

### DI-1 Disciplinary sanctions for staff

Staff is subject to disciplinary sanctions up to and including termination when staff has violated agency or facility sexual abuse policies. The presumptive disciplinary sanction for staff members who have engaged in sexually abusive contact or penetration is termination. This presumption does not limit agency or facility discretion to impose termination for other sexual abuse policy violations. All terminations for violations of agency or facility sexual abuse policies are to be reported to law enforcement agencies and any relevant licensing bodies.

Assessment Checklist	YES	NO
(a) When staff has violated agency or facility sexual abuse policies, has the staff member received sanctions up to and including termination?		
(b) Do the disciplinary sanctions imposed indicate that the presumptive disciplinary sanction for staff who has engaged in sexually abusive contact or penetration is termination?		
(c) Does the agency or facility report to law enforcement agencies and any relevant licensing bodies all individuals terminated by the agency or facility for violating agency or facility sexual abuse policies?		

### Discussion

Imposing significant disciplinary sanctions for sexual abuse is a critical component of communicating an agency’s or facility’s zero tolerance of sexual abuse and developing a culture of safety and accountability. The goal of this standard is to ensure fair and consistent accountability for staff members who have violated agency or facility sexual abuse policies and procedures, regardless of whether they are found guilty in criminal proceedings. Violations that require disciplinary sanctions pursuant to this standard include engaging in actual or attempted abuse or harassment, failing to report an incident of sexual abuse, failing to limit information received about an allegation to those who need to know, failing to cooperate with a sexual abuse investigation, engaging in retaliation against defendants/offenders or staff who report abuse, and failing to follow any other agency or facility policy regarding sexual abuse in which staff was trained.

Disciplinary hearings for adjudicating allegations of attempted or actual staff-on-defendant/offender sexual abuse or staff-on-defendant/offender sexual harassment should be fair, and sanctions should be proportional to the nature and circumstances of the accused staff member’s conduct, his or her disciplinary history, and the sanctions meted out for comparable offenses by other staff with similar histories. Sanctions may entail training and counseling. The sanctions should be sufficiently serious in all cases to communicate to all staff and defendants/offenders the agency’s or facility’s refusal to tolerate sexual abuse or any conduct that impedes efforts to eliminate it.

This standard requires that termination be the “presumptive” but not the mandatory sanction for certain types of sexual abuse in recognition of the fact that disciplinary sanctions must be determined on a case-by-case basis. Establishing termination as a presumption places a heavy burden on the staff person found to have committed the abuse to demonstrate why termination is not the appropriate sanction. This presumption also requires that termination should be the rule for the referenced types of sexual abuse, with exceptions made only in extraordinary circumstances. As the standard reflects, although termination is not the presumption for all types of sexual abuse, it may be the appropriate sanction for instances of sexual abuse less severe than sexually abusive contact or penetration.

This standard is not meant to increase the employment rights of staff who are at-will employees.

## DI-2 Disciplinary sanctions for defendants/offenders

Defendants/offenders are subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative ruling that the defendant/offender engaged in defendant/offender-on-defendant/offender sexual abuse or following a criminal finding of guilt for defendant/offender-on-defendant/offender sexual abuse. Sanctions are commensurate with the nature and circumstances of the abuse committed, the defendant/offender’s disciplinary history, and the sanctions meted out for comparable offenses by other defendants/offenders with similar histories. The disciplinary process must consider whether a defendant/offender’s mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed. Possible sanctions can include discipline within the community corrections facility, new criminal charges, or referral to authorities who may change conditions of a defendant/offender’s release status in the community. Sanctions may also include interventions designed to address and correct underlying reasons or motivation for the abuse, such as requiring the offending defendant/offender to participate in therapy, counseling, or other programs. Sanctions and/or interventions for young defendants/offenders must also take into account the social, sexual, emotional, and cognitive development of the defendant/offender.

Assessment Checklist	YES	NO
(a) When there has been an administrative ruling of defendant/offender-on-defendant/offender sexual abuse or a criminal finding of guilt for defendant/offender-on-defendant/offender sexual abuse, is the defendant/offender perpetrator subject to disciplinary sanctions that are commensurate with the nature of the abuse committed, the defendant/offender’s disciplinary history, and sanctions meted out for comparable offenses by other defendants/offenders with similar histories?		
(b) Do the possible sanctions include discipline within the community corrections facility, new criminal charges, or referral to authorities who may change conditions of a defendant/offender’s release status in the community?		
(c) Does the disciplinary process include consideration of any mental disabilities or mental illness that may have contributed to the abuse in determining the appropriate disciplinary sanction?		
(d) Do possible sanctions include interventions designed to address and correct underlying reasons or motivation for the abuse, such as therapy, counseling, or other programs?		
(e) Do sanctions and/or interventions for young defendants/offenders also take into account the social, sexual, emotional, and cognitive development of the defendant/offender?		

### Discussion

Holding defendants/offenders accountable for sexually abusing other defendants/offenders is essential to deter abuse and demonstrate to defendants/offenders and staff that the agency or facility takes seriously its zero-tolerance policy. This standard recognizes that defendant/offender accountability and the likely reduction in recidivism may be best achieved by using various kinds of sanctions, including not just punitive ones (e.g., loss of privileges) but positive interventions that may help a defendant/offender learn to better control his or her own behavior (e.g., counseling, participation in group programs, or other therapeutic interventions). All sanctions and interventions should send a clear message that the agency or facility does not tolerate sexual abuse of any sort.

The Commission strongly urges agencies or facilities to refrain from imposing disciplinary sanctions on defendants/offenders solely because they have participated in apparently consensual sex or romantic relationships with staff. Disciplinary sanctions for such defendants/offenders will discourage them from reporting abuse. Additionally, some defendants/offenders may fail to report abuse because of larger safety concerns in the facility and therefore should not be punished for concealing sexual activity. Staff should always be held responsible for such abuse. On the other hand, the Commission recognizes that defendants/offenders may engage in relationships with staff to obtain contraband or break other facility rules without being punished. The Commission believes defendants/offenders should be held responsible for such other rules violations, but not for the sexual relationship that allowed for such violations.

Appropriate interventions for young defendants/offenders should take into consideration the normal course of adolescent psychosocial and sexual development, which often includes periods of increased sexual desires, sexual experimentation, and masturbation. Young defendants/offenders will experience numerous physiological and emotional changes during their period of confinement or supervision, including physical maturation and development, an increase in hormone levels, and an increased desire to engage in sexual activity. Additionally, young defendants/offenders may engage in masturbation or self-experimentation, and such actions should not be subject to disciplinary sanctions unless they purposefully occur in front of staff, are directed toward other defendants/offenders, or are otherwise disruptive in nature. Direct training on adolescent development will enable staff to understand and better differentiate normal adolescent experimental behavior from sexually aggressive and dangerous behavior (TR-1).

## Medical and Mental Health Care (MM)

### Community Corrections Facilities

#### **MM-1** Access to emergency medical and mental health services

Victims of sexual abuse have 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. Treatment services must be provided free of charge to the victim and regardless of whether the victim names the abuser. If the community corrections facility does not have medical or mental health practitioners or they are not on duty at the time a report of recent abuse is made, staff first responders take preliminary steps to protect the victim (OR-3) and immediately notify appropriate staff or community medical and mental health practitioners.

Assessment Checklist	YES	NO
(a) Do defendants/offenders have 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) Are treatment services provided free of charge to the victim?		
(c) Are treatment services provided regardless of whether the victim names the abuser?		
(d) If there are no qualified staff medical or mental health practitioners or they are not on duty at the time a report is made, do staff first responders take preliminary steps to protect the victim (OR-3) and immediately notify the appropriate staff or community medical and mental health practitioners?		

### Discussion

Under this standard, the facility is required to provide emergency medical treatment and crisis intervention services free of charge to victims of sexual abuse. Such services may include, but are not limited to: (1) assessing the victim’s acute medical and mental health needs as soon as possible; (2) obtaining consent for treatment from the victim, unless the victim is under 18 or applicable age of majority within that jurisdiction; (3) treating the victim’s acute medical and mental health needs as soon as possible; (4) documenting the victim’s acute medical and mental health needs and treatment provided as soon as possible; (5) providing support and crisis intervention services; and (6) providing access to a forensic medical exam and, if the victim agrees to an exam, ensuring facility protocol is followed whenever there may be physical evidence of sexual abuse (RP-1).

The standard’s requirement that medical and mental health services be provided even when the victim refuses to name the abuser means that victims must be able to meet with medical or mental health practitioners without having to disclose details of the abuse to a staff member. As such, facilities may need to adapt their sick call policies to allow defendants/offenders to access medical and mental health care practitioners without having to describe their victimization.

Community Corrections Facilities

## MM-2 Ongoing medical and mental health care for sexual abuse victims and abusers

The facility provides ongoing medical and/or mental health evaluation and treatment to all known victims of sexual abuse. The evaluation and treatment of sexual abuse victims must include appropriate follow-up services, treatment plans, and, when necessary, referrals for continued care following their release from a community corrections facility. The level of medical and mental health care provided to defendant/offender victims must match the community level of care generally accepted by the medical and mental health professional communities. The facility conducts a mental health evaluation of all known abusers and provides treatment, as deemed necessary by qualified mental health practitioners.

Assessment Checklist	YES	NO
(a) Does the facility provide ongoing medical and/or mental health evaluation and treatment to all known victims of sexual abuse?		
(b) Does the evaluation and treatment of victims include the following?		
• Appropriate follow-up services		
• Treatment plans		
• When necessary, referrals for continued care for sexual abuse victims following their release from a community corrections facility		
(c) Does the level of medical and mental health care provided to defendant/offender victims match the level of care generally accepted by the medical and mental health professional communities?		
(d) Does the facility conduct a mental health evaluation of all known abusers?		
(e) Does the facility provide treatment for abusers, as deemed necessary by qualified mental health practitioners?		

### Discussion

Victims of sexual abuse can experience a range of physical injuries and emotional reactions, even long after the abuse has occurred, that require medical or mental health attention. As required by this standard, the facility must be able to ensure that all victims receive the appropriate medical and/or mental health services recommended by qualified practitioners. Follow-up evaluations and assessments may include the following actions: (1) reviewing any medical and mental health treatment provided immediately following the incident, including whether a forensic medical exam was performed; (2) diagnosing any lingering acute or nonacute physical injuries, including oral trauma; and (3) assessing the psychological impact of the victimization, including the risk of suicide or self-harm and any resulting mental health treatment needs. These follow-up evaluations and assessments will enable mental health and medical practitioners to determine and provide the most appropriate treatment for the defendant/offender, which could include mental health treatment, medical treatment, or both. Reviewing and adjusting victim treatment plans at regular, clinically appropriate intervals will allow the agency to provide the most comprehensive and appropriate care for as long as treatment is required. Most community corrections facility will not have medical or mental health practitioners on staff and will need to refer defendants/offenders to community provides to obtain these services. The requirement that facilities provide these services does not mean they must provide them in-house.

Victims and perpetrators of sexual abuse, whether recent or historical, are at risk for sexually transmitted infections (STIs), including HIV. Regardless of whether a defendant/offender has accepted prevention or treatment for STIs, medical practitioners ought to offer and strongly encourage him or her to be tested for HIV and viral hepatitis six to eight weeks following the sexual abuse.

In accordance with this standard's requirement to provide victims with the level of care generally accepted in the medical and mental health care professional communities, if there has been vaginal penetration, female victims who have been recently abused should be offered pregnancy tests at the time of the medical evaluation and, if the test is negative, should be offered retesting approximately six weeks thereafter. Victims who have positive tests should receive counseling and have access to all pregnancy-related medical services that are lawful in the community.

Additionally, this standard requires mental health evaluations and treatment, when appropriate, of all known abusers. Mental health practitioners may find that ongoing mental health treatment, including counseling, group programs, or other therapeutic interventions, may be beneficial to abusers. Providing mental health treatment to abusers may help them develop better control over their actions and improve their conduct; in doing so, such treatment may help reduce the likelihood of recidivism and thereby improve facility safety. As noted in the standard, the facility's mental health practitioners must use their professional judgment to determine the appropriate treatment and services for individuals with a recent or previous history of sexual abusiveness.

Defendants/offenders over the age of 18 have the right to refuse medical and/or mental health care after receiving counseling about the potential value of the services they would receive. As a risk management measure, the facility should require defendants/offenders to sign refusals of care and document such refusals in the defendant/offender's medical file.

## IV. MONITORING

### Data Collection and Review (DC)

- Community Corrections Facilities       Pretrial, Probation, and Parole

#### DC-1 Sexual abuse incident reviews

The agency or facility treats all instances of sexual abuse as critical incidents to be examined by a team of upper management officials, with input from line supervisors, investigators, and medical/mental health practitioners. The review team evaluates each incident of sexual abuse to identify any policy, training, or other issues related to the incident that indicate a need to change policy or practice to better prevent, detect, and/or respond to incidents of sexual abuse. The review team also considers whether incidents were motivated by racial or other group dynamics. When incidents are determined to be motivated by racial or other group dynamics, upper management officials immediately notify the agency or facility head and begin taking steps to rectify those underlying problems. The sexual abuse incident review takes place at the conclusion of every sexual abuse investigation, unless the allegation was determined to be unfounded. The review team prepares a report of its findings and recommendations for improvement and submits it to the agency or facility head.

Assessment Checklist	YES	NO
(a) Does a team of upper management officials, with input from line supervisors, investigators, and medical/mental health practitioners, review the details of each incident of sexual abuse following every sexual abuse investigation, unless the allegation was determined to be unfounded?		
(b) Does the team use the review of each incident of sexual abuse to identify any policy, training, or other issues related to the incident that indicate a need to change policy or practice to better prevent, detect, and/or respond to incidents of sexual abuse?		
(c) Does the review team consider whether incidents were motivated by racial dynamics or any existing racial tensions?		
(d) Where incidents are determined to be motivated by racial dynamics or tensions, do upper management officials immediately notify the agency or facility head and begin taking steps to rectify those underlying problems?		
(e) Does the review team prepare a report of its findings and recommendations for improvement and submit it to the agency or facility head?		

#### Discussion

Sexual abuse incident reviews provide the agency or facility with the opportunity to identify policies or practices that may have contributed to or failed to prevent sexual abuse as well as any deficiencies in the organization's response. By examining prevention planning and response efforts following the occurrence of sexual abuse, the organization can prevent future incidents by making the necessary changes to policies or practices that endangered staff and defendants/offenders in the past.

Comprehensive sexual abuse incident reviews should include the following: (1) an analysis of any security failures that may have contributed to the incident; (2) an examination of the timeliness and quality of the response; (3) the various interventions provided to the victim



and/or perpetrator, including medical and mental health care; and (4) the quality of the administrative and/or criminal investigation. Additionally, the review team should determine whether victim(s) or witness(es) faced any obstacles to prompt and safe reporting of the incident. Finally, the team should review the files of the perpetrator(s) and victim(s) to determine whether changes to the agency’s or facility’s process for screening defendants/offenders for risk of sexual victimization or abusiveness may be appropriate. Having identified underlying problems, the agency or facility can then make the necessary changes to policies or practices that endanger staff and defendants/offenders.

- Community Corrections Facilities       Pretrial, Probation, and Parole

## DC-2 Data collection

The agency or facility collects accurate, uniform data for every reported incident of sexual abuse using a standardized instrument and set of definitions. The agency aggregates the incident-based sexual abuse data at least annually. The incident-based data collected includes, at a minimum, the data necessary to answer all questions from the most recent version of the BJS Survey on Sexual Violence. Data are obtained from multiple sources, including reports, investigation files, and sexual abuse incident reviews. The agency also obtains incident-based and aggregated data from every community corrections facility with which it contracts.

Assessment Checklist	YES	NO
(a) Does the agency or facility collect uniform data for every reported incident of sexual abuse using a standardized instrument and set of definitions?		
(b) Does the agency aggregate the incident-based sexual abuse data at least annually?		
(c) Does the agency collect the incident-based data necessary to answer all questions from the most recent version of the BJS Survey on Sexual Violence?		
(d) Does the agency obtain data from multiple sources, including reports, investigation files, and sexual abuse incident reviews?		
(e) Does the agency also obtain incident-based and aggregated data from every facility with which it contracts for the confinement of its defendants/offenders?		

### Discussion

The agency or facility is required to collect incident-based data on all incidents of sexual abuse to examine the specific circumstances of each incident and track any possible patterns.

The BJS Survey on Sexual Violence asks agencies to answer questions using their aggregated data and their incident-based data collection policies. The data collection items listed in Appendix C include all the data that must be collected and aggregated to be able to answer the BJS survey questions. The most recent version of the BJS survey can be accessed electronically from the BJS Web site at <http://www.ojp.usdoj.gov/bjs/abstract/dcprea03.htm>. Appendix C also identifies additional information that the agency might want to consider incorporating into its incident-based sexual abuse data collection instrument. Such elements may be of assistance to the agency as it reviews, revises, and develops sexual abuse prevention and response policies and procedures. The agency may also decide to collect data not enumerated in Appendix C. Some incident-specific information may not be available during the initial data collection process but may become available over time. As more incident-specific information becomes known and available, it should be added to the other data collected for that incident.

Aggregating collected incident-based data on an annual basis will provide the agency with data descriptive of trends and patterns among reported incidents of sexual abuse that took place within the agency and its individual facilities during the previous year.

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### DC-3 Data review for corrective action

The agency reviews, analyzes, and uses all sexual abuse data, including incident-based and aggregated data, to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training. Using these data, the agency identifies problem areas, including any racial dynamics underpinning patterns of sexual abuse, takes corrective action on an ongoing basis, and, at least annually, prepares a report of its findings and corrective actions for each facility as well as the agency as a whole. The annual report also includes a comparison of the current year's data and corrective actions with those from prior years and provides an assessment of the agency's progress in addressing sexual abuse. The agency's report is approved by the agency head, submitted to the appropriate governing body, and made readily available to the public through its Web site or, if it does not have one, through other means. The agency may redact specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility, but it must indicate the nature of the material redacted.

Assessment Checklist	YES	NO
(a) Does the agency review, analyze, and use all sexual abuse data, including incident-based and aggregated data, to assess the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training?		
(b) Does the agency use the data to assess problem areas, including any racial dynamics underpinning patterns of sexual abuse?		
(c) Does the agency take corrective action on an ongoing basis, based on the problem areas indicated by the analysis of the data?		
(d) Does the agency prepare a report at least annually of its findings and corrective actions for each facility as well as the agency as a whole?		
(e) Does the 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?		
(f) Is the agency's report approved by the agency head and submitted to the appropriate governing body?		
(g) Is the agency's report made readily available to the public through its Web site or, if it does not have one, through other means?		

#### Discussion

The process of reviewing and analyzing incident-based and aggregated data allows agencies to detect patterns and trends that should be addressed as they review and revise their sexual abuse policies, practices, and training. For instance, sorting or filtering data by the victim's gender, race, custody level, and type of incident may allow the agency to identify specific causation of these events. This analysis may also reveal racial dynamics underpinning certain patterns or trends of sexual abuse. Equipped with that knowledge, agency and facility heads can work together to begin changing those dynamics by reviewing and modifying existing policies and practices for keeping defendants/offenders safe. Using the conclusions and results from the data analysis to take this kind of corrective action will make all facilities safer.

Comparing the current year’s aggregated data to previous years’ data will also yield valuable information about progress, including validation of implemented preventive measures. For example, the agency may observe a decrease in the number of allegations in an area where additional security measures were implemented and monitoring was enhanced. The agency must include incident-based and aggregated data from all facilities with which it contracts for the confinement of its defendants/offenders in its review and analysis as part of its overall efforts to monitor the safety of defendants/offenders in contracted facilities (PP-2).

This standard also requires that the agency’s annual report on its data analysis and corrective actions be made readily available to the public. If the agency has a Web site, the report should be published on it. Otherwise, the agency should make other arrangements, for example, providing paper copies upon request, to ensure that members of the public can easily and promptly obtain the report. Members of the public should not have to identify themselves or provide a reason for wanting to see the report as a precondition to obtaining it.

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## DC-4 Data storage, publication, and destruction

The agency ensures that the collected sexual abuse data are properly stored, securely retained, and protected. The agency makes all aggregated sexual abuse data, including from facilities under its direct control and those with which it contracts, readily available to the public at least annually through its Web site or, if it does not have one, through other means. Before making aggregated sexual abuse data publicly available, the agency removes all personal identifiers from the data. The agency maintains sexual abuse data for at least 10 years after the date of its initial collection unless Federal, State, or local law allows for the disposal of official information in less than 10 years.

Assessment Checklist	YES	NO
(a) Does the agency ensure that the collected sexual abuse data are properly stored, retained, protected, and destroyed?		
(b) Does the agency make all aggregated sexual abuse data, including from facilities under its direct control and those with which it contracts, readily available to the public at least annually through its Web site or, if it does not have one, through other means?		
(c) Are all personal identifiers removed from the aggregated data before it is made publicly available?		
(d) Does the agency maintain sexual abuse data for at least 10 years after the date of its initial collection unless Federal, State, or local law allows for the disposal of official information in less than 10 years?		

### Discussion

The agency’s data collection efforts will be useful to track trends and contribute to a national understanding of sexual abuse in confinement settings only if the agency stores the data in a manner that protects data integrity and retains the data for an adequate length of time. The requirement that data be securely retained and protected is meant to ensure the privacy of individuals involved in sexual abuse incidents and the integrity of the data. It is important that collected data be maintained in a way that protects the confidentiality of victims and alleged perpetrators. Thus, once data are aggregated, all unique identifiers pertaining to victims and alleged perpetrators should be removed.

The public has a legitimate interest in the data collected by agencies that serve the public. The data agencies are required to collect and publish under these standards will enable the public to understand the nature and level of safety in confinement facilities. Agency sexual abuse data may also inform research and efforts to improve safety. Aggregated data with personal identifiers removed should thus be readily available to the public. Publishing the data on the agency’s Web site, if it has one, is the easiest way for the public to obtain it. Absent a Web site, an agency may choose other feasible means to make the data public, such as providing paper copies to members of the public who request them. Members of the public should not have to identify themselves or provide a reason for seeking the data as a precondition to obtaining copies.

With regard to incident-based data, the Commission recommends that agencies balance privacy interests against the legitimate public interest in safe facilities by establishing a non-burdensome process to allow researchers, academics, journalists, and others access to such data.

## Audits (AU)

- Community Corrections Facilities       Pretrial, Probation, and Parole

### AU-1 Audits of standards

The public agency ensures that all community corrections facilities, including contract facilities and pretrial, probation, and parole agencies are audited to measure compliance with the PREA standards. Audits must be conducted at least every three years by independent and qualified auditors. The public or contracted agency allows the auditor to enter and tour facilities, review documents, and interview staff and defendants/offenders, as deemed appropriate by the auditor, to conduct comprehensive audits. The public agency ensures that the report of the auditor’s findings and the public or contracted agency’s plan for corrective action (DC-3) are published on the appropriate agency’s Web site if it has one or are otherwise made readily available to the public.

Assessment Checklist	YES	NO
(a) Are comprehensive audits conducted at least every three years?		
(b) Are auditors independent and qualified?		
(c) Are independent auditors able to do the following, as deemed appropriate by the auditor?		
• Enter and tour facilities		
• Review documents		
• Interview staff and defendants/offenders		
(d) Are audit reports and corrective plans published on the appropriate agency’s Web site if it has one or otherwise made readily available to the public?		

## **Discussion**

Publicly available audits allow agencies, legislative bodies, and the public to learn whether facilities are complying with the PREA standards. Audits can also be a resource for the Attorney General in determining whether States are meeting their statutory responsibilities. Public audits help focus an agency's or facility's efforts and can serve as the basis upon which an agency or facility can formulate a plan to correct any identified deficiencies. These corrective action plans should be made public as well so that the public is fully informed as to whether the agency is taking appropriate steps to prevent sexual abuse. If the agency or facility has a Web site, the audit should be published on it; otherwise, the agency or facility may choose other feasible means to ensure the public has easy access to the audit, such as providing paper copies to members of the public who request it. Members of the public should not have to identify themselves or specify a reason for seeking the audit as a precondition to obtaining it.

The transparency achieved by public audits and corrective action plans can enhance community confidence in the steps agencies are taking to prevent sexual abuse in community corrections facilities and pretrial, probation, and parole agencies. Public audits and corrective action plans can help generate public support for providing an agency or facility with the resources it needs to prevent abuse more effectively. They also help ensure that oversight bodies, including legislative bodies and community advocates, have the data necessary to decide whether and how to take action to improve sexual abuse prevention efforts.

For audits to serve these purposes effectively, they must be based on reliable and comprehensive information and be conducted by individuals or teams with the skills and objectivity necessary to take the following actions: (1) identify and gather the data that must be analyzed; (2) employ proper professional judgment when analyzing the data; and (3) work effectively with jurisdictions in planning audits. The requirements of this standard are designed to ensure that the audit process meets minimum audit standards while providing appropriate flexibility to the subject facility or agency regarding the identity of the auditor. Under this standard, an audit must be conducted by an individual or group of individuals who are independent of the agency, with no current direct reporting relationship to the head of the community corrections agency or facility being audited. Licensing authorities may be used to conduct audits of community corrections agencies or facilities.

# APPENDIX A: RESPONSIBILITIES OF FORENSIC MEDICAL EXAMINERS

The Commission directs all agency and facility heads to the U.S. Department of Justice's national protocol for extensive information on the appropriate qualifications and responsibilities of forensic medical examiners.<sup>1</sup> However an agency decides to adapt the national protocol, the Commission strongly recommends that the agency use the following description of responsibilities of the forensic medical examiner as a blueprint for the qualifications an agency should be considering when developing memoranda of understanding or entering into contracts with forensic medical examiners.

## **Forensic medical examiner responsibilities**

1. Obtain forensic histories from victims.
2. Use sexual assault evidence collection kits that are standardized and meet or exceed minimum guidelines for contents.
3. Use the proper equipment and supplies to perform the exam (e.g., anoscope, colposcope with photographic capability, microscope, toluidine blue dye, in addition to standard exam room equipment and supplies).
4. Take initial and follow-up photographs of injuries, as appropriate, according to jurisdictional policy.
5. Maintain evidence integrity according to jurisdictional policies for drying, packaging, labeling, and sealing the evidence.
6. Maintain the chain of custody for all evidence collected.
7. Follow jurisdictional protocol for transferring the evidence in the custody of an authorized agent from the exam site to a crime laboratory or a secure storage area with the proper climate control.
8. Document all services provided, including recommendations for continued care regarding sexually transmitted infection examinations, testing, immunizations, post-exposure prophylaxis, and treatment.
9. Transfer copies of the defendant/offender's medical file back to the facility/agency, if the exam is conducted off-site.

<sup>1</sup> U.S. Department of Justice, Office on Violence Against Women, A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents (NCJ 206554), Washington, DC: U.S. Department of Justice, September 2004. This protocol is available electronically at <http://www.ncjrs.gov/pdffiles1/ovw/206554.pdf>.



## APPENDIX B: TRAINING TOPICS AND PROCEDURES

The National Institute of Corrections (NIC) has developed a number of Prison Rape Elimination Act (PREA) training resources. The Commission directs all agency and facility heads to NIC's Web site (<http://www.nicic.org>) to learn more about existing resources and opportunities for training. However an agency or facility decides to deliver training, the Commission strongly recommends that the following topics be included for employee training. Some may also be appropriate for volunteer and defendant/offender training.

Following the list of topics, the Commission has made some procedural recommendations for ensuring that agency and facility heads deliver the most effective sexual abuse and PREA training to employees, volunteers, and defendants/offenders.

### I. Recommended training topics

#### A. General education and awareness topics

1. An overview of PREA.
2. A description of the inalienable right of all defendants/offenders to be free from sexual abuse.
3. The role of community corrections officials to protect and enforce the human right to be free from sexual abuse.
4. Definitions and examples of prohibited and/or illegal behaviors and language that are considered sexual abuse.
5. Examples of conduct, circumstances, and "red flags" that may be precursors to sexual abuse or which suggest sexual abuse is occurring.
6. The agency's anti-retaliation policy.
7. Common reactions by victims of sexual abuse.
8. The agency's liability for sexual abuse of persons in custody (criminal, civil, and administrative).
9. A discussion of how sexual abuse is used to gain power and control in confinement settings.
10. The agency's policy regarding defendants/offenders who knowingly make false allegations of staff-on-defendant/offender sexual abuse or staff-on-defendant/offender sexual harassment.
11. Common myths and perceptions of sexual intimidation and abuse in confinement settings.
12. Professional boundary setting, including issues related to personal associations with defendants/offenders, consent, imbalances of power, and appropriate vs. inappropriate touching.
13. Information on adolescent emotional, physical, and sexual development, if the facility is responsible for the supervision of young defendants/offenders.
14. Strategies for promoting effective prevention and intervention of staff-on-defendant/offender sexual abuse and staff-on-defendant/offender sexual harassment.



15. Strategies for removing a victim or witness of sexual abuse from any public or semipublic area without arousing the suspicion of other defendants/offenders or staff members.
16. Strategies for protecting the safety of vulnerable populations, including but not limited to lesbian, gay, bisexual, and gender-nonconforming defendants/offenders (including transgender and intersex); deaf, speech-impaired, or visually impaired defendants/offenders; developmentally disabled defendants/offenders; defendants/offenders with limited English proficiency; mentally ill defendants/offenders; defendants/offenders with past histories of sexual abuse; defendants/offenders with personality disorders; and young defendants/offenders.

## B. Sexual abuse reporting duties

1. Staff members' duty to report sexual abuse and their liability if they fail to report.
2. The process staff members should use to report sexual abuse.
3. The process that defendants/offenders should use to report sexual abuse.
4. Medical and mental health practitioners reporting duties and the process they should use to report sexual abuse.
5. Relevant State or local mandatory child abuse reporting laws, and staff responsibility under such laws to report sexual abuse to a designated State or local services agency with the authority to conduct investigations into abuse against youth in confinement/supervision.

## C. Medical and mental health care

1. The range of victims' services available to defendants/offenders, including free medical and mental health care for injuries and/or trauma resulting from sexual abuse, and how defendants/offenders gain access to those services.
2. Rules governing forensic medical exams.
3. How to detect sexual abuse during medical and mental health exams.

## D. Investigations and discipline

1. The investigative process for allegations of sexual abuse, including the importance of preserving evidence.
2. The legal and disciplinary sanctions for defendants/offenders who engage in defendant/offender-on-defendant/offender sexual abuse or defendant/offender-on-defendant/offender sexual harassment.
3. The legal and disciplinary sanctions for staff who engage in actual or attempted staff-on-defendant/offender sexual abuse or staff-on-defendant/offender sexual harassment.
4. Victims' rights based on relevant State or Federal law.
5. The rights of a staff member who is the subject of an investigation based on relevant Federal or State law or, if applicable, under collective bargaining agreements.

## **II. Recommended procedures for delivering training**

### **A. General guidance**

1. Train existing staff prior to training defendants/offenders.
2. Train new staff members before they have contact with defendants/offenders.
3. Prohibit staff members from working with defendants/offenders until they can demonstrate knowledge of the agency's sexual abuse policies and procedures.
4. Ensure that staff members, contractors, and defendants/offenders have access to copies of the agency's sexual abuse policies.
5. Use multiple mechanisms for presenting the information, including lectures, dialogues, role-play/scenario-based training, and other interactive techniques.
6. Ensure training materials are up to date by reviewing them at least annually and making revisions, if necessary, to address changes in laws, policies, or protocols.
7. Provide refresher training to staff, contractors, and defendants/offenders following any changes to law or policy.
8. Provide annual continuing education on sexual abuse that includes a review of the agency's sexual abuse data from the previous year.

### **B. Testing and evaluation**

1. Test staff members following training.
2. Ask staff, contractors, and defendants/offenders to provide feedback on training, including suggestions for improving training tools and materials.
3. Evaluate staff members who conduct training at least annually to ensure that they are qualified and able to provide training effectively.



# APPENDIX C: INCIDENT-BASED DATA COLLECTION

Standard DC-2 requires agencies to collect incident-based data for every incident of sexual abuse. Under this standard, the agency is required to collect data sufficient to answer all of the questions from the Bureau of Justice Statistics' (BJS') Survey on Sexual Violence. Collecting data on the following items would allow the agency to answer the questions posed on the BJS survey and should help it to reach the broader goal of elimination sexual abuse and keeping defendants/offenders safe.

## **I. Victim information**

1. Sex and gender identity.
2. Race/ethnicity.
3. Age.
4. Custody level.
5. Height and weight.
6. Classification assignment.
7. Previous sexual victimization in confinement.
8. Previous sexually abusive behavior in confinement.
9. Prior relationship with the alleged perpetrator.
10. Gang affiliation outside and/or inside the facility.
11. HIV/AIDS status.

## **II. Perpetrator information**

### **A. Defendant/offender perpetrator**

1. Sex and gender identity.
2. Race/ethnicity.
3. Age.
4. Custody level.
5. Height and weight.
6. Classification assignment.
7. Previous sexual victimization in confinement.
8. Previous sexually abusive behavior in confinement.
9. Prior relationship with the victim.
10. Gang affiliation outside and/or inside the facility.
11. HIV/AIDS status.

### **B. Staff perpetrator**

1. Sex and gender identity.
2. Race/ethnicity.
3. Age.
4. Position held within the agency.
5. Relationship with victim.

6. Prior history of allegations and/or substantiated incidents of sexual abuse or harassment in current and prior employment.
7. Prior history of failure to comply with the agency's sexual abuse policies.

### **III. Other incident information**

#### **A. Reporting**

1. The date and time of the report.
2. The date, time, and location of the incident.
3. The reporting mechanism used.
4. Who made the report.
5. To whom the report was made.
6. Details of the incident alleged to have occurred, including type of sexual abuse.
7. The time lapse between when the incident took place and when the report was made.
8. The time lapse between when the report was made and when an investigation was initiated.
9. The time lapse between when the report was made and when the defendant/offender received medical/mental health care, if applicable.

#### **B. Medical and/or mental health care**

1. Whether the victim received medical and/or mental health care.
2. Any injuries sustained by the victim.

#### **C. Investigations**

1. Type of investigation pursued: criminal and/or administrative.
2. Name of investigator(s).
3. Dates of the initiation and conclusion of the investigation(s).
4. Outcome of the investigation(s)/if the investigation(s) is ongoing.
5. Violations of administrative and/or criminal codes.
6. If the case is referred for prosecution, whether the prosecutor accepted or declined the investigation and, if accepted, the case disposition.
7. If administrative actions against staff member(s) or defendant/offender(s) are pursued, details about the sanctions.

## APPENDIX D: NPREC STANDARDS DEVELOPMENT EXPERT COMMITTEE MEMBERS

During the standards development process, the Commission convened expert committees comprised of diverse stakeholders with broad correctional expertise to provide information and guidance. The Commission thanks the members of the expert committees for their participation and contribution.

Organizational affiliations are provided for identification purposes only; committee members were not necessarily acting as representatives of their organizations. This list reflects each committee member's organizational affiliation at the time of participation and may not represent the person's current position. The Commission's standards do not reflect the official views of any of the organizations referenced here.

**Carrie Abner**, Research Associate, American Probation and Parole Association

**Aaron Aldrich**, Chief Inspector, Rhode Island Department of Corrections

**James Austin**, President, JFA Institute

**Roy F. Austin, Jr.**, Partner, McDermott Will & Emery

**Chris Baker**, Lieutenant, Corrections Supervisor/Jail Administrator, Van Buren County Sheriff's Office, Michigan

**David Balagia**, Major, Travis County Sheriff's Office, Texas

**Joe Baumann**, Corrections Officer, California Rehabilitation Center Chapter President, California Correctional Peace Officers Association

**Jeffrey Beard**, Secretary, Pennsylvania Department of Corrections

**Theodis Beck**, Secretary, North Carolina Department of Correction

**Art Beeler**, Warden, Federal Correctional Complex, Federal Bureau of Prisons, U.S. Department of Justice

**Andrea Black**, Coordinator, Detention Watch Network

**Charma Blount**, Sexual Assault Nurse Examiner, Texas Department of Criminal Justice

**Tim Brennan**, Principal, Northpointe Institute for Public Management, Inc.

**Lorie Brisbin**, Program Coordinator, Prisons Division, Idaho Department of Correction

**Barbara Broderick**, Director, Maricopa County Adult Probation Department, Arizona

**Roger Canaff**, Deputy Chief, Sex Offender Management Unit, Office of the Attorney General, New York

**Susan Paige Chasson**, President, International Association of Forensic Nurses

**Gwendolyn Chunn**, Immediate Past President, American Correctional Association

**Suanne Cunningham**, National Director, Corrections/Criminal Justice Program, Heery International

**Karen Dalton**, Director, Correctional Services Division, Los Angeles County Sheriff's Department

**Kim Day**, SAFE Technical Assistance Coordinator, International Association of Forensic Nurses

**Gina DeBottis**, Executive Director, Special Prosecution Unit, Texas Youth Commission

**Kathleen Dennehy**, Superintendent, Security Operations, Bristol County Sheriff's Office, Massachusetts

**Gary Dennis**, Senior Associate, The Moss Group, Inc.

**Ruth Divelbiss**, Captain, Ford County Sheriff's Office, Kansas

**Mark Donatelli**, Partner, Rothstein, Donatelli, Hughes, Dahlstrom, Schoenburg, and Bienvenu LLP

**Sarah Draper**, Director of Investigations, Office of Investigation and Compliance, Internal Investigation Unit, Georgia Department of Corrections

**Dr. Richard Dudley**, Private Practice of Clinical and Forensic Psychiatry

**Robert Dumond**, President and Licensed Clinical Mental Health Counselor, Consultants for Improved Human Services, PLLC

**Earl Dunlap**, Chief Executive Officer, National Partnership for Juvenile Services

**Maureen Dunn**, Director, Unaccompanied Children's Services, Office of Refugee Resettlement, Administration for Children and Families, U.S. Department of Health and Human Services

**Teena Farmon**, Retired Warden, Central California Women's Facility

**Lisa Freeman**, Staff Attorney, Prisoners' Rights Project, Legal Aid Society, New York City

**Vanessa Garza**, Associate Director for Trafficking Policy, Office of Refugee Resettlement, Administration for Children and Families, U.S. Department of Health and Human Services

**Michael Gennaco**, Chief Attorney, Office of Independent Review, Los Angeles County Sheriff's Department

**Karen Giannakoulis**, Forensic Interviewer/Victim Advocate, U.S. Attorney's Office, Washington, D.C.

**Steve Gibson**, Administrator, Youth Services Division, Montana Department of Corrections

**Simon Gonsoulin**, Former Director, Louisiana Office of Youth Development

**Kathleen Graves**, Director, Community Corrections Services, Kansas Department of Corrections

**Robert L. Green**, Warden, Montgomery County Correctional Facility, Montgomery County Department of Correction and Rehabilitation, Maryland

**Dr. Robert Greifinger**, Correctional Health Care and Quality Management Consultant

**David Guntharp**, Director, Arkansas Department of Community Correction

**Karyn Hadfield**, Training Specialist, Day One: The Sexual Assault and Trauma Resource Center

**Dee Halley**, PREA Program Manager, National Institute of Corrections, Federal Bureau of Prisons, U.S. Department of Justice

**Greg Hamilton**, Sheriff, Travis County, Texas

**Patrick M. Hanlon**, Partner, Goodwin Proctor LLP

**Patricia Hardyman**, Senior Associate, Association of State Correctional Administrators

**Rachel Harmon**, Associate Professor of Law, University of Virginia School of Law

**Michael Hennessey**, Sheriff, City and County of San Francisco, California

**Andrew Jordan**, Consultant, Migima, LLC; Retired Chief of Police, Bend Police Department, Oregon

**Thomas Kane**, Assistant Director, Information, Policy and Public Affairs Division, Federal Bureau of Prisons, U.S. Department of Justice

**Cliff Keenan**, Assistant Director, District of Columbia Pretrial Services Agency

**Jacqueline Kotkin**, Field Services Executive, Probation and Parole, Vermont Department of Corrections

**Deborah LaBelle**, Attorney

**Madie LaMarre**, Consultant

**Neal Langan**, Senior Research Analyst, Office of Research and Evaluation, Federal Bureau of Prisons, U.S. Department of Justice

**Dori Lewis**, Senior Supervising Attorney, Prisoners' Rights Project, Legal Aid Society, New York City

**Cheryl Little**, Executive Director, Florida Immigrant Advocacy Center, Inc.

**Jennifer Long**, Director, National Center for the Prosecution of Violence Against Women

**Christy Lopez**, Partner, Independent Assessment and Monitoring, LLP

**Margaret Love**, Attorney; Consulting Director, American Bar Association Commission on Effective Criminal Sanctions

**Bobbi Luna**, Captain, Multnomah County Sheriff's Office, Oregon

**Martha Lyman**, Director of Research, Hampden County Correctional Center, Massachusetts

**Bob Maccarone**, Director, New York State Division of Probation and Correctional Alternatives

**Cindy Malm**, Consultant, Retired Jail Administrator, Rocky Mountain Corrections

**Michael Marette**, Assistant Director of Corrections, American Federation of State, County, and Municipal Employees

**Jenifer Markowitz**, Forensic Nurse Consultant, DOVE Program, Summa Health System

**Steve Martin**, Attorney/Corrections Consultant

**Susan McCampbell**, President, Center for Innovative Public Policies, Inc., McCampbell & Associates, Inc.

**Ron McCuan**, Captain, U.S. Public Health Service; Public Health Analyst, National Institute of Corrections, Federal Bureau of Prisons, U.S. Department of Justice

**Linda McFarlane**, Mental Health Program Director, Just Detention International

**Jeff McInnis**, PREA Coordinator, District of Columbia Department of Youth Rehabilitation Services

**John Milian**, Detention and Deportation Officer, Criminal Alien Program, Office of Detention and Removal, Immigration and Customs Enforcement, U.S. Department of Homeland Security

**Phyllis Modley**, Correctional Program Specialist, Community Corrections Division, National Institute of Corrections, Federal Bureau of Prisons, U.S. Department of Justice



**Jean Moltz**, Correctional Health Care Consultant

**James Montross**, Director of Mental Health Monitoring, Texas Department of Criminal Justice

**Marcia Morgan**, Consultant, Migima, LLC

**John Moriarty**, Inspector General, Texas Department of Criminal Justice

**Anadora Moss**, President, The Moss Group, Inc.

**Gail D. Mumford**, Juvenile Detention Alternatives Initiative, Annie E. Casey Foundation

**Melissa Nolan**, Executive Assistant, Policy and Public Affairs Division, Federal Bureau of Prisons, U.S. Department of Justice

**Christopher Nugent**, Senior Counsel, Community Services Team, Holland & Knight LLP

**Barbara Owen**, Professor of Criminology, California State University, Fresno

**David Parrish**, Colonel, Commander, Department of Detention Services, Hillsborough County Sheriff's Office, Florida

**T.J. Parsell**, Human Rights Activist, Author of *Fish: A Memoir of a Boy in a Man's Prison*

**Dr. Farah M. Parvez**, Director, Office of Correctional Public Health, New York City Department of Health and Mental Hygiene; National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention, Centers for Disease Control and Prevention

**Susan Poole**, Criminal Justice Consultant; Retired Warden, California Institution for Women

**Roberto Hugh Potter**, Centers for Disease Control and Prevention

**Eugenie Powers**, Director, Probation and Parole, Louisiana Department of Public Safety and Corrections

**Judy Preston**, Deputy Chief, Civil Rights Division, U.S. Department of Justice

**J. Michael Quinlan**, Senior Vice President, Corrections Corporation of America

**Jeffrey Renzi**, Associate Director, Planning and Research, Rhode Island Department of Corrections

**Denise Robinson**, President and CEO, Alvis House; Past-President, International Community Corrections Association

**Melissa Rothstein**, East Coast Program Director, Just Detention International

**David Roush**, Director, National Partnership for Juvenile Services, Center for Research and Professional Development, National Juvenile Detention Association

**Elissa Rumsey**, Compliance Monitoring Coordinator, Office of Juvenile Justice and Delinquency Prevention, Office of Justice Programs, U.S. Department of Justice

**Timothy Ryan**, Director, Miami-Dade County Corrections and Rehabilitation Department

**Teresa Scalzo**, Senior Policy Advisor, Sexual Assault Prevention and Response Office, U.S. Department of Defense

**Vincent Schiraldi**, Director, District of Columbia Department of Youth Rehabilitation Services

**Margo Schlanger**, Professor of Law, Washington University in St. Louis School of Law

**Karen Schneider**, Legal Consultant

**Dana Shoenberg**, Senior Staff Attorney, Center for Children’s Law and Policy

**Linda Smith**, Research Consultant

**Donald Specter**, Director, Prison Law Office

**Mai-Linh Spencer**, Deputy State Public Defender, Office of the State Public Defender, California

**Richard Stalder**, Former Secretary, Louisiana Department of Public Safety and Corrections

**Lovisa Stannow**, Executive Director, Just Detention International

**Lara Stemple**, Former Director, Just Detention International; Director, Graduate Studies, University of California, Los Angeles, School of Law

**Tom Stickrath**, Director, Ohio Department of Youth Services

**Victor Stone**, Special Counsel, Office of Enforcement Operations, Criminal Division, U.S. Department of Justice

**Robert Sudlow**, Chief Probation Officer, Ulster County Probation Department, New York

**Anjali Swinton**, Director of Outreach, National Clearinghouse for Science, Technology, and the Law, Stetson University College of Law; President and CEO, SciLaw Forensics Ltd.

**Robin Toone**, Attorney, Foley Hoag LLP

**Cynthia Totten**, Program Director, Just Detention International

**Ashbel T. Wall, II**, Director, Rhode Island Department of Corrections

**Kelly Ward**, Former Warden, David Wade Correctional Center, Louisiana Department of Public Safety and Corrections

**Richard White**, Deputy Commissioner of Operations, City of New York Department of Correction

**Anne Wideman**, Clinical Psychologist

**Reginald Wilkinson**, Executive Director, Ohio Business Alliance for Higher Education and the Economy; Former Director, Ohio Department of Rehabilitation and Correction

**Margaret Winter**, Associate Director, National Prison Project, American Civil Liberties Union

**Jason Ziedenberg**, Consultant; Former Director, Justice Policy Institute



## APPENDIX E: STANDARDS IMPLEMENTATION NEEDS ASSESSMENT

During the public comment period, the Commission conducted a Standards Implementation Needs Assessment (SINA). The Commission created the SINA process to provide feedback on the draft standards through a series of “case studies” at particular facilities. More than 40 facilities from around the country applied to participate in the SINA process. The Commission selected 11 sites that reflected ranges in capacity, populations, and geographic settings and that included jails and prisons; facilities for men, women, and juveniles; and community corrections facilities. Each site visit took place over one and a half days and included a facility tour and five structured interviews: one with the Warden or Superintendent, and the others with small groups of staff to discuss general issues, training, medical/mental health, and investigations. These group interviews involved a variety of staff with experience relevant to the particular topic. When possible, we also spoke with inmates detained in the facilities.

### **Pilot Site**

Montgomery County Correctional Facility, Montgomery County Department of Correction and Rehabilitation, Boyds, MD  
April 22–23, 2008

### **Jails**

Suffolk County House of Correction, Suffolk County Sheriff’s Department, Boston, MA  
May 22–23, 2008

Washington County Jail, Washington County Sheriff’s Office, Hillsboro, OR  
June 5–6, 2008

### **Juvenile Facilities**

Cuyahoga Hills Juvenile Correctional Facility, Ohio Department of Youth Services, Highland Hills, OH  
July 9–10, 2008

Lynn W. Ross Juvenile Center, Tarrant County Juvenile Probation Department, Tarrant County Juvenile Services, Fort Worth, TX  
June 24–25, 2008

### **Prisons for Men**

James Allred Unit, Texas Department of Criminal Justice, Iowa Park, TX  
June 22–23, 2008

Northern Correctional Facility, West Virginia Division of Corrections, Moundsville, WV  
July 7–8, 2008

**Prisons for Women**

New Mexico Women's Correctional Facility, New Mexico Corrections Department, Grants, NM  
June 26–27, 2008

Valley State Prison for Women, California Department of Corrections and Rehabilitation,  
Chowchilla, CA  
June 3–4, 2008

**Community Corrections Facilities**

Southwestern Ohio Serenity (SOS) Hall, Hamilton, OH  
August 1, 2008

Talbert House, Cincinnati, OH  
July 30–31, 2008

