

PREA AUDIT: AUDITOR'S SUMMARY REPORT

ADULT PRISONS & JAILS

NATIONAL
PREA
RESOURCE
CENTER



BJA
Bureau of Justice Assistance
U.S. Department of Justice

[Following information to be populated automatically from pre-audit questionnaire]

Name of facility:

Donald W. Wyatt Detention Facility

Physical address:

950 High Street

Central Falls, Rhode Island 02863

Date report submitted:

September 3, 2014

Auditor Information

Address:

Nakamoto Group, Inc.

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Date of facility visit:

August 17-19, 2014

Facility Information		
Facility mailing address: <i>(if different from above)</i>		
Telephone number: 401-729-1190		
The facility is:	<input type="checkbox"/> Military	<input type="checkbox"/> County Federal
	<input checked="" type="checkbox"/> Private for profit	<input type="checkbox"/> Municipal <input type="checkbox"/> State
	<input type="checkbox"/> Private not for profit	
Facility Type:	<input checked="" type="checkbox"/> Jail	Prison
Name of PREA Compliance Manager: Timothy E. Tapley	Title: Deputy Warden	
Email address: ttapley@wyattdetention.com	Telephone number: 401-721-0307	
Agency Information		
Name of agency: Donald W. Wyatt Detention Facility		
Governing authority or parent agency: Central Falls Detention Facility Corporation		
Physical address: 950 High Street		
Central Falls, Rhode Island 02863		
Mailing address: <i>(if different from above)</i>		
Telephone number: 401-729-1190		
Agency Chief Executive Officer		
Name: Brian K. Murphy	Title:	CEO/Warden
Email address: bmurphy@wyattdetention.com	Telephone number:	401-721-0323
Agency-Wide PREA Coordinator		
Name: Timothy E. Tapley	Title:	Deputy Warden
Email address: ttapley@wyattdetention.com	Telephone number:	401-721-0307

AUDIT FINDINGS

NARRATIVE:

The site visit for PREA audit of the Donald W. Wyatt Detention Facility was conducted on August 17-19, 2014. During the three days the auditor toured the facility, reviewed documentation and conducted formal staff and detainee interviews. Fifty random detainees, from all eleven housing units, including one limited English speaking detainee and one physically handicapped detainee were interviewed. Fifteen specialized staff and twenty-five random correctional officers from all shifts were questioned about PREA training; how to report, to whom to report, filing reports, available interventions, conducting interviews, evidence collection, follow-up and monitoring retaliation.

The facility uses the local Rhode Island Hospital, Providence, Rhode Island for medical and mental health services, including SAFE/SANE and forensic examinations. Ms. Karyn Watkins of the Day One Crisis Intervention Center of Providence, Rhode Island, who provides advocacy services, was contacted and she stated the center has an excellent relationship with the facility. She believes the facility has been very proactive developing a more formal protocol for PREA, to ensure the safety of the detainees, and to always have an advocacy representative at the facility during an investigation. Ms. Watkins also stated the Center had completed PREA training with the staff.

The primary mission statement of the Donald W. Wyatt Detention Facility is to protect the public from people who pose a threat to society. Our mission is accomplished by operating a safe, secure and humane facility in compliance with state and federal law, as well as, American Correctional Association standards.

An entrance meeting was held with the following individuals in attendance: Brian K. Murphy, CEO/Warden; Timothy E. Tapley, Deputy Warden/PREA Coordinator; Major Daniel Martin, Chief of Security; Bonnie White, Health Services Administrator; Jean Singleton, Programs Director; Paul Villa, Director of Investigations; David Dalpe, Captain and Linda K. St. Pierre, ACA/Policy Compliance Supervisor. Following the entrance meeting I toured the facility from 8:30 a.m. to 11:30 a.m.

DESCRIPTION OF FACILITY CHARACTERISTICS:

The Donald W. Wyatt Detention Facility is located at 950 High Street Central Falls, Rhode Island and established in 1993 as the nation's first publicly owned and privately operated adult secure correctional facility. It is currently operated by the Central Falls Detention Facility Corporation (CFDFC). This special non-profit, quasi-public detention center was developed for use by the United States Marshal Service (USMS) in the Northeast and was later extended to include the Immigration and Customs Enforcement Agency (ICE). In October 2011, the facility began housing United States Naval personnel who have been placed in the custody of the General Court-Martial Convening Authority (GCMCA). The facility was accredited by the American Correctional Association initially in 1995 and most recently reaccredited on January, 2012 with a 100% rating.

The facility operates at maximum security, utilizing a high-tech design and construction containment system that includes 273 cameras. The facility has recently installed additional cameras in the Law Library and Laundry to eliminate blind spots. A \$47 million expansion completed in December 2006 increased the maximum occupancy to its current capacity of 772; including housing for 732 male and 40 female detainees. There are currently 511 detainees assigned to the facility, with 492 male and 19 female detainees. The racial breakdown is as follows; 36.2 % black, 35.6 % Hispanic, 24.8 % Caucasian and 3.4 % other. The facility has a rated capacity of 772 beds. The average detainee's stay at the facility is 101 days.

The detainees can enhance their skills; examine and modify behavior, or develop vocational skills. The facility offers a wide range of programming that includes; Anger Management, Substance Abuse, Vocational Barber Program, Adult Basic Education, GED, Rational Thinking, Domestic Violence and various educational and counseling programs. In the past twelve months there were two sexual assault/harassment allegation cases filed. After thorough investigations by the facility and USMS, both allegations were determined to be unfounded. The first allegation occurred at 2:00 a.m. on September 22, 2013 when a male detainee reported his cell-mate had attempted to sexually assault him in his bed. The facility took immediate action, having the detainee examined by medical and mental health staff, secured crime scene, separated the detainees and investigated the allegation in conjunction with United States Marshal Service since the detainees were USMS detainees. The assaulted detainee did not have any injuries. The incident was determined to be unfounded after completion of the investigation. The second allegation occurred on August 9, 2014 when a newly committed female detainee reported to staff her parole officer had sexually harassed her. The investigation was turned over to the USMS to investigate and the allegation was determined to be unfounded.

SUMMARY OF AUDIT FINDINGS:

An exit meeting was held August 19, 2014 with the following individuals in attendance:

Brian K. Murphy, CEO/Warden; Timothy E. Tapley, Deputy Warden/PREA Coordinator; Robert Cuzzupe, Chief Financial Officer; Lori Pouliot, Director of Human Resources, Major Daniel Martin, Chief of Security; Bonnie White, Health Care Supervisor; Jean Singleton, Programs Director; Paul Villa, Director of Investigations, Dan Henry, Investigator; David Dalpe, Captain and Linda St. Pierre, ACA/Policy Compliance Supervisor, Fred Clifford, Maintenance Supervisor; Patrick Brady, Correctional Officer; Greg Richard, Captain; Annmarie Wholley, Administrative Assistant; Attorney Margaret Lynch, CFDFC Counsel and John Sidorkis, Aramark District Manager.

The auditor found the staff and detainees to be clearly aware of PREA standards and the facility has an excellent PREA culture.

Number of standards exceeded: 0

Number of standards met: 41

Number of standards not met: 0

Number of standards not applicable: 2

§115.11 - Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

PREA Policy 411.6 A1 a-c page 6 and 7 states there is a zero tolerance of sexual abuse/harassment at the facility. The policy outlines the agency's approach to preventing, detecting and responding to sexual abuse/harassment conduct. Human Resource Department documentation reviewed indicated staff sign documentation indicating the staff have read and understand the policy. The PREA Coordinator works directly for the CEO/Warden.

§115.12 - Contracting with other entities for the confinement of inmates

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

N/A The agency has not contracted with other entities for the purpose of confinement of its detainees.

§115.13 – Supervision and Monitoring

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

CEO/Warden Murphy's annual review of the post orders and staffing plan indicates they have adequate staffing to meet the staffing needs of the jail. They never operate below the minimum staffing level. The annual review includes staffing levels, video monitoring system needs, and telephone access to ensure safe conditions for staff and detainees. The video camera system is monitored in the facility control center 24 hours a day. The agency recently installed additional cameras in the law library and laundry room for additional monitoring of blind spots. All elements of the standard are considered when developing of the plan. There were no staffing plan deviations the past 12 months. Documentation was reviewed indicating shift supervisors conduct unannounced rounds in the housing units.

§115.14 – Youthful Inmates

- Exceeds Standard (substantially exceeds requirement of standard)
 - Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
 - Does Not Meet Standard (requires corrective action)
- N/A The agency does not house juvenile detainees.

§115.15 – Limits to Cross-Gender Viewing and Searches

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Staff of the opposite gender is required to announce themselves before entering a housing unit. This was documented and verified during interviews with staff and detainees and observation during the audit. There have been no cross-gender strip searches or visual body cavity searches by non-medical staff the past 12 months. Staff has been trained on conducting pat-down searches of transgender and intersex detainees in a professional manner. PREA Policy 411.6 3a-b page 8 covers the viewing and searching limits of cross-gender detainees. PREA Policy 411.6 3c page 8 covers documentation of searches and PREA Policy 411.6 3e-f page 8 covers trans-gender and intersex detainees able to shower, perform bodily functions and dressing separately from other detainees. PREA Policy 411.6 3g page 8 covers the element that does not allow the search of the detainees for the sole purpose of determining the detainee's genital status. PREA Policy 411.6 3f page 8 covers the element that staff of the opposite gender must announce their presence when entering a housing unit.

§115.16 – Inmates with Disabilities and Inmates who are Limited English Proficient

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

PREA Policy 411.6 4a-c page 9 meets all the requirements of the standard to ensure detainees with disabilities have equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and harassment. Interpreter services through a contract with Language Line Interpreter Services are available for the detainees. Detainees are not allowed to be interpreters for other detainees.

§115.17 – Hiring and Promotion Decisions

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Based on interviews with Human Resource Supervisor and CEO/Warden Murphy all elements of this standard are met. PREA Policy 411.6 5a-b page 9 states the agency will not hire or promote anyone who may have contact with detainees, and not enlist the services of a contractor who may have contact with detainees who has a history of sexual abuse or harassment.

The agency Human Resource Supervisor and CEO/Warden Murphy stated that all new hires and promotions will have a background check completed and all employees will have a background check completed annually.

§115.18 – Upgrades to Facilities and Technology

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

The facility has installed additional cameras in the laundry room and law library for additional visual coverage to eliminate blind spots in the past 12 months. PREA Policy 411.6 6a-b page 9

states before any facility upgrades and technology modifications occur, the plans are to be forwarded and reviewed by the PREA Coordinator.

§115.21 – Evidence Protocol and Forensic Medical Examinations

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

The facility has an MOU with the Rhode Island Hospital, Providence, Rhode Island for Medical and Mental Health services and SAFE/SANE examinations and a MOU with the Day One Crisis Center of Providence, Rhode Island for advocacy services. The Center was contacted during the audit and Ms. Karyn Watkins stated they provide services to the jail and believes the facility has had a proactive approach to PREA and provides an excellent PREA culture. The telephone number is provided to the detainees for free calls and is posted in the housing units. PREA Policy 411.6 B1a-i covers all elements of the standard. Detainee interviews indicated they were aware of the agency and the posted telephone number.

§115.22 – Policies to Ensure Referrals of Allegations for Investigations

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

PREA Policy 411.6 B2a-i pages 10-11 and practice reviewed during the audit verifies the elements of the standard are met. The agency has two trained investigators to handle administrative and criminal investigations. Policy states that allegations will be investigated and referred to (USMS) or applicable user agency that shall coordinate the criminal investigative effort between Federal and State law enforcement officials. Facility staff shall assist in criminal investigations as required and maintain all case records associated with claims of sexual abuse and sexual harassment.

§115.31 – Employee Training

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

PREA Policy 411.6 C1a-d pages 11-12 cover all elements of the standard. The agency training curriculum and training records were reviewed. All staff interviewed, including line staff and executive staff clearly understands the PREA standards.

§115.32– Volunteer and Contractor Training

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

PREA Policy 411.6 C2a-d page 12 covers all the training elements of the standard. Volunteer training files were reviewed indicating volunteers received appropriate PREA training.

§115.33 – Inmate Education

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

PREA Policy 411.6 C3a-e pages 12-13 covers all elements of the standard. Detainees receive information during the intake process, as well as, information provided in the Detainee Handbook written in English and Spanish. There is posters posted through-out the facility and the telephone numbers posted in the housing units, by the telephones if detainees want to call and report an incident.

§115.34 – Specialized Training: Investigations

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Investigator has received training at the Rhode Island State Police Training Academy and University of Delaware for conducting sexual abuse investigations. PREA Policy 411.6 C4a-c page 13 covers all elements of the standard.

§115.35 – Specialized training: Medical and mental health care

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

PREA Policy 411.6 C5a-c pages 13-14 covers all elements of the standard ensuring training of the medical and mental health staff. The facility medical and mental health staff was interviewed and has received PREA training. The agency has an MOU with local hospital Rhode Island Hospital, Providence, Rhode Island for SAFE/SANE services, forensic examinations and other medical and mental health services.

§115.41 – Screening for Risk of Victimization and Abusiveness

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

PREA Policy 411.6 D1a-k pages 14-15 covers all elements of the standard. Intake process is conducted within 72 hours of arrival by the detainee to the facility. The risk instrument is an objective instrument. Through interviews with intake staff, the detainee files are reviewed within the first 30 days to reassess the detainee, if additional information is received for risk level reassessments. Detainees are not disciplined for not responding to specific questions during the intake process. This was verified through interviews with screening staff and detainees.

§115.42 – Use of Screening Information

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

PREA Policy 411.6 D2a-e page 16 covers all elements of the standard to ensure the safety of the detainees for housing and programming. Trans-gender and intersex detainees are

evaluated on a case by case basis in determining housing and programming assignments. The detainee's views are considered when determining assignments. The detainees are allowed to shower separately from other detainees. They are not placed in housing units based solely on their status or identification. This was verified through interviews with risk assessment staff.

§115.43 – Protective Custody

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

PREA Policy 411.6 D3a-g pages 17-18 covers all elements of the standard. The detainees are placed in a special housing unit for protection and allowed access to all privileges of general population. The detainee's status is reviewed at least every 7 days for the first 2 months and every 30 days thereafter.

§115.51 – Inmate Reporting

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

PREA 411.6 E1a-e pages 17-18 covers all elements of the standard allowing detainees multiple internal ways of reporting an incident. Based on staff and detainee interviews, detainees are aware on how to and whom to report an incident. They are informed at intake and procedures are stated in the inmate handbook. There are also posters giving instructions on reporting incidents. The detainees were also aware of the external advocacy agency and how to report an incident to them. Staff is aware to accept reports verbally, written, anonymously and from third parties.

§115.52 – Exhaustion of Administrative Remedies

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

PREA Policy 411.6 E2 page 18 and grievance policy 302 cover all elements of the standard. Detainee interviews verified that detainees are aware they can file grievances when reporting sexual abuse and harassment incidents. There were no grievances filed in the past 12 months. Policy states a decision must be made on the merits of any grievance filed within a 90 day period. Policy also allows for a third party to file the grievance for the detainee. Emergency grievances can be filed if a detainee is subject to a substantial risk of imminent sexual abuse.

§115.53 – Inmate Access to Outside Confidential Support Services

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

PREA Policy 411.6 E3a-d page 18 covers all elements of the standard. The agency has an MOU with the Day One Crisis Intervention Center of Providence, Rhode Island who provides advocacy services for the detainees. Through detainee interviews the detainees are aware of the center and the telephone number posted for free calls to the center.

§115.54 – Third-Party Reporting

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

PREA Policy 411.6 E4 a-b page 18 covers all the elements of the standard. The policy states third parties may report sexual abuse and sexual harassment on behalf of a detainee. Third party reporting information is posted in the housing units, facility website and lobby. Detainee interviews indicated the detainees are aware third parties can file a report for them.

§115.61 – Staff and Agency Reporting Duties

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

PREA Policy 411.6 F1a-e page 18 covers all elements of the standard. The agency has an MOU with the Day One Crisis Intervention Center of Providence, Rhode Island who provides

advocacy services for the detainees. Through detainee interviews the detainees are aware of the center and the telephone number posted for free calls to the center.

§115.62 – Agency Protection Duties

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

PREA Policy 411.6 F2a page 19 covers all elements of the standard. The facility takes immediate action to protect the detainee if determined the detainee is in substantial risk of sexual abuse or harassment. Through staff interviews, all staff is aware of their duty to protect detainees from sexual abuse and sexual harassment.

§115.63 – Reporting to Other Confinement Facilities

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

PREA Policy 411.6 F3a-b page 19 covers all elements of this standard assuring the agency will cooperate with all agencies reporting incidents and will do so within 72 hours of notification of the allegation. The agency also documents all reports of allegations.

§115.64 – Staff First Responder Duties

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Twenty-five staff were interviewed who could be a first responder and all clearly understood requirements of a first responder; separation, preserve evidence, secure crime scene, not allow detainees to destroy physical evidence and report to supervisor. PREA Policy F4a pages 19-20 covers all elements of the standard.

§115.65 – Coordinated Response

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

PREA Policy F5a page 20 covers all elements of the standard. The agency has a written coordinated plan that coordinates all actions taken in response to an incident of sexual abuse or sexual harassment including first responders, medical and mental health providers, investigators and facility leadership.

§115.66 – Preservation of ability to protect inmates from contact with abusers

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Agency Human Resource documentation and PREA Policy 411.6 F6a page 20 was reviewed and staff can be disciplined for any involvement in sexual abuse or sexual harassment of a detainee.

§115.67 – Agency protection against retaliation

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

PREA Policy 411.6 F7a-b page 20 covers all the elements of the standard. The agency has an upper-level staff person designated as the retaliation monitor. The monitor will continue a follow-up for at least 90 days or until there is no longer a threat. The agency employs multiple measures to protect all detainees and staff from retaliation for reporting an incident. The monitor also conducts periodic-status checks with the detainee or staff.

§115.68 – Post-Allegation Protective Custody

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

PREA Policy 411.6 F8a-b page 21 covers all elements of the standard. The detainees are placed in special housing if protection is needed, retaining privileges of general population. Medical and Mental Health staff are responsible for crisis intervention, treatment assessment needs and necessary follow-up.

§115.71 – Criminal and Administrative Agency Investigations

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

The agency has two PREA trained investigators who conduct all administrative and criminal investigations. PREA Policy 411.6 G1a-m pages 21-22 cover all elements of the standard. During the past 12 months there was two sexual abuse allegations made and was determined to be unfounded. The agency retains all investigation reports in a safe and secure area in the administrative offices.

§115.72 – Evidentiary Standard for Administrative Investigations

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

The agency doesn't impose a standard higher than a preponderance of the evidence when determining whether allegations of sexual abuse and harassment are substantiated per PREA Policy 411.6 G2a page 22 and interviews conducted with investigators.

§115.73 – Reporting to Inmate

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

All outcomes of alleged sexual abuse and harassment incidents are reported verbally and in writing to the inmate per PREA Policy 411.6 G3a-f pages 22-23 as to whether the allegation was determined to be substantiated, unsubstantiated or unfounded. If a staff member is involved, the staff member is no longer posted near the inmate, or no longer employed, or is indicted, or convicted. All reports are documented by the agency and were reviewed.

§115.76 – Disciplinary sanctions for staff

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

PREA Policy 411.6 H1a-d page 23 covers all elements of the standard indicating staff are subject to discipline and possible termination if involved in a sexual abuse or harassment incident with an inmate and is reported to law enforcement agencies, unless the act was clearly not criminal.

§115.77 – Corrective action for contractors and volunteers

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

PREA Policy 411.6 H2a-b page 23 covers all elements of the standard. Any contractor or volunteer will be reported to law enforcement if they have any sexual abuse or harassment involvement with a detainee. Their services will be terminated until the investigation is completed.

§115.78 – Disciplinary sanctions for inmates

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Disciplinary sanctions are clearly stated in the detainee handbook and detainee interviews verified detainees are aware of the sanctions for sexual abuse or harassment. PREA Policy 411.6 H3a-d page 24 covers all elements of the standard. The disciplinary process considers the detainee's mental disabilities in determining what type of sanction should be imposed. Per Policy #301 the agency may discipline a detainee for sexual contact with staff only upon a finding that the staff member did not consent to such contact. The agency, in its discretion, prohibits all sexual activity between detainees and may discipline detainees for such activity. The agency does not discipline detainee if such activity is determined not to be coerced.

§115.81 – Medical and mental health screenings; history of sexual abuse

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

The agency has an MOU with the local Rhode Island Hospital for medical and mental health services. The MOU and PREA Policy I1a-d page 24 was reviewed verifying the agency completes initial medical and mental health screenings during the intake process. The policy covers all elements of the standard. Medical and mental health staff was interviewed verifying the screening process.

§115.82 – Access to emergency medical and mental health services

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

The agency has an MOU with the local Rhode Island Hospital of Providence, Rhode Island for emergency medical and mental health services. These services are provided at no charge to the detainee per PREA Policy 411.6 I2a-d pages 24-25.

§115.83 – Ongoing medical and mental health care for sexual abuse victims and abusers

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

The agency has an MOU with the local Rhode Island Hospital of Providence, Rhode Island to provide on-going medical and mental health care including follow-up care at no cost to the detainee. PREA Policy 411.6 I3a-g page 25 covers all elements of the standard. Female detainees are offered tests for sexually transmitted infections as medically appropriate. If pregnancy results from the conduct described in this standard section, such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services.

§115.86 – Sexual abuse incident reviews

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

PREA Policy 411.6 J1a-c pages 25-26 covers all elements of the standard. The agency has a Review Team that was interviewed and incident reports are reviewed 30 days after conclusion of the investigation to determine if allegation is substantiated, unsubstantiated or unfounded. The Review Team consists of upper-level management.

§115.87 – Data Collection

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

PREA Policy 411.6 J2a-e page 26 covers all elements of the standard. The data is retained by the investigative unit and forwarded to the PREA Coordinator and reviewed at least annually.

§115.88 – Data Review for Corrective Action

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

PREA Policy 411.6 J3a-d states all retained data is reviewed for any possible trends for corrective action in policy and procedures.

§§115.89 – Data Storage, Publication, and Destruction

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

PREA Policy 411.6 J4a-b covers all elements of the standard and the data is stored in secured administrative offices and retained for at least 10 years.

AUDITOR CERTIFICATION:

The auditor certifies that the contents of the report are accurate to the best of his knowledge and no conflict of interest exists with respect to his ability to conduct an audit of the agency under review.



Auditor Signature

Date: September 3, 2014