

**POLICY and
PROCEDURE**

DONALD W. WYATT DETENTION FACILITY

Central Falls Detention Facility Corporation



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Section: Care

Subject: Sexual Abuse and Sexual Harassment - Prevention and
Intervention

Director of Compliance
(PREA Coordinator):

Warden:

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411.1. POLICY AND PURPOSE

The Donald W. Wyatt Detention Facility (DWWDF) is committed to the prevention and elimination of sexual abuse perpetrated against detainees by employees, contractors, volunteers, or by other detainees. Meeting the objectives set forth within the Prison Rape Elimination Act (PREA) of 2003 shall be a major priority and an ongoing focus for staff efforts at all levels of this organization. The facility shall embrace and enforce the standards set forth by the National Prison Rape Elimination Commission, American Correctional Association (ACA) as well as its user-agencies.

The facility is committed to having ***ZERO TOLERANCE*** toward all forms of sexual abuse and sexual harassment and in doing so it is the policy of the DWWDF to:

- Provide training to all staff, volunteers, contractors and detainees;
- Provide guidelines to help prevent sexual abuse and sexual harassment;
- Address the safety and treatment needs of victims of sexual abuse and sexual harassment;
- Investigate and document any and all incidents involving sexual abuse and sexual harassment;
- Discipline and/or refer for prosecution those found in violation of Donald W. Wyatt Detention Facility rules and regulations, policies, PREA Regulations, ACA Code of Ethics, local, state, and/or federal laws or statutes regarding sexual abuse and sexual harassment;
- Create an atmosphere of ***ZERO TOLERANCE*** concerning sexual abuse and sexual harassment.

411.2. AUTHORITY AND REFERENCE

- A. Contractual Requirements: Agreement between the Mashantucket Pequot Tribe and Central Falls Detention Facility Corporation; Intergovernmental Service Agreement #70-91-0033; US Navy Contract #N0018925P0186
- B. Local, State and Federal Regulations: Public Law 108-79 (Prison Rape Elimination Act of 2003). U.S. Code of Federal Regulations, 28 CFR 115, National Standards to Prevent, Detect, and Respond to Prison Rape Under the Prison Rape Elimination Act (PREA), Standards: (115.5); (115.6); (115.11); (115.13); (115.15 thru 18); (115.21); (115.22); (115.31 thru 35); (115.41 thru 43); (115.51 thru 54); (115.61 thru 68); (115.71 thru 73); (115.76 thru 78); (115.81 thru 83); (115.86 thru 89); (115.93); (115.401); and (115.404).
- C. Presidential Executive Order 14168 (EO #14168)

411.3. RESPONSIBILITIES

All staff, volunteers, contractors and detainees are responsible for being alert to signs of potential situations in which sexual abuse and sexual harassment might occur.

Preventing sexual abuse and sexual harassment, intervening when sexual abuse or sexual harassment occurs, investigating allegations of sexual abuse and sexual harassment, and disciplining/referring for prosecution perpetrators of sexual abuse and sexual harassment involves the coordinated efforts of several departments including but not limited to, Administration, Professional Standards Unit (PSU), Security, Programs, Training, and Health Services.

As the designated PREA Coordinator, the Director of Compliance shall have overall responsibility for ensuring that all elements of this policy are met in a coordinated, interdisciplinary fashion.

411.4. APPLICABLE STANDARDS

- A. American Correctional Association, Performance-Based Standards and Expected Practices for Adult Local Detention Facilities, 5th Edition, May 2023, Standards: 5-ALDF-2A-27; 4D-22, 23, 24, 25, 26, 27, 28, and 29.

- B. U.S. Department of Justice, United States Marshals Service, Federal Performance-Based Detention Standards (FPBDS), May 2025, Standards: (A.4.4.j thru l); (A.9.9); (A.9.12); (B.2.7.a.8 and 9); (B.6.4.a thru c); and (G.1.6.d).
- C. U.S. Department of Homeland Security, Immigration and Customs Enforcement, National Detention Standards (NDS) for Non-Dedicated Facilities, 2019, Standards: (2.2,II,E); (2.3,II,A); (2.11,II,A,7); and (4.4,II,G).

411.5. DEFINITIONS AND ACRONYMS (115.5 and 115.6)

ALLEGATION. Any event that has been reported to a staff member, contractor, or volunteer but which has not yet been verified or investigated.

AT RISK. Detainees who exhibit characteristics consistent with potential victims or perpetrators of sexually abusive behavior.

CHIEF OF SECURITY. The executive staff member having management supervision of all matters relating to the security of the facility.

CONTRACTOR. A person who provides services to the facility on a recurring basis pursuant to a contractual agreement.

DETAINEE. Any person detained at the facility regardless of adjudication status.

DIRECT STAFF SUPERVISION. For the purpose of this policy, shall mean that security staff are in the same room with, and within reasonable hearing distance of the detainee.

EMPLOYEE, STAFF OR STAFF MEMBER. A person who works directly for the Central Falls Detention Facility Corporation.

EXIGENT CIRCUMSTANCES. Any set of temporary and unforeseen circumstances that require immediate action in order to combat a threat to the security or institutional order of the facility.

FACILITY. The Donald W. Wyatt Detention Facility (DWWDF).

GENDER NONCONFORMING. A person whose appearance or manner does not conform to traditional societal gender expectations.

INTERSEX. A person whose sexual or reproductive anatomy or chromosomal pattern does not seem to fit typical definitions of male or female. Intersex medical conditions are sometimes referred to as disorders of sex development.

INTIMACY. Any behavior not deemed as sexual contact or sexual abuse of a detainee including kissing, touching parts of the body not defined under sexual abuse or other related acts including, but not limited to, sending/receiving personal letters/cards/gifts or receiving phone calls from a detainee. Intimate relationships between staff and detainees are expressly prohibited.

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.

PAT SEARCH. The running of hands over the clothed body of a detainee to determine whether the detainee possesses contraband.

PREA COORDINATOR. The executive staff member having the authority to develop, implement, oversee, and maintain the facility's PREA Program in order to ensure compliance with the various PREA standards.

PROGRAMS DIRECTOR. The executive staff member having management supervision of all matters relating to the programming function of the facility.

PUBLIC LAW 108-79. (Also known as the Prison Rape Elimination Act of 2003, or informally known as PREA) Federal legislation enacted in 2003 to provide for the analysis of the incidence and effects of prison rape in local, state and/or federal correctional institutions and to provide information, resources, recommendations and funding to protect individuals from prison rape.

SEXUAL ABUSE. Sexual abuse includes:

1. Sexual abuse of a detainee by another detainee includes any of the following acts, if the victim does not consent, is coerced into such act by overt or implied threats of violence, or is unable to consent or refuse:
 - a. Contact between the penis and the vulva or the penis and the anus, including penetration, however slight;
 - b. Contact between the mouth and the penis, vulva, or anus;
 - c. Penetration of the anal or genital opening of another person, however slight, by a hand, finger, object, or other instrument; and,
 - d. Any other intentional touching, either directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or the buttocks of another person, excluding contact incidental to a physical altercation.
2. Sexual abuse of a detainee by a staff member, contractor, or volunteer includes any of the following acts, with or without consent of the detainee:
 - a. Contact between the penis and the vulva or the penis and the anus, including penetration, however slight;
 - b. Contact between the mouth and the penis, vulva, or anus;
 - c. Contact between the mouth and any body part where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
 - d. Penetration of the anal or genital opening, however slight, by a hand, finger, object, or other instrument, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
 - e. Any other intentional contact, either directly or through the clothing, of or with the genitalia, anus, groin, breast, inner thigh, or the buttocks, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
 - f. Any attempt, threat, or request by a staff member, contractor, or volunteer to engage in the activities described above in paragraphs a-e of this definition;
 - g. Any display by a staff member, contractor, or volunteer of his or her uncovered genitalia, buttocks, or breast in the presence of a detainee; and,
 - h. Voyeurism by a staff member, contractor, or volunteer.

SEXUAL HARASSMENT. Sexual harassment includes:

1. Repeated and unwelcome sexual advances, requests for sexual favors, or verbal comments, gestures, or actions of a derogatory or offensive sexual nature by one detainee toward another; and,
2. Repeated verbal comments or gestures of a sexual nature to a detainee by a staff member, contractor, or volunteer, including demeaning references to gender, sexually suggestive or derogatory comments about body or clothing, or obscene language or gestures.

STAFF SEXUAL MISCONDUCT. Any verbal, physical or offensive conduct of a sexual nature by a staff member, contractor, or volunteer, directed toward a detainee under the care, custody, and supervision of the facility. All sexual contact between a detainee and a staff member, contractor, or volunteer shall be considered sexual misconduct.

STRIP SEARCH. A search that requires a person to remove or arrange some or all clothing so as to permit a visual inspection of the person's breasts, buttocks, or genitalia.

SUBSTANTIATED ALLEGATION. An allegation that was investigated and determined to have occurred.

TRANSGENDER. A person whose gender identity (i.e., internal sense of feeling male or female) is different from the person's assigned sex at birth.

UNFOUNDED ALLEGATION. An allegation that was investigated and determined not to have occurred.

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.

USER-AGENCY. An entity (i.e., the U.S. Marshals Service (USMS), Immigration and Customs Enforcement (ICE), Federal Bureau of Prisons (FBOP), U.S. Navy, and the Mashantucket Pequot Tribal Nation) that has a signed contract with the Central Falls Detention Facility Corporation authorizing the entity to remand its detainees to the custody of the officials of the Donald W. Wyatt Detention Facility.

VOLUNTEER. An individual who donates time and effort on a recurring basis to enhance activities and programs at the facility.

VOYEURISM BY A STAFF MEMBER, CONTRACTOR, OR VOLUNTEER. An invasion of privacy of a detainee by a staff member, contractor or volunteer for reasons unrelated to official duties, such as peering at a detainee who is using a toilet in his or her cell to perform bodily functions; requiring a detainee to expose his or her buttocks, genitals, or breasts; or taking images of all or part of a detainee's naked body or of a detainee performing a bodily function.

WARDEN. The chief executive responsible for the oversight of all operational and administrative functions of the Donald W. Wyatt Detention Facility.

411.6. PROCEDURES

A. PREVENTION PLANNING

1. Zero Tolerance of Sexual Abuse and Sexual Harassment. (115.11)
 - a. The facility is committed to having ***ZERO TOLERANCE*** toward all forms of sexual abuse and sexual harassment through prevention, detection, and response to such conduct in accordance with the requirements set forth in this policy.
 - b. The Warden has designated the Director of Compliance as the PREA Coordinator.
 - c. The PREA Coordinator shall have sufficient time and authority to develop, implement, and oversee the efforts to comply with the PREA standards.

2. Supervision and Monitoring. (115.13)
 - a. The facility shall maintain a staffing plan that provides for adequate levels of staffing to ensure detainee protection against sexual abuse/sexual harassment and shall take the following into consideration when calculating adequate staffing levels and determining the need for adequate video monitoring: **(NDS,2.3,II,A)**
 - i. Generally accepted detention practices;
 - ii. Any judicial findings of inadequacy;
 - iii. Any findings of inadequacy from federal investigative agencies;
 - iv. Any findings of inadequacy from internal or external oversight bodies;
 - v. All components of the facility's physical plant (including "blind spots" or areas where staff or detainees may be isolated);
 - vi. The composition of the detainee population;
 - vii. The number and placement of supervisory staff;
 - viii. Facility programs occurring on a particular shift;
 - ix. Any applicable state or local laws, regulations, or standards;
 - x. The prevalence of substantiated and unsubstantiated incidents of sexual abuse;
 - xi. Incidents reflecting on facility security and detainee safety;
 - xii. Findings and recommendations of sexual abuse incident review reports or other findings reflecting on facility security and detainee safety;
 - xiii. Length of time detainees spend in facility custody; and,
 - xiv. Any other relevant factors.
 - b. The Chief of Security shall be required to report in writing to the Warden justification of all deviations from the approved staffing plan.
 - c. Whenever necessary, but no less frequently than once each year, the Chief of Security, in consultation with the PREA Coordinator shall conduct a PREA assessment of the facility.
 - d. The PREA assessment shall be documented and forwarded to the Warden for review. The assessment shall consider recent changes to the facility environment and uniqueness of the detainee population. The assessment shall include interviews of staff and detainees regarding detainee safety and shall identify operational practices which should be improved upon.

Furthermore, it is important to ensure that staff and detainees are properly trained and to ensure that staff members are reporting all incidents, allegations, and observations of sexual abuse/sexual harassment. The assessment shall also determine and document whether adjustments are needed to:

- i. The staffing plan;
 - ii. The deployment of the facility's video monitoring system or other monitoring technologies; and,
 - iii. The resources the facility has available to commit to ensure adherence to the staffing plan.
- e. The Warden, Chief of Security, Programs Director, and Shift Commanders shall be required to make unannounced rounds to identify and deter staff sexual abuse and sexual harassment. Such practices shall be implemented on all shifts. Staff shall be prohibited from alerting other staff members that supervisory rounds are occurring, unless such an announcement is related to the legitimate functions of the facility.

3. Limits to Cross Gender Viewing and Searches. (115.15)

- a. Facility staff shall be prohibited from conducting cross gender strip searches or cross gender visual body cavity searches (meaning a search of the anal or genital opening) except in exigent circumstance or when performed by medical practitioners.
- b. Facility staff shall be prohibited from conducting cross gender pat searches of female detainees, absent exigent circumstances. Female detainees shall not be restricted from access to regularly available programming or other out-of-cell opportunities in order to comply with this provision.
- c. All cross-gender strip searches, cross gender visual body cavity searches, and cross gender pat searches of female detainees shall be documented by facility staff via an Incident Report (form WN 22102) prior to the end of the tour of duty in accordance with Policy #221 – Reporting of Incidents.
- d. Detainees shall be provided with reasonably private bathing and toileting environment in accordance with safety and security needs. All detainees (male and female) shall be allowed to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. **(NDS,4.4,II,G)**
- e. To protect the privacy of detainees during instances of showering, undressing or performing bodily functions, staff of the opposite sex shall announce their presence when entering a detainee housing unit. **(FPBDS C.1.5.a)(EO #14168)** If a staff member's post is in the housing unit, an announcement must be made upon the commencement of the shift. If staff are not assigned to the housing unit, they must announce themselves upon entry. **(NDS,4.4,II,G)**
- f. Facility staff shall not search or physically examine a transgender or intersex detainee for the sole purpose of determining the detainee's genital status. If a detainee's genital status is unknown, it may be determined during conversations with the detainee, by reviewing medical records, or if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner.

- b. Health Services Unit (HSU) medical staff shall provide emergency first aid in preparation for transfer to an outside medical facility.
- c. Victims of sexual abuse shall be referred under appropriate security provisions to a local medical facility for medical, psychological care and gathering of evidence. **(5-ALDF-4D-27)(FPBDS B.6.4.c)**
- d. All victims of sexual abuse shall have access to forensic medical examinations, without financial cost, where evidentiary or medically appropriate. Such examinations shall be performed by a Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) where possible. If a SAFE or SANE cannot be made available, the examination can be performed by other qualified medical practitioners. The Health Services Administrator (HSA) shall be required to document efforts to obtain the services of a SAFE or SANE.
- e. The outside medical facility will be informed of the detainee's condition and relevant medical history.
- f. The HSA shall attempt to make available to the victim, a victim advocate from a rape crises center. If a rape crisis center is not available to provide victim advocate services, the HSA shall acquire the services of a qualified staff member from a community-based organization, or a qualified facility staff member. The HSA shall document efforts to secure services from a rape crisis center.
- g. As requested by the victim, the victim advocate, qualified facility staff member, or qualified community-based organization staff member shall accompany and support the victim through the forensic medical examination process and investigatory interviews and shall provide emotional support, crisis intervention, information, and referrals.
- h. The facility shall request outside investigating agencies comply with the requirements set forth in this policy.
- i. For the purpose of this section, a qualified agency staff member or a qualified community-based staff member shall be an individual who has been screened for appropriateness to serve in this role and has received education concerning sexual abuse and forensic examination issues in general.

2. Referral of Allegations for Investigation. **(115.22)**

- a. The facility shall ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment.
- b. All allegations of sexual assault result in immediate notification to the appropriate user-agency within 24 hours of the initial report to ensure the agency and facility receive timely information on sexual abuse, sexual harassment or retaliation, and staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. **(FPBDS B.6.4.c.7)**
- c. Immediate notification shall be made to relevant external jurisdictions (e.g., law enforcement agency having jurisdiction, rape crisis center, etc.) and proof of the notification documented. **(FPBDS B.6.4.c.8)**
- d. Facility staff shall report all allegations of sexual abuse and sexual harassment, while simultaneously taking steps to protect the confidentiality of sexual abuse and sexual harassment information by sharing internally with only those who need to know. **(FPBDS B.6.4.c.9)**
- e. Allegations of sexual abuse or sexual harassment shall be referred to the applicable user-agency who shall coordinate the criminal investigative effort between federal and state law enforcement officials. PSU staff shall assist as required.

- f. The PREA Coordinator and PSU staff shall maintain all case records associated with claims of sexual abuse and sexual harassment, including incident reports, investigative reports, detainee information and case dispositions. All medical and counseling evaluation findings and recommendations for post-release treatment and/or counseling shall be maintained in the detainee's medical file in accordance with an established schedule of document retention as outlined in Policy #609 - Management Philosophy and Goals and Internal Regulations. **(5-ALDF-4D-29)**
- g. The PSU staff shall be the point of contact for outside law enforcement after the initial referral by the Shift Commander or higher authority.
- h. In the event that a non-serious, or past incident is reported, the Shift Commander shall have the staff members involved in the situation complete an Incident Report (form WN 22102). The Shift Commander shall notify the Chief of Security who shall be required to notify the applicable user-agency.
- i. The Shift Commander will take appropriate action to monitor the affected detainee and arrange a medical evaluation at an outside facility in coordination with the Health Services Administrator.
- j. Cases that are deemed prosecutable under local, state and/or federal law shall be immediately brought to the attention of the Warden.
- k. Cases determined to be a violation of DWWDF policy, Central Falls Detention Facility Corporation's rules and regulations or ACA's Code of Ethics will be handled administratively. Such administrative action must be cleared by the criminal investigation's authority.
- l. Cases determined to be violations of detainee code of conduct shall be forwarded to the Chief of Security for potential disciplinary action once cleared by the criminal investigative authority. **(5-ALDF-4D-23)(FPBDS A.9.12)**

C. TRAINING AND EDUCATION

1. Employee Training. **(115.31)**

- a. The PREA Coordinator in conjunction with the Director of Training and Recruitment shall ensure that all employees who have detainee contact receive training in the following:
 - i. The facility's ***ZERO TOLERANCE*** policy toward sexual abuse and sexual harassment;
 - ii. How to fulfill their responsibilities under the facility's sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures;
 - iii. Detainees' rights to be free from sexual abuse and sexual harassment;
 - iv. The right of detainees and employees to be free from retaliation for reporting sexual abuse and sexual harassment;
 - v. The dynamics of sexual abuse and sexual harassment in confinement;
 - vi. The common reactions of sexual abuse and sexual harassment victims;
 - vii. How to detect and respond to signs of threatened and actual sexual abuse and sexual harassment;
 - viii. How to avoid inappropriate relationships with detainees;
 - ix. How to communicate effectively and professionally with detainees, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming detainees;

- x. How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities; and,
 - xi. All components set forth in this policy.
- b. PREA training for staff shall be tailored to be applicable to all detainees housed at the facility.
- c. All employees hired shall receive PREA training during their New Employee Orientation or during their pre-service training. All employees shall be provided with refresher training every year to ensure that they are knowledgeable and understand the requirements set forth in this policy. In years in which employees DO NOT receive refresher training, the facility shall provide refresher information on current sexual abuse and sexual harassment policies. **(5-ALDF-7B-11)**
- d. Employees shall be required to acknowledge in writing that they understand the training they have received. The ZERO TOLERANCE – Sexual Abuse and Sexual Harassment Training Acknowledgement (form WN 41101) shall be completed and the original signed form shall be filed in each employee’s personnel file and a copy of the signed form shall be placed in the employee’s training file. In addition to receiving PREA training, all staff shall receive a copy of Policy #411 - Sexual Abuse and Sexual Harassment - Prevention and Intervention, receipt of which shall be documented on form WN 41101.

2. Volunteer and Contractor Training. **(115.32)**

- a. The PREA Coordinator in conjunction with the Director of Training and Recruitment shall ensure that all volunteers and contractors who have detainee contact receive training in the following:
- i. The facility’s *ZERO TOLERANCE* policy toward sexual abuse and sexual harassment;
 - ii. How to fulfill their responsibilities under the facility’s sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures;
 - iii. Detainees’ rights to be free from sexual abuse and sexual harassment;
 - iv. The right of detainees and employees to be free from retaliation for reporting sexual abuse and sexual harassment;
 - v. The dynamics of sexual abuse and sexual harassment in confinement;
 - vi. The common reactions of sexual abuse and sexual harassment victims;
 - vii. How to detect and respond to signs of threatened and actual sexual abuse and sexual harassment;
 - viii. How to avoid inappropriate relationships with detainees;
 - ix. How to communicate effectively and professionally with detainees, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming detainees;
 - x. How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities; and,
 - xi. All components set forth in this policy.
- b. Volunteers and contractors shall be required to acknowledge in writing that they understand the training they have received.

The ZERO TOLERANCE - Sexual Abuse and Sexual Harassment Training Acknowledgement (form WN 41101) shall be completed and the original signed form shall be filed in each volunteer/contractor's training file. In addition to receiving PREA training, all contractors and volunteers shall receive a copy of Policy #411 - Sexual Abuse and Sexual Harassment - Prevention and Intervention, receipt of which shall be documented on form WN 41101.

3. Detainee Education. (115.33)

- a. During the intake process, detainees shall receive information explaining the facility's **ZERO TOLERANCE** policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment. The information shall be provided by programs staff and shall include the Prisoner Rape Elimination Act Reporting Information handout (Appendix A). Additional information regarding sexual abuse and sexual harassment shall be included in the Detainee Handbook and shall include but not be limited to:
 - i. Prevention/Intervention;
 - ii. Self-protection;
 - iii. Reporting; and,
 - iv. Treatment and counseling.
- b. Within fourteen (14) business days of intake, programs staff shall provide comprehensive education to detainees either in person and/or through video regarding their rights to be free from sexual abuse and sexual harassment, to be free from retaliation for reporting such incidents, and the facility's policies and procedures for responding to such incidents. **(5-ALDF-2A-27)(FPBDS A.4.4.j thru l)**
- c. Detainee education shall be provided in formats accessible to all detainees, including those who are of limited English proficiency, deaf, visually impaired, or otherwise disabled, as well as to detainees who have limited reading skills. Detainee video and written education material shall be available in English and Spanish. Facility staff shall translate or utilize the telephonic translator service for translation to other languages, and are also available to read the material to detainees as necessary to ensure that each detainee understands the information being provided.
- d. Programs staff shall ensure detainee participation in these educational sessions. Detainees shall be required to sign the Detainee Sexual Abuse and Sexual Harassment Training Acknowledgement (form WN 41102) acknowledging that they have received and understand the training materials provided. The acknowledgement form shall be forwarded to the Records Department for inclusion in the detainee's six (6) part file.
- e. In addition to the above education, the facility shall ensure that key information is continuously and readily available or visible to detainees through posters, videos, detainee handbooks, or other written formats.

4. Specialized Training – Investigations. (115.34)

- a. In addition to the general training provided to all employees, the facility shall ensure that, to the extent the facility itself conducts sexual abuse investigations, its investigators have received training in conducting such investigations in confinement settings.

- b. Specialized training shall include techniques for interviewing victims of sexual abuse/sexual harassment, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral.
 - c. Documentation of training shall be maintained within the staff member's training file.
5. Specialized Training – Medical and Mental Health Practitioners. (115.35)
- a. In addition to the general training provided to all employees, the facility shall ensure that all full and part-time medical and mental health care practitioners who work regularly within the facility shall be trained in the following:
 - i. How to detect and assess signs of sexual abuse and sexual harassment;
 - ii. How to preserve physical evidence of sexual abuse;
 - iii. How to respond effectively and professionally to victims of sexual abuse and sexual harassment; and,
 - iv. How and to whom to report allegations or suspicions of sexual abuse and sexual harassment.
 - b. Facility medical and mental health staff DO NOT conduct forensic examinations. All such examinations shall be conducted at outside medical facilities.
 - c. Documentation of training shall be maintained within the medical and mental health staff member's training file.

D. SCREENING FOR RISK OF SEXUAL VICTIMIZATION AND ABUSIVENESS

1. Screening for Risk of Victimization and Abusiveness. (115.41)
 - a. All new detainees shall undergo a medical and mental health screening upon intake in accordance with Policy #407 – Health Screenings, Examinations and Informed Consent. The screening shall include completion of the Sexual Assault/Sexual Abuse Risk Assessment Screening (form WN 41103) within twenty-four (24) hours of admission and shall include assessment for potential vulnerabilities and/or tendencies of acting out with sexually aggressive behavior. The screening shall consider prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known to the facility, in assessing detainees for risk of being sexually abusive. **(FPBDS B.2.7.a.8)** Based on the information provided, medical staff shall determine and document special housing needs and shall complete mental health referrals (if warranted) in accordance with Policy #413 – Mental Health Services and Suicide Prevention. The Shift Commander shall be immediately informed of all special housing needs.

All screening forms shall be forwarded to the Health Services Administrator or designee for review and signature. Once the form has been reviewed and signed, a copy shall be promptly forwarded to the Programs Department and utilized as part of the classification process. The original shall be placed in the detainee's medical file.

The screening shall consider, at a minimum, the following criteria to assess detainees for risk of sexual victimization: **(5-ALDF-4D-22)(FPBDS B.2.7.a.9)**

- i. Whether the detainee has a mental, physical, or developmental disability;
 - ii. The age of the detainee;
 - iii. The physical build of the detainee;
 - iv. Whether the detainee has previously been incarcerated;
 - v. Whether the detainee's criminal history is exclusively nonviolent;
 - vi. Whether the detainee has prior convictions for sex offenses against an adult or child;
 - vii. Whether the detainee is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming;
 - viii. Whether the detainee has previously experienced sexual victimization;
 - ix. The detainee's own perception of vulnerability; and,
 - x. Whether the detainee is detained solely for civil immigration purposes.
- b. Detainees shall not be disciplined for refusing to answer, or for not disclosing complete information in response to questions asked pursuant to Section 411.6(D)(1)(a)(items i, vii, viii and ix above).
- c. Upon intake, medical staff shall provide detainees with the Zero Tolerance – Sexual Abuse and Sexual Harassment Handout (Appendix B). Issuance of this handout shall be documented on the Sexual Assault/Sexual Abuse Risk Assessment Screening (form WN 41103).
- d. Detainees identified as having a history of sexually abusive behavior shall be assessed by mental health staff or another qualified professional. These detainees are identified, counseled, and monitored. **(5-ALDF-4D-24)(FPBDS B.6.4.a)(FPBDS G.1.6.d)**
- e. Unless special housing has been deemed necessary, all new detainees shall be housed in an orientation unit/area pending a classification assessment and facility orientation which will be completed by programs staff.
- f. Within thirty (30) days, but no earlier than five (5) days of a new commitment's arrival to the facility, a programs staff member shall conduct a reassessment utilizing a Sexual Assault/Sexual Abuse Risk Re-Assessment Screening (form WN 41104) in accordance with Policy #506 – Assessment and Classification, to assess the detainee's risk of being sexually abused by other detainees or risk of sexually abusing others. The Classification Manager and Programs Director shall review the reassessment and determine if the detainee shall remain housed in the current unit or re-assigned to special management for Protective Custody or Administrative Status review.
- g. A detainee's risk level shall be assessed when warranted due to a referral request, incident of sexual abuse, or receipt of additional information that bears on the detainee's risk of sexual victimization or abusiveness.
- h. In order to ensure that detainee responses to questions are not exploited to the detainee's detriment by staff or other detainees, staff shall ensure that the information is only disseminated to those persons with a need to know (i.e., Chief of Security and/or higher authority, medical and mental health practitioners, programs staff).
- i. The Sexual Assault/Sexual Abuse Risk Re-Assessment Screening (form WN 41104) that is utilized as the re-assessment screening (or due to a referral request, incident of sexual abuse, or receipt of additional information that bears of the detainee's risk of sexual victimization or abusiveness) shall be forwarded to the Records Department for inclusion in the detainee's six (6) part file.

2. Use of Screening Information. **(115.42)(NDS,2.2,II,E)**
 - a. Programs staff shall use information obtained from the risk screening in making informed decisions regarding housing, bed, work, education and program assignments with the goal of keeping separate those detainees at high risk of being sexually victimized from those at high risk of being sexually abusive. These decisions shall be made on a case-by-case basis.
 - b. In the event a detainee identifies as a transgender or intersex individual, the Shift Commander shall be notified. The Shift Commander shall interview the detainee and complete form WN 41109 – Transgender/Intersex Person Review. The Shift Commander will draft a roll call memo advising staff of the detainee’s search preferences. The completed form shall be forwarded to the Classification Manager for review and appropriate action. In deciding whether to assign a transgender or intersex detainee to a housing unit for male or female detainees, and in making other housing and programming assignments, staff shall consider on a case-by-case basis whether a placement would ensure the detainee’s health and safety, and whether the placement would present management or security problems. A medical and/or mental health professional shall be consulted as soon as practicable on this assessment.
 - c. The Programs Director shall ensure that placement and programming assignments for each transgender or intersex detainee are reassessed at least twice each year to review any threats to safety experienced by the detainee. Such review for placement shall be in consultation with the Health Services Administrator and Chief of Security. Such review and consultation shall be documented on form WN 41109 – Transgender/Intersex Person Review.
 - d. Housing unit assignments for transgender or intersex detainees shall not be based solely on the identity documents or physical anatomy of the detainee. A transgender or intersex detainee’s own views with respect to his or her own safety shall be given serious consideration.
 - e. Transgender and intersex detainees shall be given the opportunity to shower separately from other detainees. **(NDS,4.4,II,G)** The Chief of Security shall be consulted prior to any deviations from the established shower schedule. Alternate shower times to accommodate transgender or intersex detainees shall be documented on form WN 41109 – Transgender/Intersex Person Review.
3. Protective Custody. **(115.43)**
 - a. Detainees identified as at risk for sexual victimization are assessed by a mental health or other qualified professional, monitored and counseled in accordance with the requirements set forth in this policy. **(5-ALDF-4D-25)(FPBDS B.6.4.b)(FPBDS G.1.6.d)**
 - b. Detainees at high risk for sexual victimization shall not be placed in involuntary special management unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers.
 - c. In the event that the assessment cannot be conducted immediately, the detainee may be held in Protective Custody status in accordance with Policy #205 – Special Management, for up to twenty-four (24) hours while completing the assessment.

- d. Detainees placed on Protective Custody status for this purpose shall, to the extent possible, have access to programs, privileges, education, and work opportunities. All denials of these privileges must be documented in an Incident Report (form WN 22102) and forwarded to the Warden through the chain of command. The report must include, but not be limited to:
 - i. The opportunities that have been limited;
 - ii. The reasons for such limitations; and,
 - iii. The duration of the limitations.
- e. Detainees may be held in involuntary special management on Protective Custody status only until an alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed a period of thirty (30) days.
- f. ICE detainees who have been victimized, shall be placed in a supportive environment that represents the least special management option possible (e.g., Protective Custody) but victims shall not be held for longer than five (5) days in any type of administrative special management except in highly unusual circumstances or at the request of the detainee.
- g. If an involuntary special management on Protective Custody status is made, the following must be clearly documented:
 - i. The basis for the concern for the detainee's safety; and,
 - ii. The reason why no alternative means of separation can be arranged.
- h. Detainees housed in special management shall be reviewed by the Deputy Chief of Security or higher authority within twenty-four (24) hours of placement. Detainees remaining in special management shall be reviewed every seven (7) days by a multi-disciplinary staff committee in order to determine whether there is a continuing need for separation from general population (refer to Policy #205 - Special Management). During a detainee's duration in Protective Custody, the detainee must have a face-to-face review with the Programs Director or designee every thirty (30) days.

E. REPORTING

Detainees shall have multiple internal ways to privately report sexual abuse and sexual harassment without fear of retaliation from other detainees or staff. All reports regarding sexual abuse shall be considered Class 1 incidents and shall be reported and documented in accordance with Policy #221 – Reporting of Incidents.

1. Detainee Reporting. (115.51)

- a. Staff shall accept reports made verbally, in writing, anonymously, and from third parties of sexual abuse, sexual harassment, retaliation by other detainees or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents. Staff shall promptly relay such information verbally to the Shift Commander. Staff shall also be required to submit an Incident Report (form WN 22102) to the Shift Commander prior to the end of their tour of duty.
- b. Detainees may report to any staff member, at any time, information concerning sexual abuse and sexual harassment.

Detainees who are victims of sexual abuse or sexual harassment shall have the option to report the incident to a designated staff member as well as other individuals or entities (e.g., a supervisor, third party reporting on behalf of a detainee, or safe helpline(s) as identified in Section 411.6(E) of this policy, etc.). For purposes of a designated report person, the Health Services Administrator has been appointed by the Warden. **(5-ALDF-4D-28)**

c. Detainees may also report sexual abuse or sexual harassment by telephone, as follows:

- i. The facility maintains an internal “Hotline” number *9011# which connects directly to the Professional Standards Unit.
- ii. Detainees may report sexual abuse and/or sexual harassment to the Rhode Island State Police by dialing *4011# or 1-401-444-1000. The Rhode Island State Police may also be contacted by mail, the address is:

Rhode Island State Police
311 Danielson Pike
North Scituate, RI 02857

- iii. Detainees may report sexual abuse and/or sexual harassment to the Office of the Inspector General:

- (01) Contacting the DOJ Inspector General by Non-ICE Detainees. Non-ICE detainees may contact the U.S. Department of Justice (DOJ) Office of the Inspector General by dialing *8477# or 1-800-869-4499. The Office of the Inspection General may also be contacted by mail, the address is:

Office of the Inspector General
U.S. Department of Justice
950 Pennsylvania Avenue, Room 4706
Washington, DC 20530

- (02) Contacting the DHS Inspector General by ICE Detainees. ICE detainees may contact the U.S. Department of Homeland Security (DHS) Office of the Inspector General via hotline by pressing 6 on the telephone keypad, then entering 518# or detainees may dial 1-800-323-8603. The Office of the Inspection General may also be contacted by mail, the address is:

DHS Office of the Inspector General
245 Murray Lane, SW
Building 410/Mail Stop 0305
Washington, DC 20528

- iv. ICE detainees may also contact the ICE Detention Reporting and Information Line (DRIL) at 1-888-351-4024 (toll-free hotline) or by pressing 6 on the telephone keypad, then entering 9116#. The ICE Detainee Handbook shall contain information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security.

- d. Staff may privately report sexual abuse and sexual harassment of detainees directly to the Warden, Chief of Security, or Professional Standards Unit.
2. Exhaustion of Administrative Remedies. (115.52)

Information regarding exhaustion of administrative remedies shall be outlined in Policy #302 – Detainee Grievance System.
 3. Detainee Access to Outside Confidential Support Services. (115.53)
 - a. Detainees shall have access to outside victim advocates for emotional support services related to sexual abuse or sexual harassment.
 - b. Health services staff shall provide detainees with the Zero Tolerance – Sexual Abuse and Sexual Harassment Handout (Appendix B) which includes mailing addresses and telephone numbers, including toll-free hotline numbers (where available) of local, state, or national victim advocacy or rape crisis organizations; and persons detained solely for civil immigration purposes shall be provided with contact information for immigration service agencies. Medical and/or programs staff shall ensure that detainees are allowed reasonable communication between these organizations and agencies, in as confidential a manner as possible.
 - Local victim advocacy services may be accessed by calling Day One at *9070# or 1-800-494-8100; or by writing to Day One at 100 Medway Street, Providence, RI 02906-4402.
 - c. The detainee shall be informed prior to having access to the above resources, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws.
 - d. The facility maintains contractual agreements with community service providers who are able to provide detainees with confidential emotional support services related to sexual abuse or sexual harassment.
 4. Third-Party Reporting. (115.54)
 - a. Third-parties may report sexual abuse and sexual harassment on behalf of a detainee.
 - b. Information regarding third-party reporting (refer to Appendix C – Sexual Abuse and Sexual Harassment Prevention Statement) shall be posted in the facility lobby and on the public website www.wyattdetention.com.

F. OFFICIAL RESPONSE FOLLOWING A DETAINEE REPORT

1. Staff Reporting Duties. (115.61)
 - a. Staff shall be required to immediately report any knowledge, suspicion, or information regarding:
 - i. an incident of sexual abuse or sexual harassment that occurred in the facility;
 - ii. retaliation against detainees or staff who report such an incident;and,

- iii. any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.
- b. Apart from reporting to their supervisor or higher authorities, staff shall not reveal any information related to a sexual abuse or sexual harassment report to anyone other than to the extent necessary, as specified in facility policies, to make treatment, investigation, and other security and management decisions.
- c. Unless otherwise precluded by local, state and/or federal law, medical and mental health practitioners shall be required to report sexual abuse and sexual harassment pursuant to this policy and to inform detainees of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services.
- d. If the alleged victim is under the age of eighteen (18) or is considered a vulnerable adult under a state or local vulnerable person's statute, the facility shall report the allegation to the designated state or local services agency under applicable mandatory reporting laws.
- e. All reports of alleged sexual abuse and sexual harassment, including third-party and anonymous reports shall be reported through the chain of command to the Director of Professional Standards and Audits, and to the Warden.

2. Facility Protection Duties. (115.62)

When the facility learns that a detainee is subject to a substantial risk of imminent sexual abuse, immediate action shall be taken to protect the detainee.

3. Reporting to Other Confinement Facilities. (115.63)

- a. Upon receiving an allegation that a detainee was sexually abused while confined at another facility, the Warden or designee shall notify the head of the facility or appropriate office of the agency where the alleged abuse occurred utilizing form WN 41108 – Report of Sexual Abuse.
- b. Such notification shall be provided as soon as possible, but not later than seventy-two (72) hours after receiving the allegation. All such notifications shall be documented.
- c. When another agency notifies the facility of an allegation of sexual abuse or sexual harassment that occurred at the facility, the Warden or designee shall ensure that the allegation has already been investigated or an investigation is initiated in accordance with PREA standards.

4. Staff First Responder Duties. (115.64)

- a. Upon learning of an allegation that a detainee has been sexually abused, the first security staff member to respond to the report shall be required to:
 - i. Notify a shift supervisor or Central Control;
 - ii. Separate the alleged victim and abuser. Ensure the detainee victim and perpetrator are placed on a constant observation watch in accordance with Policy #413 – Mental Health Services and Suicide Prevention;

- iii. Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence (refer to Policy #220 – Collection and Preservation of Physical Evidence);
 - iv. If the abuse occurred within a time period that still allows for the collection of physical evidence, REQUEST that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating; and,
 - v. If the abuse occurred within a time period that still allows for the collection of physical evidence, ENSURE that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.
 - b. If the first staff responder is not a security staff member, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff.
5. Coordinated Response. (115.65)
 - a. There shall be a coordinated response to incidents of sexual abuse, among staff first responders, medical and mental health practitioners, investigators and facility management.
 - b. The Chief of Security or Shift Commander shall make all required notifications in accordance with Policy #221 – Reporting of Incidents, to include notification to relevant user-agencies, PSU, and the PREA Coordinator.
 - c. The detainee victim shall be escorted to the Health Services Unit for evaluation by medical staff and mental health practitioner (if on duty).
 - d. Medical staff shall make a determination as to the need for transfer of the detainee victim to Rhode Island Hospital.
 - e. The Shift Commander and medical staff shall coordinate transfer to Rhode Island Hospital as deemed necessary.
 - f. The perpetrator if known shall be kept separate from the victim until the investigation has been completed.

6. Preservation of Ability to Protect Detainees from Contact with Abusers. (115.66)

The facility shall not enter into or renew any collective bargaining agreement or other agreement that limits the facility's ability to remove alleged staff sexual abusers from contact with any detainees pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted.

7. Protection against Retaliation. (115.67)

- a. All detainees and staff who report sexual abuse or sexual harassment or cooperate with a sexual abuse or sexual harassment investigation shall be protected from retaliation by other detainees and/or staff. If an individual who cooperates with an investigation expresses a fear of retaliation, the facility shall take appropriate measures to protect that individual against retaliation.

- b. The Programs Director shall ensure protective measures for detainees who report sexual abuse or sexual harassment or cooperate with a sexual abuse or sexual harassment investigation. The Programs Director shall initiate documentation of retaliation monitoring at the time of the initial report and continue for a minimum of ninety (90) days if the initial monitoring indicates a continuing need. Monitoring shall be documented on form WN 41105 – Retaliation Monitoring (Detainee). Intermittent reviews shall be annotated every 30 days on the same WN 41105.
 - c. The Director of Human Resources shall provide protective measures for staff who report sexual abuse or sexual harassment or cooperate with a sexual abuse or sexual harassment investigation. The Director of Human Resources shall initiate documentation of retaliation monitoring at the time of the initial report and continue for a minimum of ninety (90) days if the initial monitoring indicates a continuing need. Monitoring shall be documented on form WN 41106 – Retaliation Monitoring (Staff). Intermittent reviews shall be annotated every 30 days on the same WN 41105.
 - d. Protective measures include, but are not limited to, housing changes, transfers, removal of alleged staff or detainee abusers from contact with victims, and emotional support services for detainees or staff who fear retaliation for reporting sexual abuse/sexual harassment or for cooperating with an investigation.
 - e. The facility's obligation to monitor for retaliation shall be discontinued if the investigation determines that the allegation is unfounded.
8. Post-Allegation Protective Custody. (115.68)
- a. Any use of special management housing to protect a detainee who is alleged to have suffered sexual abuse shall be subject to the requirements set forth in Section 411.6(D)(3) of this policy.
 - b. Additionally, medical and mental health staff shall be responsible for crisis intervention, assessment of treatment needs, documentation of the evaluation results, treatment, psychiatric referral, and other treatment options related to the alleged victim as outlined in this policy.

G. INVESTIGATIONS

1. Criminal and Administrative Agency Investigations. (115.71)
 - a. All initial investigative assessments into allegations of sexual abuse and/or sexual harassment shall be completed by an investigator assigned to the Professional Standards Unit. Investigations shall be completed promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports.
 - b. PSU investigators shall receive special training in sexual abuse/sexual harassment investigations in accordance with this policy.
 - c. The credibility of an alleged victim, suspect, or witness shall be assessed on an individual basis and shall not be determined by the person's status as a detainee or staff member. The facility shall not require a detainee who alleges sexual abuse or sexual harassment to submit to a polygraph examination or truth telling device as a condition for proceeding with the investigation of such an allegation.

- d. If at any point in the initial inquiry or assessment, the quality of the evidence appears to support criminal prosecution, the PSU inquiry/assessment shall cease immediately and the appropriate user-agency and/or the Rhode Island State Police (RISP) shall be notified.
- e. Once notification and/or investigative referral to any outside agency/agencies has been made, the PSU investigator(s) shall consult with prosecutors before conducting any compelled interviews.
- f. PSU investigators shall assist and cooperate with outside agencies/investigators by helping to facilitate the gathering and preservation of direct and circumstantial evidence, including available physical and DNA evidence, and any available electronic monitoring data. Additionally, PSU investigators shall help facilitate any interviews of alleged victims, suspected perpetrators, witnesses, and provide for a review of all information concerning prior complaints or facility reports of sexual abuse involving the suspected perpetrator.
- g. Administrative investigations:
 - i. shall include an effort to determine whether staff actions or failures to act contributed to the abuse; and,
 - ii. shall be documented in written reports that include a description of physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings.
- h. Criminal investigations shall be documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence where feasible.
- i. Substantiated allegations of conduct that appears to be criminal shall be referred for prosecution.
- j. The PSU shall maintain written reports regarding administrative and criminal investigations for as long as the alleged abuser is incarcerated or employed by the facility, plus five (5) years.
- k. The departure of the alleged abuser or victim from the employment or control of the facility shall not provide a basis for terminating an investigation.
- l. Any state entity or Department of Justice component that conducts such investigations shall do so pursuant to the above requirements.
- m. The PSU investigator(s) shall endeavor to remain informed about the progress of the external investigation.

2. Evidentiary Standard for Administrative Investigations. (115.72)

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

3. Reporting to Detainees. (115.73)

- a. PSU staff shall coordinate with law enforcement staff (where applicable), following an investigation into a detainee's allegation that he or she suffered sexual abuse at this facility, PSU staff shall inform the detainee as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded.

- b. If the facility did not conduct the investigation, it shall request the relevant information from the investigative agency in order to inform the detainee.
- c. Following a detainee's allegation that a staff member, contractor or volunteer has committed sexual abuse against the detainee, PSU staff shall subsequently inform the detainee (unless the facility has determined that the allegation is unfounded) whenever:
 - i. The staff member is no longer posted within the detainee's unit;
 - ii. The staff member, contractor or volunteer is no longer employed, working, or providing services at the facility;
 - iii. The facility learns that the staff member, contractor or volunteer has been indicted on a charge related to sexual abuse within the facility; or,
 - iv. The facility learns that the staff member, contractor or volunteer has been convicted on a charge related to sexual abuse within the facility.
- d. Following a detainee's allegation that he or she has been sexually abused by another detainee, PSU staff shall subsequently inform the alleged victim whenever:
 - i. The facility learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility; or,
 - ii. The facility learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.
- e. All such notifications or attempted notifications shall be documented by PSU staff.
- f. The facility's obligation to report under this section shall be terminated if the detainee is released from facility custody.

H. DISCIPLINE

1. Sexual conduct between staff and detainees; volunteers or contract personnel and detainees, regardless of consensual status, is prohibited and subject to administrative and criminal disciplinary sanctions. **(FPBDS A.9.9)**
2. "Consensual" sexual activity shall be prohibited between or among detainees; or between staff, contractors, volunteers and detainees.
3. Disciplinary Sanctions for Staff. (115.76)
 - a. Staff shall be subject to disciplinary sanctions up to and including termination for violating facility sexual abuse or sexual harassment policies.
 - b. Termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual abuse.
 - c. Disciplinary sanctions for violations of facility policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) shall be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories.
 - d. All terminations for violations of sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, shall be reported to law enforcement agencies unless the activity was clearly not criminal, and to any relevant licensing bodies. **(5-ALDF-4D-26)(FPBDS A.9.9)**

4. Corrective Action for Contractors and Volunteers. (115.77)
 - a. Any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with detainees and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies.
 - b. The facility shall take appropriate remedial measures, and shall consider whether to prohibit further contact with detainees, in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer. **(5-ALDF-4D-26)(FPBDS A.9.9)**

5. Disciplinary Sanctions for Detainees. (115.78)
 - a. Detainees shall be subject to disciplinary sanctions pursuant to Policy #301 – Rules and Discipline for engaging in detainee-on-detainee sexual abuse or following a criminal finding of guilty for detainee-on-detainee sexual abuse.
 - b. Disciplinary sanctions shall be commensurate with the nature and circumstances of the abuse committed, the detainee’s disciplinary history, and the sanctions imposed for comparable offenses by other detainees with similar histories.
 - c. The disciplinary process shall consider whether a detainee’s mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed.
 - d. The facility may discipline a detainee for sexual contact with staff only upon a finding that the staff member did not consent to such contact.
 - e. For the purpose of disciplinary action, a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.
 - f. Sexual activity between detainees shall result in the issuance of a disciplinary report. The facility may not, however, deem such activity to constitute sexual abuse if it determines that the activity is not coerced.

I. MEDICAL AND MENTAL HEALTH CARE

1. Medical and Mental Health Screenings; History of Sexual Abuse. (115.81)
 - a. If the intake screening, pursuant to Section 411.6(D)(1) of this policy indicates that a detainee has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, the HSA shall ensure that the detainee is offered a follow-up meeting with a medical or mental health practitioner within fourteen (14) days of the intake screening for assessment of treatment/management needs.
 - b. If the intake screening, pursuant to Section 411.6(D)(1) of this policy indicates that a detainee has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, the HSA shall ensure that the detainee is referred to a medical or mental health practitioner within fourteen (14) days of the intake screening for assessment of treatment/management needs.

- c. Any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners and other staff, as necessary, to informing security and management decisions (to include treatment plans, housing, bed, work, education, and program assignments).
- d. Medical and mental health practitioners shall obtain informed consent from detainees before reporting information about prior sexual victimization that did not occur in an institutional setting.
- e. Detainees may be referred to medical or mental health staff at any time during their incarceration for assessment of treatment/management needs.

2. Access to Emergency Medical and Mental Health Services. (115.82)

- a. Detainee victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which shall be determined by the medical and mental health practitioners according to their professional judgment.
- b. If no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, security staff first responders shall take preliminary steps to protect the victim pursuant to Section 411.6(F)(4) of this policy and shall immediately notify a medical or mental health practitioner.
- c. The HSA shall ensure that detainee victims of sexual abuse while incarcerated are offered timely information about and timely access to emergency contraception and sexually transmitted infection prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate.
- d. Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

3. Ongoing Medical and Mental Health Care for Sexual Abuse Victims and Abusers. (115.83)

- a. The HSA shall ensure detainees are offered medical and mental health evaluations and, as appropriate, treatment to all detainees who have been victimized by sexual abuse in any prison, jail, lockup or juvenile facility.
- b. The evaluation and treatment of such victims shall include, as appropriate, follow-up plans, and, when necessary, referrals for continued care following their transfer or release from the facility.
- c. The HSA shall ensure such victims are provided with medical and mental health services consistent with the community level of care.
- d. Detainee victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests. If sexual abuse results in pregnancy, such victims shall receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services.
- e. Detainee victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections as medically appropriate.
- f. Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

- g. The HSA shall refer all known detainee-on-detainee abusers for a mental health evaluation within sixty (60) days of learning of such abuse history and shall ensure treatment is offered when deemed appropriate by a mental health practitioner.

J. DATA COLLECTION AND REVIEW

1. Sexual Abuse Incident Reviews. (115.86)

- a. The PREA Coordinator shall conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded. Such review shall ordinarily occur within thirty (30) days of the conclusion of the investigation.
- b. The review team shall include upper-level management and PSU staff, with input from security supervisors, and mental health or medical practitioners.
- c. The review team shall:
 - i. Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse;
 - ii. Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility;
 - iii. Examine the area where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse;
 - iv. Assess the adequacy of staffing levels in that area during different shifts;
 - v. Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff;
 - vi. Prepare a report of its finding utilizing form WN 41107 – Sexual Abuse Incident Review, including by not necessarily limited to determinations made and any recommendation for improvement and submit such report to the Warden; and,
 - vii. The facility shall implement the recommendations for improvement, or shall document its reasons for not doing so.

2. Data Collection. (115.87)

- a. The PSU shall collect accurate, uniform data for every allegation of sexual abuse.
- b. The PSU shall aggregate the incident-based sexual abuse data at least annually. The incident-based data collection shall include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice.
- c. The data shall be forwarded to the PREA Coordinator for review.
- d. The PSU shall maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.
- e. Upon request, the facility shall provide all such data from the previous calendar year to the Department of Justice no later than June 30th.

3. Data Review for Corrective Action. (115.88)
 - a. The PREA Coordinator shall review the collected and aggregated data pursuant to Section 411.6(J)(2) above, in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by:
 - i. identifying problem areas;
 - ii. taking corrective action on an ongoing basis; and,
 - iii. preparing an annual report of its findings and corrective actions.
 - b. Such report shall include a comparison of the current year's data and corrective actions with those from prior years and shall provide an assessment of the facility's progress in addressing sexual abuse.
 - c. The facility's report shall be forwarded to the Warden and made readily available to the public through its website www.wyattdetention.com. The annual review/report shall also be forwarded to the ICE/ERO HQ or other user-agency as required for use in determining whether changes are needed to existing policies and practices.
 - d. Specific material may be redacted from reports when publication would present a clear and specific threat to the safety and security of the facility, but must indicate the nature of the material redacted.
4. Date Storage, Publication, and Destruction. (115.89)
 - a. The facility shall ensure that data collected pursuant to Section 411.6(J)(3) above are securely retained.
 - b. The facility shall maintain sexual abuse data collected for at least ten (10) years after the date of the initial collection unless local, state and/or federal law requires otherwise.

K. AUDITS

1. Audits and Standards. (115.93, 115.401)(NDS,2.11,II,A,7)
 - a. The facility shall undergo a PREA compliance audit every three (3) years. The audit must be conducted by a person certified by the Department of Justice.
 - b. The PREA Auditor shall have access to all areas of the facility and shall be permitted to request and receive copies of any relevant documents (including electronically stored information).
 - c. The PREA Auditor shall be permitted to conduct private interviews with detainees.
 - d. Detainees shall be permitted to send confidential information or correspondence to a PREA Auditor in the same manner as if they were communicating with legal counsel.
2. Audit Corrective Action Plans. (115.404)
 - a. Audit reports with a finding of "Does Not Meet Standard" shall trigger a one hundred-eighty (180) day corrective action period.
 - b. The facility and PREA Auditor shall jointly develop a corrective action plan to achieve compliance.

- c. The auditor shall take necessary and appropriate steps to verify implementation of the corrective action plan, such as reviewing updated policies or re-inspecting portions of the facility.
- d. After the one hundred-eighty (180) day corrective action period ends, the auditor shall issue a final determination as to whether the facility has achieved compliance with those standards requiring corrective action.

411.7. SUPERSESION

This facility policy and procedure supersedes all previous DWWDF bulletins, directives, orders, notices, rules or regulations regarding sexual abuse and sexual harassment prevention and intervention.

411.8. APPLICABILITY

This facility policy and procedure applies to all DWWDF employees, volunteers and contract staff.

411.9. ACCESS TO POLICY

The original, signed copy of this policy shall be maintained within the central policy file of the Compliance Office. A copy of this policy shall also be maintained on the computer network system under the "Common (K)" drive in the POLICIES folder, DWWDF POLICIES, 411 - (DATE) Sexual Abuse and Sexual Harassment - Prevention and Intervention. This policy shall also be maintained on the PowerDMS software platform (i.e., PowerPolicy) under "Documents" >>> "1_Common Drive" >>> DWWDF Policies >>> "411 - (DATE) SEXUAL ABUSE AND SEXUAL HARASSMENT - PREVENTION AND INTERVENTION".

This policy will be made available to the detainee population and the general public upon request as outlined in Policy #609 - Management Philosophy, Goals and Internal Regulations under subsection Public Access with the Warden's approval.

411.10. POLICY DIRECTIVE

For information on Authority, Annual Review, Emergencies, Severability Clause and Effective Date that apply to this policy, refer to the copy of the Policy Directive memorandum on the computer network system under the "Common (K)" drive in the POLICIES folder, DWWDF POLICIES, Policy Directive, Policy Directive (year). This information can also be located on the PowerDMS software platform (i.e., PowerPolicy) under "Documents" >>> "1_Common Drive" >>> "000 - Directive Memoranda" >>> "Policy Directive (100 - 600 Series)".

411.11. FORMS AND APPENDICES

The following forms/appendices are applicable to this policy and shall be utilized for the intended function:

- A. Appendix A - Prisoner Rape Elimination Act Reporting Information (English/Spanish);
- B. Appendix B - Detainee Handout – Zero Tolerance Sexual Abuse/ Sexual Harassment (Eng/Spa);
- C. Appendix C - Sexual Abuse and Sexual Harassment Prevention Statement;
- D. WN 41101 - ZERO TOLERANCE – Sexual Abuse and Sexual Harassment Training Acknowledgement;
- E. WN 41102 - Detainee Sexual Abuse and Sexual Harassment Training Acknowledgement;
- F. WN 41103 - Sexual Assault/Sexual Abuse Risk Assessment Screening;
- G. WN 41104 - Sexual Assault/Sexual Abuse Risk Re-Assessment Screening;
- H. WN 41105 – Retaliation Monitoring (Detainee);
- I. WN 41106 – Retaliation Monitoring (Staff);
- J. WN 41107 – Sexual Abuse Incident Review;
- K. WN 41108 – Report of Sexual Abuse; and,
- L. WN 41109 – Transgender/Intersex Person Review.