

Prison Rape Elimination Act (PREA) Audit Report
Adult Prisons & Jails
 Final Report
Date of Report 12/03/2018

Auditor Information

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Company Name: William Peck LLC	
Mailing Address: P.O. Box 10449	City, State, Zip: Fairbanks, AK 99710
Telephone:	Date of Facility Visit: October 22-24, 2018

Agency Information

Name of Agency: Louisiana Department of Corrections		Governing Authority or Parent Agency: State of Louisiana	
Physical Address: 504 Mayflower Street Baton Rouge, La 70804		City, State, Zip: Baton Rouge, LA 70804	
Telephone: 225-342-3095		Is Agency accredited by any organization? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
The Agency is:	<input checked="" type="checkbox"/> State	<input type="checkbox"/> Private for Profit	<input type="checkbox"/> Private not for Profit
Agency mission: The mission of Corrections Services is to enhance public safety through the safe and secure incarceration of inmates, effective probation/parole supervision and proven rehabilitative strategies that successfully reintegrate inmates into society, as well as to assist individuals and communities victimized by crime.			
Agency Website with PREA Information: doc.la.gov			

Agency Chief Executive Officer

Name: James LeBlanc	Title: Secretary, Dept. of Public Safety and Corrections
Email:	Telephone:

Agency-Wide PREA Coordinator

Name: Michelle Dausat	Title: Assistant Warden
Email:	Telephone:
PREA Coordinator Reports to: Seth Smith, Chief of Operations	Number of Compliance Managers who report to the PREA Coordinator: 8

Facility Information			
Name of Facility: Dixon Correctional Institute			
Physical Address: 5568 Hwy 68 Jackson, Louisiana 70748			
Telephone Number: (225) 634-1200			
The Facility Is:	<input checked="" type="checkbox"/> State	<input type="checkbox"/> Private for profit	<input type="checkbox"/> Private not for profit
Facility Type:	<input type="checkbox"/> Jail	<input checked="" type="checkbox"/> Prison	
Facility Mission: It is the mission of Corrections Services and Dixon Correctional Institute to provide for custody, care, control and treatment of adjudicated inmates through enforcement of laws and management of programs designed to ensure the safety of the public, Staff, and inmates and reintegrate inmates into society.			
Facility Website with PREA Information: doc.la.gov			
Warden/Superintendent			
Name: Jason Kent		Title: Warden	
Email:		Telephone:	
Facility PREA Compliance Manager			
Name: Keith Turner		Title: Assistant Warden	
Email:		Telephone:	
Facility Health Service Administrator			
Name: Hal MacMurdo		Title: M.D. Administrator	
Email:		Telephone:	
Facility Characteristics			
Designated Facility Capacity: 1800		Current Population of Facility: 1773	
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for 72 hours or more:			844
Number of inmates on date of audit who were admitted to facility prior to August 20, 2012:			245
Age Range of Population:	Youthful Inmates Under 18: 16-17	Adults: 16-80	
Are youthful inmates housed separately from the adult population?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> NA

Number of youthful inmates housed during the past 12 months:	51
Average length of stay or time under supervision:	9.3 months
Facility security level/inmate custody levels:	Min/Med/Max
Number of contracts in the past 12 months for services with contractors who may have contact with inmates:	18
Physical Plant	
Number of Buildings: 15	Number of Single Cell Housing Units: 0
Number of Multiple Occupancy Cell Housing Units:	2
Number of Open Bay/Dorm Housing Units:	22 dormitories
Number of Segregation Cells (Administrative and Disciplinary):	96
Description of any video or electronic monitoring technology (including any relevant information about where cameras are placed, where the control room is, retention of video, etc.):	
There are 32 exterior fixed fence cameras and 9 Pan-Tilt-Zoom (PTZ) cameras. The remaining cameras are spread throughout interior areas where security violations are more likely to occur, 232 interior cameras total plus 77 stationary cameras. There are thus 350 total analog cameras with a retention time that can be up to 30 days depending on number of events recorded.	
Medical	
Type of Medical Facility:	DCI is classified as a LOC 2 medical facility. Staffed 24 hours per day with nurses and MD onsite/ on call
Forensic sexual assault medical exams are conducted at:	Hospital Off-site Hospitals (Primarily Our Lady of the Lake or Lane Memorial)
Other	
Number of volunteers and individual contractors, who may have contact with inmates, currently authorized to enter the facility:	983 volunteers 17 contractor
Number of investigators the agency currently employs to investigate allegations of sexual abuse:	11

Audit Findings

Acronyms:

DPS&C	Department of Public Safety & Corrections
DOC	Department of Corrections
DCI	Dixon Correctional Institute
PCM	PREA Compliance Manager

Relevant DPS&C Regulations and Policies:

A-01-011	Safety Plan
A-02-018	Institutional Staffing
A-02-022	Criminal Record Check
A-02-028	Training and Staff Development
B-05-001	Disciplinary Rules and Procedures for Adult Offender
B-02-020	Youthful Inmates
B-06-001	Health Care Manual Health Care Policy No. 14 Medical Level of Care HC-30 Sexual Assault
B-08-010	Americans with Disabilities Act
B-08-018	Effective Communication with the Hearing Impaired
C-01-022	(OP-A-15) - Prison Rape Elimination Act (PREA)
C-05-001	Activity Reports/Unusual Occurrence Reports Operational Units
C-05-003	Headquarters Compliance Monitoring

Audit Narrative

Dixon Correctional Institute, Cottonport, LA, is compliant with the U.S. Department of Justice PREA standards.

The on-site PREA audit of the Dixon Correctional Institute was conducted 22-24 October 2018 by Department of Justice Certified Auditors William Peck and Emileé Beach. Both an in brief and an out brief were held with attendance by a significant number of staff representing all departments and levels of leadership. The in brief was followed by an extensive tour of the prison.

Training is provided concerning cross-gender pat searches and these searches are presently conducted by female officers on this all-male population, as is allowable in both PREA and DPS&C policies and procedures. Strip searches are conducted by male staff with the normal policy exception for exigent circumstances, which have not occurred thus far. Staff interviewed were all aware of the prohibition of physically examining a transgender or intersex offender to determine genital status.

Staff Training receives significant emphasis and appears more than compliant at all levels. All staff receive initial training at the facility and also complete specialty training in their area (e.g.,

investigators, mental health, etc.). All staff receive annual Refresher training as well as routine training at shift turnover, providing more than the training requirement of every 2 years.

New custody staff are required to attend a 3-week pre-service Training Academy, 2 weeks at Angola (LA. State penitentiary) and 1 week at DCI; and non-custody staff attend for 1 week.

Reviewing documentation is a critical component of the audit process, so throughout the pre-audit review and the on-site audit, the auditor reviewed various documents including personnel records, investigation files, training and education records, assessment and screening tools, policies and procedures, and related materials relating to PREA standards.

In addition to the tour and the extensive interview process, auditors reviewed the PAQ (Pre-Audit Questionnaire) submitted by the facility, DPS&C policies related to PREA, and spot-checked random and targeted training, investigative and human resource files. The post-audit phase triangulated all data and input received, reviewed interview data in detail, and was a final review of the PAQ submission. Questions that arose about procedures or data needed for clarification were referred to the facility and the responses are incorporated in this report.

It became clear during the pre-visit review that policy component sections were compliant and that the DOC and facility staff has drafted policy with the intent to be PREA-compliant for all Louisiana facilities; policy parallels very closely, often verbatim, the PREA Standards and checklists for policy. The on-site visit, then, focused on actual compliance in operations and whether local training, process and actual procedure mirrored policies.

Facility Characteristics

Rated Capacity: 1800

Actual Population: 1773

Average Length of Stay: 9.3 months

Security/Custody Level: Maximum, Medium, Minimum

Ages of Inmates: 16-80

Gender: Male

Full-Time Staff: 498

The Louisiana Department of Public Safety and Corrections (LA DPS&C), Dixon Correctional Institute (DCI) is an 1800 bed medium security facility located in Jackson, LA., a part of East Feliciana Parish, Louisiana.

The physical plant came on line and started receiving inmates in 1976. The facility currently consists of 15 buildings, including the Administration building. Inside the secured perimeter DCI has 5 units with 22 open dormitories and 2 multiple occupancy cellblocks. DCI's general population dormitory units house minimum and medium custody inmates. Each of the housing unit tiers open to a central rotunda officer control room. There are 96 Administrative and Disciplinary Cells. The facility (and the DOC) are actively studying how to best incorporate the current guidance on changing approaches to restrictive housing.

Programs and Services

DCI provides voluntary educational opportunities at all levels for the offender population. The educational services are designed from literacy to post-secondary education, as well as job life skills classes and six vocational programs. These include:

- ABE/HSE (High School Equivalency)
- Literacy
- Collision Repair
- Carpentry
- Automotive Technology
- Welding
- SSD#1 (Special School District)
- College courses (correspondence)

Vocational programs are provided through a cooperative effort with Louisiana Community and Technical College System/Baton Rouge Community College.

Substance Abuse Program

The purpose of the Substance Abuse Program is to provide substance abuse education to those inmates identified with having a substance abuse history. In order to provide opportunities for involvement by all inmates, DCI uses a combination of classroom/group activities and self-help meetings.

Pre-Release Programming

It is the philosophy of the DCI Administration that discharge planning begins at admission and continues throughout the period of incarceration. The facility has staff dedicated specifically to this cause. There are a variety of opportunities available for self-improvement. La. DOC mandates 100 hours of pre-release training prior to being released and participation is mandatory by law for all inmates releasing from prison. In addition to completing the 100 hours of training, a reentry team works closely with each offender to ensure they have two forms of identification prior to their scheduled release date. The reentry team also works with local employers to place inmates in jobs and temporary housing situations.

Reentry Programming

Reentry programming enhances preparation for an offender's release and begins when they enter the state correctional system. The inmates are encouraged to learn marketable skills, develop new behaviors, address deficiencies, act responsibly and plan for a positive future. Incarcerated inmates receive intensified preparation in the eighteen to twenty-four months before their release.

Youthful Offender Program

This program is designed to provide an environment where youthful inmates can develop self-esteem, self-discipline and positive attitudes along with the cognitive skills necessary to re-enter society and be successful. There are tailored case management plans to meet the specific

needs of each youthful offender as well as to create or repair family relationships. Youthful inmates must be 19 years of age or younger to participate in the program. Eligible inmates must also have five years or less to their earliest release date. Youthful inmates 16 years of age or younger participate in the program regardless of sentence length. The program lasts for a minimum of 12 months. The youthful offender program is well managed with an appropriate housing area that is effectively supervised. A separate program and recreation area is designated specifically for the youthful offender program and is not accessed at any time by adult inmates.

Faith and Character Based Program (FCBD)

The FCBD Program is voluntary and is offered to all inmates at Dixon Correctional Institute to facilitate institutional adjustment, rehabilitation, reintegration into the community, reduction of recidivism, and offer a full range of religious accommodations. In cooperation with other reentry programs, the FCBD is an essential component in preparing the volunteer inmates for release. This program is popular among the offender population and during interviews was highly regarded by them. Many inmates stated that they felt that the Faith Based Programs enhance the facility's PREA program by providing additional opportunities for reporting in the event there was ever a concern and the support of others in the program

Medical Services

The Medical Department delivers inpatient, outpatient and emergency health care services for inmates on a 24-hour, seven-days-a-week basis. The Medical Department at DCI is also the designated central facility that provides care and treatment for all dialysis patients in DOC.

Mental Health

Services provided by the Mental Health Department include crisis intervention, individual counseling, sex offender therapy, anger management, special topics groups, character counts, case management for youthful inmates, aftercare referrals to appropriate agencies and assisting inmates with housing after release. The MH department offers programs individually with all sexual victims and abusers and monitors victims after any incident to prevent any retaliation incidents.

Recreational Activities

A variety of recreational activities are structured to accommodate inmates of all ages and physical condition. Both indoor and outdoor recreation opportunities and programs are provided. Youthful inmates have a full recreation program that is conveniently located adjacent to their housing area and separate from adult inmates.

Community Involvement

All interested individuals and community groups or organizations are encouraged to participate with DCI in the development, implementation, and evaluation of programs. Special emphasis will be made to coordinate with law enforcement agencies and courts.

PEN PALS, INC. ANIMAL SHELTER AND ADOPTION CENTER

After the 2005 Hurricane Katrina, over 50,000 animals were abandoned by their owners in New Orleans, left trapped in toxic waters and 105-degree heat, and with no food or water. Rescuers were overwhelmed by the scope of the problem.

Due to the time-critical nature of the crisis, DCI assisted by taking in many of these abandoned animals. A make-shift clinic was set up and inmates were trained in caring for animals of all types, shapes and sizes.

This effort grew into an agreement, between the Human Society of the United States, the Louisiana State University School of Veterinary Medicine and DCI, to establish a shelter for animals at the prison. The program provides training for future veterinarians and promotes the rehabilitation of inmates trained to assist these adoptable pets. The addition of the program provides opportunities for inmates to fulfill meaningful roles within the shelter and enhances the quality of life for those involved.

Tour

The auditors visited the following departments to review conditions relating to departmental policy and operations:

- Medical
- Mental Health
- Youthful Offender Area
- Education and Program Areas
- Classification
- Food Service
- Human Resources
- Training
- All General Population Housing Units
- Segregation Housing

Dormitories used as offender housing areas are managed from smaller control centers located immediately adjacent to those areas. Housing unit officers in the units have a direct view of their area of responsibility. Offender movement is controlled and access into restricted areas requires staff authorization.

During the tour, camera placement, sight lines, and staff placement were noted to assist in determining standards compliance. There are 350 cameras spread throughout areas where security violations are more likely to occur. Most retention times are around 30 days but it depends on the number of recorded events that activate a recording. The control Center monitors these cameras and the command post can also monitor them.

The tour provided an opportunity for the Auditor to conduct in-depth observations of the different areas of the facility, observe staff conduct, observe interactions between staff and inmates, and

conduct informal interviews with staff and inmates to gain an understanding of facility operations and practice as well as obtain insight into the facility's compliance with the PREA standards. The areas that were observed included: living units, work areas, cells along with toilets and showers, program areas, outdoor recreation areas, administrative areas, kitchen, storage areas, training facility, Control Centers, and the overall facility grounds.

Video monitoring systems were observed and noted; and housing zones, day rooms, offender programs areas, work areas and all other offender accessible areas were toured. While touring, several staff and inmates were informally interviewed and acknowledged receiving training and procedures for reporting sexual abuse and harassment and the right to be free from retaliation. Inmates and staff both knew that they could report sexual safety issues and were well aware of external addresses and phone numbers of potential sources to report or gain assistance with their issues. Posters' reporting information and data on advocacy organizations was uniformly excellent.

The Auditor verified that higher ranking staff such as the Assistant Wardens, Major and Captains make unannounced rounds, documented in the logbook by the control officer. The rounds are generally documented in red ink for easy view and quick reference. All documented rounds were at irregular intervals that could not be predicted by inmates. During interviews of both staff and inmates it was evident that higher ranking staff are frequently in the housing areas to address any offender concerns and inmates state they would feel comfortable directly reporting to them.

Staff were aware of the requirement to announce the presence of the opposite gender and did so in all housing in a timely manner; interviews with inmates and staff supported that the facilities ensure these announcements and that this practice is adhered to during daily operation. It was also evident that all staff and inmates receive appropriate training concerning PREA and the zero-tolerance policy during initial training as well as annual and also regular refresher training. All staff were well versed in their responsibilities in reporting sexual abuse, sexual harassment, staff negligence and retaliation for reporting. Staff interviewed were very familiar with the expectations of their duties as well as the procedures for evidence preservation. Training is a strong point in this facility, doubly important due to large losses of personnel and continuing challenges with vacancies.

Staffing appeared sparse but adequate and well-positioned, to include supervisory staff making random checks in housing areas. The Agency and facility have also demonstrated their commitment to compliance to the PREA standards by providing some agency funding for appropriate privacy barriers in the toilet and curtains in the shower areas, and a few new cameras, while still providing a secure environment for the population. Mirrors had been added to several areas enhancing the ability of staff to provide oversight.

No concerns related to sexual safety were noted while visiting these areas. PREA compliant curtains were installed in all shower areas. Auditors spent several minutes in the Control Center talking with the post officers and observing CCTV monitors. The cameras are positioned in a way that precludes remote viewing of inmates as they shower and perform bodily functions.

All unoccupied rooms and closets that could provide concealment were locked at the time of the tour. Staff and inmate restrooms in common areas were locked and, according to staff members and inmates, they remain locked when not in use and can only be opened by an employee. Each housing unit includes wall mounted telephones for inmate use, and information

about how to call or write for PREA assistance is posted in each unit. During staff and offender interviews, it was noted that all were familiar with the postings and the ability to call or write in the event PREA assistance was needed.

Medical

Medical care is provided at DCI 24/7 by medical staff, who are state employees, and include RNs, LPNs, Doctors and Nurse Practitioners. Specialized medical services are also provided via medical contracts. Staffing at DCI consists of: 1 Physician, 1 Nurse Practitioner, 1 DON, 1 Assistant DON, 15 RN's, 6 LPN's, 3 Medical Records Clerks, 1 Dentist, 1 Optometrist (approximately 4 hours/week), 1 X-Ray Tech (three hours/day), and Radiology is contracted through Baton Rouge Radiology.

All inmates are within sight or sound of staff; an inmate is assigned to assist long-term medical in-patients, several of whom are likely in a terminal status.

The facility physician could theoretically provide forensic examinations but the related training of the medical staff has been more geared to ensuring proper procedures and how to meet PREA medically-related standards. Inmates are actually sent to Our Lady of the lake (OLOL) or Lane Memorial Hospital for SAFE/SANE assault protocols and examinations. OLOL is used more frequently as they are larger and have a larger staff available.

Testing, prophylactic treatment, and follow up for sexually transmitted diseases is provided if indicated at no cost to the offender. All victims and predators are referred to Mental Health following any incident. Interactions with the Medical or Mental Health staff are clearly documented in the offender medical record, to include initial and follow-up treatment.

The clinic consists of a triage room, dental clinic, x-ray department, an in-patient infirmary, waiting area with restroom for inmates, optometry room, medical records section, exam rooms, lab room, pharmacy, physical therapy room, and staff offices. Privacy barriers are provided for the showering areas to ensure that they are consistent with PREA standards.

DCI has a contract with the local ambulance service, Acadian Ambulance. In emergency cases, Acadian Ambulance services are used to transport unstable inmates to local hospitals due to the potential immediate impact on facility staffing levels.

The intake process consists of staff from Medical, Mental Health, Security and Classification meeting with each new arrival. An intake assessment for each offender is completed at this time to determine if there are any situations that need to be addressed. This group makes recommendations regarding their areas and program/housing outcomes etc., and Classification department coordinates record and file entries and individual plan formalization.

Inmates are also asked questions related to PREA by the Mental Health Staff. After completion of the intake assessment, the medical staff determine if the offender has a situation that would require him to be scheduled for an appointment with the doctor. Emergent situations are handled immediately, and non-emergent situation are handled by scheduling appointments for the inmates. Each offender is given information on how to access health care services. These instructions are given in English and Spanish, and if an offender is deemed to be illiterate, instructions are given orally by medical staff. As verified during interviews, staff provide

assistance to ensure all inmates understand the information, providing one on one assistance as needed.

Dental

The dental clinic operates 40 hours a week and is staffed with one Dentist and one Dental Assistant. The clinic has only one chair. All inmates are seen at intake, and if there are dental conditions that need to be addressed, appointments are made for the offender. Any procedures that are required but cannot be handled at the clinic are referred to the Louisiana State University Oral Surgery Department.

Mental Health

DCI's Mental Health department has 4 Social Workers. One is the Mental Health Director and another is the Assistant Mental Health Director.

The mental health department provides services in Crisis Intervention, Groups (Substance Abuse, Domestic violence, Sex Offender, and Anger Management), Individual Counseling (According to Treatment Plan and as needed), Substance Abuse (Living in Balance), Dual Diagnosis (nearly all of mental health inmates are dual diagnosis, and intervention plans are tailored for this), Multi-Disciplinary Team as needed, and Individual Treatment Plans.

General Population inmates access Mental Health services by request. Segregation inmates access mental health by request to the Social Worker during their routine visits to segregation. Inmates are generally seen per treatment recommendations and Psychiatrist at two-month intervals. All emergencies are responded to within 30 minutes. If an offender states that he may harm himself or is having feelings of suicide, security will declare a mental health emergency and the Social Worker on call will give a verbal order to place the offender on suicide watch within a 30-minute response time. Staff provide constant supervision of the offender following any declaration of self-harm until the arrival of the Mental Health staff member for evaluation. During working hours, the offender is evaluated face to face within 30 minutes. Suicide inmates are housed at the facility until a determination is made about whether the offender needs to be transferred to a facility with accommodations to handle the particular situation. Inmates can be placed in restraints as determined by the Mental Health Department. The facility has a restraints policy that dictates how and when restraints can and will be used.

The facility increased offender intakes in recent years to include inmates with various fairly serious medical needs; in addition, there were several wheelchair-bound inmates in the mix. This influx of older inmates with more serious medical problems has placed added numerous restraints and challenges to this medical department.

Youthful Inmates

Youthful inmates numbered 13 at the time of the audit and are all housed in a separate secure unit that enables meeting youthful inmates PREA requirements. The unit was toured and was one which offered separate living space, recreation, and program space. When youthful inmates are in shared areas with adults (meals, chapel, etc.) specific staff remain with the

youth and ensure no contact with adults occurs. Their programs are wide-ranging and appear well thought out for this population. During interviews, it was evident that this program strictly enforces the requirement of supervision and oversight as well as providing programs and services to this population.

The executive leadership is constantly addressing the evolving needs of this population. From a PREA perspective, younger inmates are frequently easier to victimize and also frequently include more sexual aggressors, however inmates interviewed reported that they feel safe at this facility and are confident the leadership would respond quickly to any issues. All interviewed stated that they were provided information in regard to PREA and would feel comfortable reporting to staff, as they were familiar with facility leadership and they are present frequently in the area.

When placed in segregation, they are placed in the only segregation area available to the facility. Based on the prior PREA audit recommendation from 2015, the facility developed a process that places any segregated youthful offender in the first one or two cells immediately adjacent to the staff member and never with an adult cellmate. In addition to being in an area immediately adjacent to staff, frequent rounds are conducted by line and higher-ranking staff.

Recreation

There are outside exercise yards that provide basketball, volleyball, walking area, softball, tennis, football, horseshoes, boxing and soccer. There are exercise weights and other outside opportunities for exercise. There is a full-size gymnasium with a regulation size basketball court. There are additional recreation yards for the inmates adjacent to each housing units with basketball courts and weights. PREA reporting notices were also available in the gymnasium area for offender view and reference if needed.

Religious Programming

The Senior Chaplain for DCI has one full time chaplain, one contract chaplains and over 900 religious volunteers but many of them may come only a few times a year. There are currently 30 scheduled organized religious and non-religious services/classes per week.

The warden and the chaplain must approve all volunteers and they must complete both volunteer and PREA training and undergo background records checks prior to being approved. During interview with a religious services volunteer, it was noted that quality training is provided to volunteers so that identification and response to any PREA related concern would be done adequately and effectively.

Offender Work Programs

DCI has many internal and external industry, farm and support offender job slots and employs virtually all inmates with job/education assignments in the facility. DCI requires all able-bodied inmates to have a job, attend programs, or be enrolled in education.

Academic and Vocational Education

DCI has academic and vocational education programs from literacy to post-secondary education. Post-secondary consists of job life skills classes, vocational programs and college correspondence classes at the offender's expense and with approval of the warden.

The department offers Literacy, Adult Basic Education (ABE), a General Equivalency Diploma (GED), and Special School Programs (SSP) to inmates as well as vocational programs.

Social Services

DCI provides social services and counseling with the use of classification staff, social workers staff, chaplaincy staff, health care staff and volunteer staffed programs.

DCI Re-entry initiatives provide assessment, identification and linkage for inmates with services specific to their reentry needs. Inmates began preparing for release from their point of entry in the facility. Classification and Treatment staff with assistance from outside agencies conducts educational workshops with inmates preparing for reintegration into society. Inmates receive 100 hours of instruction which includes communication skills, victim awareness, value development, health and wellness, substance abuse, money management, job seeking skills and information concerning conditions of parole prior to release.

Library Services

DCI leisure library is open seven days per week and inmates are provided the opportunity to make special requests for books since DCI is part of the Louisiana Public Library Interagency Loan program. Inmates in restricted units are provided a list of available books and the books are then delivered to them.

Interviews

During the course of the audit, team members met with both staff and inmates to verify observations and/or to ask interview questions concerning facility operations.

A major portion of the site audit consisted of conducting these structured interviews with specialized and randomly selected staff and also with random and targeted categories of inmates (LGBTI, reported victims of abuse, reported perpetrators of abuse, etc.).

Auditors interviewed a wide range of staff that included executive and line staff for the facility. Specialized staff interviewed included Medical and Mental Health Supervisors, higher-level supervisors, as well as staff from Programs, Human Resources, Training, Classification, Volunteer and Intake Staff. Interview data is summarized at the end of this narrative.

During the visit, in addition to PREA-related discussions with employees selected during the tour, the Auditors conducted 26 random inmate interviews and 18 targeted category inmates as noted below; and also 18 random staff, 3 first responders, and 35 specialized staff as outlined below.

The prisoners and staff were well aware of PREA and the zero-tolerance policy of the Agency. Prisoners interviewed were knowledgeable about how and where to report sexual abuse and sexual harassment. They all indicated they had received written information either on their arrival or on the housing units for those that have been at the facility for a considerable amount of time. LGBTI inmates interviewed largely reported that they felt safe, were treated fairly and had no concerns and all issues were addressed. The significant number of older prisoners responded in a similar vein. All staff and inmates interviewed were very cooperative during the interview process.

Offender Interviews

During the on-site visit, 26 inmates were interviewed by the audit team. The inmates were supportive of the warden and the administrative staff. There were no general population complaints about staff treatment or fairness. The inmates the auditors talked with are aware of, and have positive feelings about, the PREA education programs.

The inmates were respectful and talked freely with the audit team. Inmates interviewed said their living conditions are satisfactory. When asked, inmates describe their treatment by staff members as fair. All inmates interviewed said they felt safe, knew how to make reports and access services and how to use the grievance process. Offender interviews produced very few complaints and virtually every offender was confident that staff would respond rapidly to any complaint or allegation. All inmates stated they would feel comfortable reporting directly to any staff member at any time without the concern of retaliation or privacy concerns. Inmates were familiar with higher-ranking staff and have interaction with them regularly as they are visible throughout the housing and work areas.

Inmates were observed in the living and recreation areas interacting appropriately with each other and staff and they were engaged in various recreational activities. Inmates were also observed in education, vocational, and various other work areas. Information related to the Prison Rape Elimination Act (PREA) and how to report sexual abuse was posted in all these housing and program areas.

Inmates Interviewed

- 2 Cognitive Disability
- 4 Disability inmates
- 2 Inmates who reported victimization during risk screening
- 2 Inmates who reported abuse
- 2 Inmates who identify as LGB
- 2 Transgender inmates
- 4 Youthful Inmates

26 Random Offender Interviews

Staff Interviews

The officers on the shifts stated they feel safe working at DCI and all had been through PREA training. Officers were asked about PREA policies and procedures and stated that there are not a lot of incidents but there are inmate efforts to use PREA allegations to gain housing changes; and the cameras have been very valuable in helping to answer those allegations. The support staff and officers reported that they make sure they talk with the inmates when the inmates have issues or questions. All staff reported that the facility takes the topic of PREA very seriously and it must be reported immediately. All were aware of the response to take in the event they became aware of a concern of sexual safety.

The audit team spoke with many staff informally and during the tour and interviewed 56 staff in the course of the audit process in addition to staff informally met and questioned during the tour and walking around the facility. Staff at DCI are professional in their interaction with the inmates and other staff. The audit team observed a sense of pride by all levels of staff in the facility regarding their jobs.

In interviews, correctional officers and staff expressed satisfaction with their PREA training and felt they knew their required actions if incidents were to occur.

Officers the audit team talked with said they were involved in the PREA Audit preparation process and committed to the success of the facility. The staff and officers that the audit team talked with feel that their contributions are recognized, that they make a difference, and stated that DCI is a good place to work. There was a great deal of support for the current administration.

Staff Interviewed

- 1 Agency Head Designee (On File)
- 1 Agency PREA Coordinator (On File)
- 1 Agency Investigator
- 1 Warden Designee
- 1 PREA Compliance Manager
- 4 Incident Review members
- 1 Human Resource manager
- 1 Retaliation Monitor
- 2 Investigators
- 1 Volunteer who has contact with inmates
- 2 Medical staff/ Administrator
- 4 Mental Health staff
- 1 Program Staff
- 1 Program Staff, Youthful Inmates
- 1 Line Staff who Supervises Youthful Inmates
- 5 Intermediate or higher-level supervisor
- 1 Intake Staff who perform screening for risk of victimization and abusiveness
- 3 Intake Supervisor
- 2 Staff Who Supervise Segregated Housing
- 1 Chaplain
- 3 First Responders

18 Random Staff

All staff interviewed were aware of their respective areas of responsibility regarding PREA and affirmed compliance with the applicable PREA standards. All uniformed staff are trained as first responders and are familiar with their duties.

Conclusion

The Dixon Correctional Institute of LA DPS&C is compliant with PREA Standards.

When the auditors conducted an out brief to the Warden and key staff, they gave them an overview of the process and thank them for their participation. The timeline and expectations for the remainder of the audit were discussed and the auditors expressed appreciation for the exceptional hospitality and cooperation of everyone involved.

The auditors explained the procedures that would follow the completion of the audit., i.e. the triangulation of all data from the site visit and tour, the documents submitted and reviewed, and the interviews completed. It was explained that any areas found not to meet standards would need to be corrected and the auditor would work with the leadership and the facility PREA Manager to accomplish this compliance. The willingness of all staff involved to accomplish PREA compliance was acknowledged and their determination to become compliant was evident.

Warden Jason Kent, his leadership team, and members of the staff are all sensitive to ensure continuing this facility in compliance with PREA standards. The final briefing indicated that this present sensitivity and attention will continue. The auditors were impressed with the strength and quality of Warden Kent's leadership of his executive team; the high quality of teamwork support among staff throughout the prison; and the PREA team preparation, led by the DCI Compliance Manager, Assistant Warden Keith Turner.

Summary of Audit Findings

Number of Standards Exceeded: Click or tap here to enter text.	0
Number of Standards Met: Click or tap here to enter text.	43
Number of Standards Not Met: Click or tap here to enter text.	0

PREVENTION PLANNING

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

115.11 (a)

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

115.11 (b)

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

115.11 (c)

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

Auditor Overall Compliance Determination

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

The DPS&C Secretary has appointed a Department PREA Coordinator who has oversight of activities to develop, implement and oversee DPS&C's efforts to comply with the PREA Standards in all units.

"It is the policy of DCI to provide a safe, humane and appropriately secure environment, free from threats of sexual abuse and sexual harassment for all staff, volunteers, contractors, and inmates by maintaining a program of prevention, detection, response, reporting, investigating and tracking of all alleged and substantiated incidents of sexual abuse. DCI has zero tolerance for incidents of sexual abuse and sexual harassment." DCI's designated Asst. Warden serves as the PREA Compliance Manager to coordinate efforts to comply with the PREA standards. The PREA Compliance Manager (PCM) reported in the interview that he has sufficient time and authority to coordinate the facility's efforts to comply with PREA Standards.

The Department has adopted a zero-tolerance policy toward victimization and sexual abuse within all facilities through the PREA Program. Full investigations, appropriate reporting and compliance to the standards program will be treated as a top priority by administrators and investigators.

Staff who violate this regulation may receive disciplinary action, up to and including termination.

The PREA Compliance Manager (PCM) serves as a liaison between DCI and DPS&C's PREA Coordinator and other appropriate Headquarters staff and is responsible for monitoring PREA related activities, etc. The PREA Compliance Manager (PCM) ensures that each requirement of Department Regulation C-01-022, on Prison Rape Elimination Act (PREA, including verification that all training, screening, assessments, reporting and monitoring is accomplished in timely manner. During interviews, it was noted that the PCM had a vast working knowledge of all requirements as well as the facility's procedure in accordance with each. During interview with staff it was noted that all were well aware of who was assigned this duty. Additionally, inmates interviewed were aware of the facility PREA Compliance Manager and felt that this staff member would address any concerns that were brought forth.

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

115.12 (a)

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

115.12 (b)

- Does any new contract or contract renewal signed on or after August 20, 2012 provide for

agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates OR the response to 115.12(a)-1 is "NO".) Yes No

Auditor Overall Compliance Determination

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

The Agency does contract for confinement, not DCI per se. DCI does contract for services and some personnel, however, and the contracting agent interviewed indicated that part of her job is to ensure every contract is totally clear on PREA requirements, training etc. The Agency PREA Coordinator affirmed that they do contract out confinement and all PREA requirements are included in the contracts; further, she noted that all contractors are routinely audited by the State agency and the audit includes PREA requirement compliance.

There are currently 18 DCI contracts that have been renewed or approved since the last PREA audit, and 12 of those do not require the agency to monitor contractor compliance.

Standard 115.13: Supervision and monitoring

115.13 (a)

- Does the agency ensure that each facility has developed a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse? Yes No
- Does the agency ensure that each facility has documented a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse? Yes No
- Does the agency ensure that each facility's staffing plan takes into consideration the generally accepted detention and correctional practices in calculating adequate staffing levels and determining the need for video monitoring? Yes No
- Does the agency ensure that each facility's staffing plan takes into consideration any judicial findings of inadequacy in calculating adequate staffing levels and determining the need for video monitoring? Yes No
- Does the agency ensure that each facility's staffing plan takes into consideration any findings of inadequacy from Federal investigative agencies in calculating adequate

staffing levels and determining the need for video monitoring? Yes No

- Does the agency ensure that each facility's staffing plan takes into consideration any findings of inadequacy from internal or external oversight bodies in calculating adequate staffing levels and determining the need for video monitoring? Yes No
- Does the agency ensure that each facility's staffing plan takes into consideration all components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated) in calculating adequate staffing levels and determining the need for video monitoring? Yes No
- Does the agency ensure that each facility's staffing plan takes into consideration the composition of the inmate population in calculating adequate staffing levels and determining the need for video monitoring? Yes No
- Does the agency ensure that each facility's staffing plan takes into consideration the number and placement of supervisory staff in calculating adequate staffing levels and determining the need for video monitoring? Yes No
- Does the agency ensure that each facility's staffing plan takes into consideration the institution programs occurring on a particular shift in calculating adequate staffing levels and determining the need for video monitoring? Yes No NA
- Does the agency ensure that each facility's staffing plan takes into consideration any applicable State or local laws, regulations, or standards in calculating adequate staffing levels and determining the need for video monitoring? Yes No
- Does the agency ensure that each facility's staffing plan takes into consideration the prevalence of substantiated and unsubstantiated incidents of sexual abuse in calculating adequate staffing levels and determining the need for video monitoring? Yes No
- Does the agency ensure that each facility's staffing plan takes into consideration any other relevant factors in calculating adequate staffing levels and determining the need for video monitoring? Yes No

115.13 (b)

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

115.13 (c)

- In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section? Yes No

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

115.13 (d)

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

Auditor Overall Compliance Determination

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

Department Regulation No. A-02-018 (Institutional Staffing) requires each facility to develop and document a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse. When designing new units, planning substantial expansions or modifications to existing units or when updating a video monitoring system, the Warden is tasked to consider how such expansions, modifications or updates would enhance the unit's ability to protect inmates from sexual abuse

Turnover and vacancies are ongoing staffing problems due to hiring cycles in nearby energy fields as well as many looming retirements due to the age of the facility. The Warden reported in his interview that it requires continuing attention to ensure that priority and critical billets are filled in each shift. During review of the staffing plan with appropriate staff and interview of those involved, it is evident that careful consideration is taken by the facility to ensure the staffing plan is constructed in an effective manner to provide appropriate monitoring in supervision as well as taking into account the areas in which video monitoring may not be available. Staff were aware of the process concerning staff posting and coverage needed for specific areas.

When calculating adequate more long-term staffing levels and determining the need for video monitoring, each unit is required to take into consideration the items listed in §115.13(A):

- 1) Generally accepted detention and correctional practices;
- 2) Any judicial findings of inadequacy;
- 3) Any finding of inadequacy from Federal investigative agencies;
- 4) Any findings of inadequacy from internal or external oversight bodies;
- 5) All components of the unit's physical plant (including "blind spots" or areas where staff or inmates may be isolated);
- 6) The composition of the offender population;
- 7) The number and placement of supervisory staff;
- 8) Institution programs occurring on a particular shift;
- 9) Any applicable State or local laws, regulations or standards;
- 10) The prevalence of substantiated and unsubstantiated incidents of sexual abuse;
- 11) Any other relevant factors.

Interviews with the Warden, PREA Compliance Manager and senior staff also indicate that all incident data is considered in staffing reviews, but all interviews noted that there are few sexual assault incidents to actually review; and the Sexual Assault Incident Reviews normally focus more on staffing, camera technology, blind spots and population characteristics.

In circumstances where the staffing plan is not complied with, the Warden or designee has to document and justify all deviations from the plan. This document is forwarded to the Agency PREA Coordinator Compliance Manager for retention purposes.

The Warden or PREA Compliance Manager assesses, determines and documents whether adjustments are needed to the staffing plan, deployment of video monitoring systems or other monitoring technologies, and to determine the resources the facility has available to commit to ensure adherence to the staffing plan.

In addition to and along with other rounds, Supervisors conduct and document unannounced rounds on the night and day shift to identify and deter staff sexual abuse and sexual harassment. Staff is prohibited from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to legitimate operational functions.

Each Warden develops a PREA staffing plan and submits annual updates to DPS&C's PREA Coordinator. The staffing plans determine and document whether adjustments are needed to the staffing plan, deployment of video monitoring systems or other monitoring technologies and the resources the facility has available to commit to ensure adherence to the staffing plan.

In addition to rounds specified in institutional policy, the Warden requires both intermediate-level or higher-level supervisors conduct and document unannounced rounds on all shifts for the purpose of identifying and deterring staff sexual abuse and sexual harassment. Policy prohibits staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the unit. It was clear through interaction with both staff and inmates that appropriate rounds are in fact conducted regularly by not only line staff, but also supervisory staff. During the facility tour, it was evident that this was a

common occurrence and the inmate population expressed a comfort in the ability to contact staff as needed for a concern, as they are available without boundary. Supervisory and higher-level staff rounds are documented in the logbooks of all areas, generally in a red ink pen for quick and easy identification. In review of the logbooks it was observed that rounds are conducted frequently and on a random basis at irregular intervals.

The average daily population since 2012 has been 1790 and the staffing plan is based on an average of 1800.

Standard 115.14: Youthful inmates

115.14 (a)

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

115.14 (b)

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

115.14 (c)

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

Auditor Overall Compliance Determination

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

All inmates under the age of 18 years housed in any state correctional facility are considered youthful inmates (YO) and Department policy statewide recognizes that:

- No youthful offender may be placed in a housing unit in which the offender will have contact with any adult offender through use of a shared day room or other common space, shower area or sleeping quarters;
- Outside of housing units, the Department shall either maintain “sight and sound separation” between youthful inmates and adult inmates to prevent adult inmates from seeing or communicating with youthful inmates or provide direct staff supervision when youthful inmates and adult inmates are together.

DCI is a designated facility for Youthful Inmates and, as such, ensures adherence to all PREA requirements designed to protect YOs. DCI houses a youthful offender program for male inmates under the age of 18 years old. Departmental policy designates the requirement of youthful inmates to be housed separately from adults as well as outlines the requirements for appropriate supervision as well as opportunities for programming and recreation.

Observation of the youthful offender program revealed appropriate housing separate from adult inmates. The housing area for youthful inmates was separate from all adult housing areas by being located in its own building, separated from the main walkway with a gate with access only granted by staff. The housing area was open with good lines of sight with staff on-site and appropriate video monitoring. A recreation area for use only by youthful inmates is connected to the housing area as well as the building used for programming and education. Observation of the programming and education area revealed an impressive program for those assigned to the program with a multitude of staff available and assigned specifically to youth monitoring and supervision.

During each meal period, staff escort all youthful inmates as a group to the facility main dining hall. Staff provide direct supervision at any time youthful inmates may be within sight/sound of adult inmates.

There is ample opportunity to participate in programs and recreation daily. Appropriate supervision is being provided by staff as required by policy and as outlined in facility procedure. All staff interviewed were well versed on the requirements of monitoring, supervision, safety and separation. Youthful inmates expressed a feeling of safety, security and comfort with staff in the event a need, concern or issue arose. All youthful inmates were aware of the facility PREA program. It is recommended that the facility provide additional information in regard to PREA upon intake to youthful inmates to ensure a clear understanding of all methods of reporting and services available. Many stated that due to the intake process going quickly, they could not remember everything that was stated or provided to them.

Standard 115.15: Limits to cross-gender viewing and searches

115.15 (a)

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

115.15 (b)

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

115.15 (c)

- Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches? Yes No
- Does the facility document all cross-gender pat-down searches of female inmates? Yes No NA (Added NA as we are a male facility)

115.15 (d)

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

115.15 (e)

- Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status? Yes No
- If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by

learning that information as part of a broader medical examination conducted in private by a medical practitioner? Yes No

115.15 (f)

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

Auditor Overall Compliance Determination

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

Cross gender pat searches are authorized for use with male inmates and staff is trained to perform them, however strip and body cavity searches are not authorized except in exigent circumstances. Cross-gender strip searches and cross-gender visual body cavity searches are not being done but would be documented in the appropriate logbook and an Unusual Occurrence Report (UOR). would be completed. Cross-gender strip searches or cross-gender visual body cavity searches (a search of the anal or genital opening) would not be conducted except in exigent circumstances. There have been none in the past 12 months.

Interviews with both staff and inmates stated that inmates are able to shower, perform bodily functions, and change clothes without non-medical staff of the opposite gender viewing their buttocks or genitalia, except in exigent circumstances or when such viewing is incidental to routine rounds. The only camera cells are 2 suicide cells, and there is cross-gender viewing of Control Room monitors for those 2 cells; however, the inmates are issued suicide gowns and the camera captures only vertical coverage due to its ceiling location.

Upon entering a housing unit, all cross-gender staff announce their presence. Female staff were comfortable and noted to announce their presence prior to entering an area in which an inmate may be disrobed. Male staff were available in all housing areas and it was stated that they conduct security rounds in the shower/toilet areas as necessary in addition to having the privacy barriers. Upon interview with inmates, information provided and regularly supported stated that rarely do female staff enter inmate direct living, areas in which privacy may be a concern, but in the event they did, appropriate notice was provided.

Staff were aware of the method in which cross-gender pat searches and searches of transgender or intersex inmates. It is recommended that refresher information be provided in

these regards, as it is the just based on the facility population that these skills are rarely used due to not being necessary.

DCI does not house female inmates, making multiple items in this standard Not applicable.

No search or physical exam is permitted when the sole purpose of the search or physical exam is to determine the offender's genital status. Random staff and medical staff both stated in interviews that only medical staff could perform any similar examination.

All correctional security staff are trained to conduct cross-gender pat down searches and searches of transgender and intersex inmates in a professional and respectful manner, in the least intrusive manner possible while maintaining good security practices. In accordance with policy and verified through facility documentation and staff and offender interview, Transgender inmates are provided the opportunity to shower separately if they wish.

Standard 115.16: Inmates with disabilities and inmates who are limited English proficient

115.16 (a)

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

prevent, detect, and respond to sexual abuse and sexual harassment, including: Other (if "other," please explain in overall determination notes)? Yes No

- Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing? Yes No
- Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary? Yes No
- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have intellectual disabilities? Yes No
- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills? Yes No
- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Are blind or have low vision? Yes No

115.16 (b)

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

115.16 (c)

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

Auditor Overall Compliance Determination

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

Policies B-08-010 (Americans with Disabilities Act) and B-08-018 (Effective Communication with the Hearing Impaired) are two of the major pieces of guidance from the Departmental level.

DPS&C Policy is that all facilities take appropriate steps to ensure that inmates with disabilities (including, for example, inmates who are deaf or hard of hearing, those who are blind or have low vision, those who have intellectual, psychiatric, or speech disabilities), have an equal opportunity to participate in or benefit from all aspects of the DPS&C's efforts to prevent, detect and respond to sexual abuse and sexual harassment. DCI meets these requirements and takes a number of additional steps due to the growing number of older inmates with numerous challenges.

- DCI provides interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary. (§115.16(B))
- Certified offender interpreters may be used to explain the policies and procedures for reporting; however, the Department does not rely on offender interpreters, offender readers or other types of offender assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the offender's safety, the performance of first- response duties (§115.64) or the investigation of the offender's allegations. (§115.16(C))

DPS&C utilizes Speak Easy Telephone Interpreting Services for all foreign language interpreting needs and each facility has provisions to purchase this service.

Appropriate steps are required to ensure that inmates with disabilities deaf, hard of hearing, blind, have low vision, intellectual disabilities, psychiatric disabilities, speech disabilities, limited English proficient, or limited reading skills), have an equal opportunity to participate in or benefit from all aspects of the facilities efforts to prevent, detect and respond to sexual abuse and sexual harassment. Written materials are provided for inmates with hearing disabilities, access is provided through Speak Easy interpreter access program for non- or limited English proficient inmates and video presentations are available for inmates with limited reading skills as well as staff assistance. The PREA information pamphlet is available in braille as well as in audio format for inmates that are blind or have low vision.

Certified offender interpreters, by policy, may be used to explain the policies and procedures for reporting when delay might create any kind of threat or danger, however in the past year, he facility reports no instances where interpreters or readers were used.

Standard 115.17: Hiring and promotion decisions

115.17 (a)

- Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community

confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?
 Yes No

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

115.17 (b)

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

115.17 (c)

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

115.17 (d)

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

115.17 (e)

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

115.17 (f)

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

115.17 (g)

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

115.17 (h)

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

Auditor Overall Compliance Determination

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

As indicated by interviews with the PREA Compliance manager and the Human Resources (HR) staff member, DCI does not hire, promote, or enlist the services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community

confinement facility, juvenile facility or other institutions. Per policy, there shall be no hiring, detail or promotion of an applicant, employee or contractor who:

- Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse;
- Has been civilly or administratively adjudicated to have engaged in the above conduct.

Any incidents of sexual harassment are a determining factor as whether to hire or promote, or to enlist the services of a contractor.

Prior to hiring, detailing or promoting any employee/applicant or enlisting services of a contractor who may have contact with inmates DCI conducts criminal background checks in accordance with Department Regulation A-02-022.

Prior to hiring, the Human Resources Office contacts each applicant's prior community confinement facility, jail, lockup, and/or prison employers. An Authorization to Contact Previous Employers is required and completed by all applicants prior to the effective date of hire. Applicants for hire, detail to special duty, or direct promotion must also answer these questions prior to the effective date of hire or promotion.

All applicants (including promotions) are required to answer verbal and written questions relative to previous misconduct described in 115.17(a), according to interviews with supervisory and HR staff. Applicants must notify Human Resources if or when such charges have been brought against them. Current employees must notify their immediate supervisor. The form "PREA Requirements for Applicants and Employees Being Considered for Hire, Detail to Special Duty and/or Promotion" is utilized upon hire for this purpose.

Each employee has a personal responsibility to disclose to the Warden within 72 hours, any such conduct of which he/she accused, charged, and/or convicted. Applicants and employees who fail to disclose this information are subject to disciplinary action up to and including termination.

Unless prohibited by law, information regarding substantiated allegations of sexual abuse or sexual harassment involving current or former employees upon receiving a request from a community confinement facility, jail, lockup, prison, juvenile facility, or other institutions for whom such employee has applied to work is provided.

As required in departmental policy, the facility completes pre-employment criminal background checks as well as every five years. A standard form with all PREA requirements required for hiring and/or promotion is utilized by the facility. A review of files in the Human Resources area ensure the appropriate use of the form, as it was found in multiple random files during inspection. Human Resources staff ensures this criminal history check is conducted at the time of application submission and at least once every five years for employees. Business office staff ensure annual criminal history checks are conducted on all contractual employees. The Volunteer Services Coordinator (Chaplain) ensures that, prior to approval as a volunteer, a criminal history check is conducted on volunteers and every two years thereafter.

There have been 266 persons hired this past year who had criminal background checks and there were also 6 service contract staff where criminal background checks were conducted. Both random staff interviews and contractors interviewed indicated these had been done and they were aware of them when they occurred.

Turnover is significant right now because it is being impacted by higher-paying oil/energy field hiring cycles and also because many staff have been at DCI for years and are simultaneously reaching their retirement eligibility milestone.

Standard 115.18: Upgrades to facilities and technologies

115.18 (a)

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

115.18 (b)

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

Auditor Overall Compliance Determination

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

Although not a significant expansion in the same sense as full new construction, the prison has received State DOC funds for some PREA upgrades. The warden and PREA Coordinator both indicated that part of the funding was used for visual barriers in shower and restroom facilities and the remainder was used to add a few needed cameras. Upon the availability of appropriate funding for individual cameras, all areas of the facility are considered, taking into account available staffing, blind spots, line of sight and effective monitoring to ensure that each is utilized in a manner most effective in protection of inmates. Multiple staff members are involved in the strategic planning of the installation of additional cameras as they become available.

When designing new units, planning substantial expansions or modifications to existing units or when updating a video monitoring system, the Warden stated he does consider how such

expansions, modifications or updates would enhance the unit's ability to protect inmates from sexual abuse.

RESPONSIVE PLANNING

Standard 115.21: Evidence protocol and forensic medical examinations

115.21 (a)

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

115.21 (b)

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

115.21 (c)

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

- Has the agency documented its efforts to provide SAFEs or SANEs? Yes No

115.21 (d)

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

115.21 (e)

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

115.21 (f)

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

115.21 (g)

- Auditor is not required to audit this provision.

115.21 (h)

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

Auditor Overall Compliance Determination

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

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

DCI Evidence Protocol and Forensic Medical Examinations Policy:

- The Investigative Service Office investigates allegations of sexual abuse and follows evidence collection protocols as outlined in DCI policy 02-01-007 – Crimes Committed on the Grounds of DCI.
- All victims of sexual abuse have access to a forensic medical examination either on-site or off-site at a local hospital at no cost to the victim, where evidentiary or medically appropriate.

Examinations performed will be conducted by individuals that have received Sexual Assault Forensic Examiners (SAFE's) or Sexual Assault Nurse Examiners (SANE's) training or by qualified medical practitioners. No forensic medical exams are done on site. All forensic exams are transported to local hospitals as to allow for a SAFE/SANE certified health care professional to perform the assessment.

- SAFE and SANE training certificates are provided to the Training Department for training credit and documentation of training.
- Inmates who are victims of sexual abuse have access to victim advocates on staff and to staff at the local community rape crisis center, St Landry-Evangeline Sexual Abuse Center.
- Inmates may request a victim advocate on staff or from a community-based organization to accompany and support through the forensic medical examination, investigatory interview and to provide emotional support, crisis intervention, information and referrals.
- Any investigations that indicate criminal activity cannot be handled at the facility and are transferred to the Parish Sheriff's Office for handling and they use the same standards of investigation as 115.21 (a) – (e).

Victim Advocates are qualified staff members or community-based staff from a rape crisis center who have been screened for appropriateness to serve in the role of a victim's advocate and have received education concerning sexual assault and forensic examination issues in general. Staff victim advocates have documented training. However, Victim Advocates are used only to prevent gaps until a victim can reach the hospital and also until they can arrange external Victim Advocates.

In reality, then, the process is designed to provide advocates upon arrival at the hospital and the institution-based advocates serve as support when back at the facility. Facility Advocates are not intended to replace external resources for the inmate and the intention is not for facility-based advocates to perform all advocate functions.

The Victim Advocate consults with the assigned investigator and assists the alleged victim as appropriate. According to interviews with the PCM, an Advocate, and the investigator, a facility Advocate assists in the facility and community Advocates can be available at the hospital as needed.

There were 3 forensic medical exams this past year and all 3 were performed by a SAFE/SANE qualified medical practitioner.

As requested by the victim, the Advocate may participate in supporting victims throughout the forensic medical examination process (ensuring compliance in confidentiality laws) and investigatory interviews and provide emotional support, crisis intervention, information and referrals.

All conversations between the Victim Advocate and the alleged victim remain confidential except when:

- Disclosure of the confidential information is necessary to protect the victim or another (staff or offender) from potential harm; or
- The identity of an otherwise unknown alleged sexual predator is revealed.

The Victim Advocate does not prepare or submit an Unusual Occurrence Report based upon conversations or functions performed while in the role of Victim Advocate.

Standard 115.22: Policies to ensure referrals of allegations for investigations

115.22 (a)

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

115.22 (b)

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

115.22 (c)

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

115.22 (d)

- Auditor is not required to audit this provision.

115.22 (e)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

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

The Department has adopted a zero-tolerance policy toward victimization and sexual abuse through the PREA Program. Full investigations, appropriate reporting and compliance to the standards program are treated as a top priority by administrators and investigators. During the past 12 months there were 52 allegations of sexual abuse or harassment and all 52 received administrative investigations, and 4 then received criminal investigations. All were completed.

The Investigators ensure that an administrative and/or criminal investigation is conducted in all cases of sexual abuse and sexual harassment they receive.

Claims made which are out of the scope of the training provided to DCI investigators would be referred for investigation to either East Feliciana Parish Sheriff's Office. The case file would show it was referred to The Sheriff's Office.

TRAINING AND EDUCATION

Standard 115.31: Employee training

115.31 (a)

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

115.31 (b)

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

115.31 (c)

- Have all current employees who may have contact with inmates received such training? Yes No

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

115.31 (d)

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

Auditor Overall Compliance Determination

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

The facility has 498 staff who have contact with inmates and who have received PREA training.

All training on sexual abuse pursuant to the PREA Standards is developed by the DPS&C's Training Director in conjunction with the Chief of Operations, Regional Wardens, the Department PREA Coordinator, and the Department's Medical/Mental Health Director. All staff having contact with inmates complete training prior to job assignment concerning the facility's PREA program. Encompassed in the training is the facility policy regarding PREA, responder duties, inmates right to be free from sexual abuse, dynamics of sexual abuse and harassment, common reactions, how to detect and respond, how to avoid personal relationships, effective communication with LGBTI inmates, and mandatory reporting requirements. As required by policy and documented in training files, staff receive training prior to taking assignment and annually and includes the following:

- Zero-tolerance policy for sexual abuse and sexual harassment;
- How to fulfill their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures;
- The rights of inmates and employees to be free from sexual abuse and sexual harassment;
- The rights of inmates to be free from sexual abuse and sexual harassment;
- The rights of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment;
- The dynamics of sexual abuse and sexual harassment in confinement;
- The common reactions of sexual abuse and sexual harassment victims;
- How to detect and respond to signs of threatened and actual sexual abuse;
- How to avoid inappropriate relationships with inmates;
- How to communicate effectively with inmates including, gay, bisexual, transgender, intersex, or gender nonconforming;

The training provided is geared to adult male inmates. Any employee transfers from a female institution receives a 40-hour orientation to acclimate them to the differences in gender protocols.

All employees are trained annually on PREA and the current sexual harassment policies and procedures and are required to sign a training roster as verification of their attendance and understanding of the training. All current staff and new hire employees sign the Sexual Assault and Sexual Misconduct with Inmates Acknowledgement Form and the Malfeasance in Office Form and both forms are maintained in the employee's personnel file. During interview with staff, it was verified that training is conducted and attended as required.

The Department provides Correctional Officers with refresher training annually, and all other employees refresher training every two years, to ensure that all employees are aware of current sexual abuse and sexual harassment policies and procedures.

All security staff are trained in how to conduct cross-gender pat-down searches, and searches of transgender and intersex inmates, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs.

Training also includes specialized training for medical and mental health staff, as well as for Investigators. Medical staff employed by the agency have received appropriate training to assist them in arranging for the conduct of forensic examinations but they do not perform them. The agency documents that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere.

Medical and mental health care practitioners also receive the training mandated for employees under §115.31 or for contractors and volunteers under §115.32, depending upon the practitioner's status at the agency.

Standard 115.32: Volunteer and contractor training

115.32 (a)

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

115.32 (b)

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

115.32 (c)

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

Auditor Overall Compliance Determination

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

All 17 contractors and 983 volunteers who have inmate contact have been trained in the required PREA procedures and policies.

Volunteer, Intern and Contractor Training Policy: The Department ensures that all volunteers, interns and contractors who have contact with inmates have been trained on their responsibilities under the Department's sexual abuse and sexual harassment prevention, detection and response policies and procedures.

All volunteers, interns and contractors must sign the Sexual Assault and Sexual Misconduct with Inmates Volunteer Acknowledgement Form stating that they understand that any violation shall result in disbarment from the prison and may include the filing of criminal charges as warranted.

The Chaplain oversees volunteer training; and the Training Department oversees staff and interns'/student workers training and is also responsible for ensuring that all who have contact with inmates receive training on their responsibilities.

Interviews with the Chaplain, random staff, and the PCM indicated that contractors and volunteers are informed prior to the awarding of the contract and prior to their approval of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment. Contractors and volunteers are required to sign the Sexual Assault Sexual Misconduct with Inmates form (kept in their personnel files). Violations of this policy serves as grounds for revoking the contract and terminating the volunteer(s) access. Contractors and volunteers are also responsible for reporting incidents of sexual abuse and sexual harassment.

The facility maintains documentation confirming the training the volunteers, interns and contractors received. Forms for volunteers are maintained by the Volunteer Services Coordinator (Chaplain); and by the Business Office for contractors. The level and type of training provided to volunteers, interns and contractors is based on the services provided and level of contact they have with inmates, but all who have contact with inmates are notified of the zero-tolerance policy regarding sexual abuse and sexual harassment and informed of the procedures to follow to report such incidents.

All training is required to be repeated annually.

Standard 115.33: Inmate education

115.33 (a)

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

115.33 (b)

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

115.33 (c)

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

115.33 (d)

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

115.33 (e)

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

115.33 (f)

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

Auditor Overall Compliance Determination

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

At intake inmates receive information on the zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment.

The day after intake, (excluding holidays), inmates are scheduled for orientation where they receive required information on their right to be free from sexual abuse and sexual harassment; to be free from retaliation for reporting incidents; and procedures for responding to incidents.

Within 30 days, additional comprehensive education is provided. Each time an offender transfers, this information is repeated at the new institution and the offender signs a new Intake Sheet and this was verified in numerous offender interviews as well as offender file reviews. Each offender orientation includes verbal and written training information regarding sexual assault and sexual misconduct, including:

- Prevention;
- Self-protection;
- Multiple channels of reporting sexual assault and sexual misconduct;
- Protection from retaliation;
- Treatment and counseling;
- DPS&C zero tolerance for sexual assault and sexual misconduct.

The facility utilizes different formats, to include live staff instruction, utilization of prerecorded video review, written documentation in the form of a flier or pamphlet and follow-up review provided by staff to ensure inmates understand the information that is being presented, including;

- Inmates who are limited English proficient;
- Inmates who are deaf;
- Inmates with visual impairment; and
- Those inmates who show signs of other disabilities including those with limited reading skills.

Classification staff documents these education sessions and this information is readily available in the offender handbook and posters concerning PREA reporting information and support services available are visible throughout the facility for inmate view and reference.

Inmates received at Dixon are there for longer terms so short turnovers are relatively rare. Of the 844 inmates received in the past year, all 844 received the comprehensive education since their stays were all 30 days or longer. Policy requires that inmates at all institutions receive information concerning sexual abuse during offender orientation at their respective permanent housing unit upon intake. In addition, each offender receives one hour of annual training regarding sexual abuse and reporting.

Certified offender interpreters may be used to explain the policies and procedures for reporting; however, the Department will not rely on offender interpreters, offender readers or other types of offender assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the offender's safety, the performance of first- response duties or the investigation of the offender's allegations. There were zero uses of interpreters in the past year.

The Department utilizes the Speak Easy Telephone Interpreting Services for all foreign language interpreting needs.

Standard 115.34: Specialized training: Investigations

115.34 (a)

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

115.34 (b)

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

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

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

115.34 (c)

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

115.34 (d)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

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

Investigators receive training in conducting sexual abuse and sexual harassment investigations in a confinement facility and all 11 of the investigators have completed the required training. Investigator and Deputy Warden interviews confirmed that his training includes:

- Techniques for interviewing sexual abuse victims;
- Proper use of Miranda and Garrity warnings;
- Sexual abuse collection; and
- Criteria and evidence required to substantiate a case for administrative action or prosecution referral.

Training includes that offered by DPS&C and training offered by the National Institute of Corrections. Documentation of this training is retained in the Training Department for training credit and documentation.

Standard 115.35: Specialized training: Medical and mental health care

115.35 (a)

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

115.35 (b)

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

115.35 (c)

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

115.35 (d)

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

Auditor Overall Compliance Determination

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

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

The 27 medical/mental health staff were all (100%) trained in current agency and PREA policy, including the following:

- To detect and assess signs of abuse;
- To preserve physical evidence of sexual abuse;
- To respond effectively and professionally to victims of sexual abuse and sexual harassment;
- How to report allegations or suspicions of sexual abuse and sexual harassment.

In addition to the specialized training requirements and the requirement to complete NIC training related to this area, medical and mental health staff receive training required for all staff, as do contracted medical and mental health personnel. During orientation and annually thereafter, all staff receive training in the prevention, detection, response, reporting and investigation of sexual abuse. They felt that inmates here are safe and receive few indications of inmates fearful or concerned about sexual safety.

The agency maintains documentation that medical and mental health practitioners have received the required training referenced in this standard either from the agency or elsewhere.

SCREENING FOR RISK OF SEXUAL VICTIMIZATION AND ABUSIVENESS

Standard 115.41: Screening for risk of victimization and abusiveness

115.41 (a)

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

115.41 (b)

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

115.41 (c)

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

115.41 (d)

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability? Yes No

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes? Yes No

115.41 (e)

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

115.41 (f)

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

115.41 (g)

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

115.41 (h)

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

115.41 (i)

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

Auditor Overall Compliance Determination

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

At intake here, all inmates are screened to assess their risk for being sexually abused or abusive toward other inmates. The screening is normally conducted the day of arrival but no later than 72 hours after arrival at the facility and utilizes DPS&C PREA intake forms and process. The screening tool is utilized in conjunction with information received directly from the inmate concerning their feelings of safety and security to ensure that they are housed appropriately and receive appropriate follow-up by mental health as necessary. Interviews with the medical and mental health staff and the PREA Compliance Manager indicate a consensus that screening has improved as the staff has become more experienced and attuned to the process.

DPS&C's PREA Screening Checklist includes the following:

- Whether the offender has a mental, physical or developmental disability;
- The age of the offender;
- The physical build of the offender;
- Previous incarcerations;
- Exclusively nonviolent criminal history;
- Whether the offender has prior convictions for sex offenses against an adult or child;
- Whether the offender is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming;
- Has the offender previously experienced sexual victimization;
- The offender's perception of vulnerability;
- Whether the offender is detained solely for civil immigration purposes.

In addition, the screening also includes:

- Prior acts of sexual abuse;
- Prior convictions for violent offenses;
- When known, to the facility: history of prior institutional violence or sexual abuse.

The mental health supervisor interviewed indicated that, at the 14-day mark, each sex offender is reassessed by mental health for risk of victimization or abusiveness, and all others are completed by the 3rd week, possibly earlier based upon any additional, relevant information received by the facility since the intake screening.

An offender(s) risk is always reassessed when warranted due to referral, request, incident of sexual abuse or receipt of additional information that bears on the offender's risk of sexual victimization or abusiveness.

No offender is disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked on the PREA Screening Checklist. Offender(s) are informed that any information given in response to questions asked are of a confidential nature and will not be disseminated in any way that will be exploited to the offender's detriment.

All 844 inmates received here longer than 72 hours received the required reassessment within less than 30 days, the standard for the Mental Health staff being about 21 days, 14 days for sex inmates. There were 844 inmates received who were here for longer than 30 days and all were reassessed within the required 30 days.

DCI uses the LADPS&C **PREA Screening Checklist**, an assessment tool utilized to assess an offender's probability of being a PREA Blue High-Risk Sexual Victim (HRSV), a PREA Red High Risk Sexual Predator (HRSP) or, if neither, classified as PREA Green.

- **PREA Blue HRSV:** Based on the Checklist, any offender within the custody of the DPS&C who has been identified as an individual who has been confirmed as a sexual victim or appears to be at high risk for sexual predation.
- **PREA Red HRSP:** Based on the Checklist, any offender within the custody of the DPS&C who has been identified or confirmed as an individual with the propensity to sexually assault others.
- **PREA Green:** Based on the Checklist, any offender within the custody of the DPS&C with no significant risk of sexual victimization or sexually predatory behavior.

Decisions concerning housing assignments, jobs and group activities for PREA Blue HRSV and PREA Red HRSP inmates are the responsibility of the Initial Classification Board at each receiving institution and based on the Checklist, record review, prior facility behavior and current behavior. If mental health intervention is indicated, a referral is made by the Board to a mental health professional.

In deciding where to assign a transgender or intersex offender and in making other housing and programming assignments, the prison considers on a case-by-case basis whether a placement would ensure the offender's health and safety, and whether the placement would present management or security problems. Transgender inmates will also be given the opportunity to shower separately and each unit maintains documentation of the efforts to offer separate showers utilizing a Shower Preference Statement. Questions regarding identification of a transgender or intersex offender's genital status are referred to DPS&C's Medical/Mental Health Director for review and, if needed, determination if a physical examination in a private setting by a health care provider is necessary.

Reception center staff note the results of the Checklist in the Offender Management System. Consideration concerning housing, including possible single cell placement, is determined by the Classification Board based on initial screening information for those inmates confirmed/deemed PREA Blue HRSV and/or PREA Red HRSP.

MH (Mental Health) Screening is conducted on all transfers, at the time of admission to DCI, by mental health trained or qualified MH care personnel. MH Appraisals are conducted within 14

days of admission to a DOC reception center. Inmates designated by the reception center appraisal process, or who exhibit mental health symptoms upon arrival at a new institution receive, in addition to the required mental health screening, a comprehensive evaluation by a Licensed MH professional. Information received during the screening is maintained by staff to ensure there are no concerns with privacy.

Standard 115.42: Use of screening information

115.42 (a)

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

115.42 (b)

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

115.42 (c)

- When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice

assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)? Yes No

- When making housing or other program assignments for transgender or intersex inmates, does the agency consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems? Yes No

115.42 (d)

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

115.42 (e)

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

115.42 (f)

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

115.42 (g)

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

Auditor Overall Compliance Determination

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

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

Once an offender is determined as a PREA Blue HRSV and/or PREA Red HRSP at any time during incarceration, the offender is evaluated by the Classification Board for appropriate housing and programs and referred to a mental health professional. The mental health professional meets with the offender upon receipt of the referral to offer services and encourage programming.

Screening information is used as follows to keep separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive:

- Housing assignments;
- Bed assignments;
- Work assignments;
- Education assignments; and
- Program assignments.

In order to achieve effective management of these PREA-related inmates, each time a PREA Blue HRSV and PREA Red HRSP offender's housing location is changed, his PREA designation will be provided by Classification to the receiving housing unit senior officer. This information is also included in the inmate file so that senior staff can prevent inappropriate housing or work assignments.

Individualized determinations are made to ensure the safety of each offender by the Reception and Diagnostic Centers, which determine placement in a LDPS&C facility. Once at DCI, the facility does not place lesbian, gay, bisexual inmates on a tier solely on the basis of such identification or status and auditors found them located across the entire housing spectrum.

Placement and programming assignments for transgender and intersex inmates are reassessed twice each year to review threats to safety that may have been experienced by the offender. DPS&C C-01-022 Form O (Transgender/Intersex Reassessment is utilized) The views of the offender with respect to their own safety is given consideration.

Transgender inmates are given an opportunity to shower separately from other inmates by completing a Shower Preference Statement but few choose this option as showers are relatively private anyway.

Mental health staff interviewed indicated that services for PREA Blue HRSV inmates focus on issues related to treatment for and prevention of victimization. DPS&C's Medical/Mental Health Director is tasked to ensure that the institution employs or has access to the services of a licensed mental health professional who has a scope of practice, training and/or experience in trauma counseling.

Mental health services for PREA Red HRSP inmates focus on alleviating the offender's propensity for predatory or aggressive sexual behavior and sex offender treatment is often offered these inmates if it would be appropriate.

Classification staff interviewed indicated that the Director of Classification is notified at intake by the Initial Board or by any staff member thereafter who identifies an offender as a PREA Blue HRSV and/or PREA Red HRSP. The Director of Classification ensures that this information is entered into the offender's Annual Assessment, Master Record and in the mental health section of the offender's medical record for monitoring purposes. Each facility reviews the offender's PREA designation prior to any housing, job or program reassignment in order to make an individualized safety determination.

Standard 115.43: Protective Custody

115.43 (a)

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

115.43 (b)

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

115.43 (c)

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

115.43 (d)

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

115.43 (e)

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

Auditor Overall Compliance Determination

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

Generally, the offender is held in restricted housing only until the investigation is completed and a determination made regarding the allegation. DPS&C has a management form "24-hour Review of Involuntary Segregation Status During PREA-Related Investigation" that they utilize to document the inmates stay in restricted housing.

An offender placed in segregation because of a high risk of sexual victimization is required by policy to have access to programs, privileges, education and work opportunities commensurate to inmates in general population but this may not occur in very short-term separations. Documentation is maintained indicating which opportunities were limited, the duration of the limitations and the reasons for the limitations.

Placement in involuntary segregation and disciplinary segregation is reviewed after the first seven days and each 30 days thereafter.

Inmates at high risk for sexual victimization are not placed in involuntary segregated housing

unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers. If the facility restricts access to programs, privileges, education or work opportunities, the facility documents this information. If the facility cannot conduct an assessment immediately, they may hold the offender in involuntary segregated housing for less than 24 hours while completing the assessment.

The facility reports that 2 inmates were placed in involuntary segregation in the past 12 months and they also report that, in those 2 cases where involuntary segregation was used, required documentation was completed to explain the segregation. The two inmates held in involuntary protective custody were pending investigation.

REPORTING

Standard 115.51: Inmate reporting

115.51 (a)

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

115.51 (b)

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

115.51 (c)

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

115.51 (d)

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

Auditor Overall Compliance Determination

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

Inmates at DCI may report sexual abuse and sexual harassment, retaliation by other offender or staff, and staff neglect that may have contributed to an incident through the Administrative Remedy Procedure (ARP), via letter through farm mail, regular mail, filing a grievance, by calling Crime Stoppers or by contacting the respective Consulate. Crime Stoppers Baton Rouge is the reporting agency for Dixon telephone reports. Inmates can also submit internal mail to management ("Farm Mail") signed or unsigned.

Inmates may verbally, in writing or anonymously report sexual abuse and sexual harassment. During offender interviews, it was evident that information in regard to reporting opportunities for inmates is well disseminated in multiple forms. Inmates could verbalize understanding of multiple methods of reporting to include third party reporting and anonymous reporting. The majority of inmates stated that they would be comfortable with reporting directly to staff in the event that a need arose. All inmates noted the available posting with listed phone numbers for reporting.

Staff who are notified by an offender of sexual abuse and/or sexual harassment will follow directions provided on the back of their identification cards, which include first responder steps as well as completing an Unusual Occurrence Report detailing the incident.

Staff in random interviews were aware in every case that they are required to report sexual abuse and sexual harassment and may do so anonymously. All staff indicated they would not need to remain anonymous and would simply use their chain of command.

Standard 115.52: Exhaustion of administrative remedies

115.52 (a)

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

115.52 (b)

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

115.52 (c)

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

115.52 (d)

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

extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.) Yes No NA

115.52 (e)

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

115.52 (f)

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

- Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.) Yes No NA

115.52 (g)

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

Auditor Overall Compliance Determination

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

Inmates are first encouraged to speak with staff if they have an issue of concern or need. However, if for some reason communicating with a staff member is not helpful, they are asked to put their concerns in writing and submit the letter to appropriate staff. Lastly, if these mechanisms do not answer their question or address their grievance, they may submit the issue through the Administrative Remedy Procedure (ARP).

Within the past 12 months, there were 17 grievances for an allegation of sexual abuse and 15 of them received a response within the 90-day window allowed; 2 were given extensions to the 90 days. There were no grievances alleging danger of imminent sexual abuse during this period, however the facility determined 2 occasions where they determined an offender was at substantial risk of imminent abuse and immediate actions were taken. No offender was disciplined this past year for filing a grievance in bad faith.

Inmates may use the Administrative Remedy Procedure (ARP), grievance or any informal method to report sexual abuse and/or sexual harassment. The offender's report does not have to be submitted to the staff member who might be the subject of the complaint. Grievances may also be placed in institution mail. The investigation of the accusation(s) is not referred to the staff member referred in the grievance.

A decision on the grievance relating to sexual abuse and/or sexual harassment is required to be made within 90 days of the initial filing of the grievance. The offender is notified in writing of any extension in time that is needed to respond and the approximate date. If a response is not received at any level of the grievance process an offender can consider this as denial at this level.

Third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates are permitted to assist inmates in filing requests for administrative remedy as it pertains

to sexual abuse or sexual harassment. Third party reporting filed on behalf of the offender requires the offender to agree to proceed as a condition of processing the request. If the offender declines to have the request processed the offender will complete the ARP Drop Form.

DCI has in place a procedure for filing emergency grievances alleging an offender is subject to a substantial risk of imminent sexual abuse. These grievances are given to the Unit Manager, who speaks with the offender to determine the nature and severity of the threat. The Unit Manager provides the offender with a response within 48 hours and the facility a response in 5 calendar days, excluding weekends and holidays. The decision on the grievance determines whether the offender is in a substantial risk of imminent sexual abuse.

The facility documents the actions taken in response to the emergency grievance and the final decision of actions taken.

If determined that an offender filed the grievance with malice, the offender can be disciplined.

The Department does not require an offender to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse.

Standard 115.53: Inmate access to outside confidential support services

115.53 (a)

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

115.53 (b)

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

115.53 (c)

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

- Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements? Yes No

Auditor Overall Compliance Determination

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

Inmates may request at the time of the allegation to have access to receive outside assistance from victim advocates for emotional support. Those inmates detained for civil immigration receive mailing addresses, telephone numbers and toll-free numbers to national immigration services agencies.

Inmates are placed on notice that all telephone calls are monitored with the exception of properly placed privileged calls between an offender and his attorney. Reports of abuse are always forwarded to Investigations.

DCI, as part of the DOC, has an agreement with LaFASA (Louisiana Foundation Against Sexual Assault) that is able to provide crisis counselling and reporting avenues.

During interviews, it was evident that both staff and inmates were aware of the availability of telephone numbers for contacting and outside resource.

Standard 115.54: Third-party reporting

115.54 (a)

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

Auditor Overall Compliance Determination

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

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

Third parties (which may include other inmates, unit staff, family members, attorneys and outside advocates) may also assist inmates by making sexual abuse harassment reports, and/or initiating formal grievances. However, once this formal grievance process has been initiated by a third party, the offender must authorize the request for remedy and must continue the process in accordance with Department Regulation No. B-05-005 "Administrative Remedy Procedure." The prison documents inmates who decline to continue with the grievance once a third party initiates the process.

DCI has methods in place to receive third party reports of sexual abuse and sexual harassment. Individuals may call Crime Stoppers, file a grievance, the PREA Hotline, use institutional or use regular mail. Posters and the PREA handbook provide information to access third-party reporting. Crime Stoppers then contacts the facility Warden or Deputy Warden. Inmates reported they were aware of the ability to report through a third party, such as a family or friend outside the facility if necessary.

OFFICIAL RESPONSE FOLLOWING AN INMATE REPORT

Standard 115.61: Staff and agency reporting duties

115.61 (a)

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

115.61 (b)

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

115.61 (c)

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

115.61 (d)

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

115.61 (e)

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

Auditor Overall Compliance Determination

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

Staff are required to report immediately any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment, retaliation, or staff neglect or violation of responsibilities that may have contributed to an incident or sexual harassment or retaliation that occurred in the facility.

Apart from reporting to their designated supervisor, staff have been directed to refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in this policy, to make treatment, investigation, and other security and management decisions.

Medical and mental health practitioners are required to report sexual abuse as referenced above and the offender is informed of this requirement at the initiation of services and the limitations of confidentiality.

LA statute requires that the facility report, on behalf of adults who are considered vulnerable, any allegations to the designated State or local service agency under mandatory reporting laws.

All allegations of sexual abuse and sexual harassment are reported to Investigations, including third-party and anonymous reports.

All allegations of sexual assault, sexual misconduct or sexual harassment by either staff or offender may be reported to any staff member. The staff member who receives such reports, whether verbally or in writing, immediately notify the supervisor who ensures that an Unusual Occurrence Report (UOR) is completed. All PREA related UOR's go immediately up the chain of command.

Any allegation of sexual abuse is reported to DPS&C's PREA Coordinator and PREA Investigator immediately following the initial notification to the Warden.

The assigned investigator immediately notifies the Victim Advocate (but no later than the next business day), that an alleged sexual abuse has occurred. During interview, staff expressed the importance and the requirement to report any knowledge of a PREA related incident or concern immediately to their supervisor. Staff noted that they would feel comfortable reporting any information regardless of the topic or individuals involved.

Standard 115.62: Agency protection duties

115.62 (a)

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

Auditor Overall Compliance Determination

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

Immediate steps are taken when the facility learns that an offender might be subject to substantial risk of imminent sexual abuse. PREA time limits of 48 hours for initial response and 5 days for resolution are observed in this process and, in actuality, initial response is virtually immediate. As

noted above, no inmates claimed to be in imminent danger but the facility determined in 2 cases that the inmates were in fact at substantial risk and were in imminent danger and immediate actions rectified the situations.

When staff learns that an offender is subject to a substantial risk of imminent sexual abuse, they are trained to take immediate action to protect the alleged victim and to assume all reports of sexual victimization, regardless of the source of the report (third party, anonymous, verbal, etc.) are credible and respond accordingly. During interaction with staff, it was evident that staff have received training concerning the actions to be taken immediately upon receiving information concerning a PREA related incident or determining that an inmate is at risk.

Standard 115.63: Reporting to other confinement facilities

115.63 (a)

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

115.63 (b)

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

115.63 (c)

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

115.63 (d)

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

Auditor Overall Compliance Determination

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

The facility has received no allegations of sexual abuse from other facilities in the past 12 months. Allegations received from other confinement facilities that an offender was sexually abused while confined at DCI would be reported directly to the Warden and the Warden ensures that allegations are thoroughly investigated in the same manner as are all allegations.

Upon receiving an allegation from an offender that he was sexually abused while confined at another facility, the Warden stated in his interview that he would notify their executive in writing. An email would usually be sent from the DCI warden to the other warden; or from investigator to investigator of the facility where the alleged abuse occurred. Notification is provided as soon as possible, but no later than 72 hours after receiving the allegation and documentation is placed in the offender's Master Record. Documentation of the notification is also logged in the "case" logbook.

Immediate steps are taken when it appears that an offender might be subject to substantial risk of imminent sexual abuse. PREA time limits of 48 hours for initial response and 5 days for resolution are observed in the process.

Standard 115.64: Staff first responder duties

115.64 (a)

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

115.64 (b)

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

Auditor Overall Compliance Determination

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

There were 52 allegations in the past year that an inmate was sexually abused and the responding staff member had to separate the alleged victim and abuser in every case. There were 3 cases that were reported in enough time for collecting physical evidence and the required first responder steps were followed in each case. No non-security staff were the first responders in any of the cases.

All staff interviewed, including non-uniformed staff, were well familiar with proper steps and procedures for initial responses to an incident, and all had their PREA card with required steps in their possession.

The first staff member receiving the report/allegation and/or the appropriate supervisor advises the victim not to shower or otherwise hygienically clean; or, if the assault was oral, not to eat, drink, or brush their teeth or otherwise take any action that could damage or destroy physical evidence pending completion of the gathering of that evidence and/or the initial investigation.

First responders secure the alleged crime scene if feasible and if forensic evidence may exist. The only persons allowed to enter a secured crime scene are the assigned investigator(s), medical staff and/or the Warden, as needed. The crime scene remains secured until released by the investigator.

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

Louisiana law requires all biological evidence collected in cases involving homicide and rape to be held in secure custody indefinitely or turned over to the local Sheriff's Office if they are handling the criminal investigation.

The alleged victim will be promptly escorted under appropriate security to the infirmary for assessment. If transporting the alleged victim to the infirmary or a hospital emergency room, the victim is instructed to undress over a clean sheet in order to collect any potential forensic evidence that may fall from his person. The sheet, along with the victim's clothing, is collected as evidence and placed in a paper bag with an appropriate chain of evidence form attached.

When released from the infirmary or emergency room, the alleged victim is to be segregated from the alleged aggressor and screened by a mental health professional with appropriate referrals made.

The credibility of an alleged victim, suspect or witness is assessed on an individual basis and not be determined by the person's status as detainee or staff.

Alleged aggressors who are inmates are held in segregation pending investigation and remain there until the investigation is complete, unless other circumstances require the transfer of the alleged offender aggressor. The offender accused of the predatory behavior is always evaluated by mental health staff prior to the disciplinary hearing of the violation.

DCI conducts mental health evaluations of abusers within 60 days of learning of such abuse and after treatment when deemed appropriate by mental health practitioners; and documents this utilizing the Mental Health Evaluation for Substantiated Cases of Sexual Assault Form.

In any case where the alleged aggressor is a staff member, there is no contact between the alleged aggressor and the alleged offender/victim without the approval of the Warden.

Standard 115.65: Coordinated response

115.65 (a)

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

Auditor Overall Compliance Determination

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

Each supervisor and senior staff member interviewed was aware of the steps required by the various parties following any incident and, as would be expected, most line staff were aware of just their own requirements and some of the requirements of their supervisors.

Actions Required After Report of Sexual Abuse

- When staff learns that an offender is subject to a substantial risk of imminent sexual abuse, take immediate action to protect the alleged victim. Staff report and respond to all allegations of sexually abusive behavior and sexual harassment. Assume all reports of sexual

victimization, regardless of the source of the report (third party, anonymous, verbal, etc.) are credible and respond accordingly.

- Only designated employees specified by policy should be informed of the incident, as it is important to respect the victim's security, identity, and privacy.
- All allegations of sexual abuse are to be handled in a confidential manner throughout the investigation.
- All conversations and contact with the victim should be sensitive, supportive, and non-judgmental.

Initial Response: Upon the report or discovery of an incident of sexual abuse/sexual assault, the first security staff member to respond shall:

- Intervene in any assaults and separate the alleged victim and abuser.
- Detain the abuser.
- Call for emergency medical care for the victim, if necessary.
- Immediately notify your supervisor and remain on the scene until relieved by responding personnel.
- Preserve and protect the crime scene until appropriate steps can be taken to collect any evidence.
- Request that the alleged victim not take any actions that could destroy physical evidence, including bathing, brushing teeth, changing clothes, defecating, smoking, drinking, or eating.
- Ensure that the alleged victim not take any actions that could destroy physical evidence, including bathing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.
- If the first responder is not a correctional officer the responder is still required to request that the alleged victim not take any actions that could destroy physical evidence; remain with the alleged victim and notify security staff.
- Apart from responding to designated supervisors, employees are not to reveal any information related to the incident to anyone other than to staff involved with investigating the alleged incident.
- Document detailed description of:
 - Victim and abuser locations and affect (emotions, appearance, etc.)
 - Wounds and where they are
 - Anything the victim or abuser reported to you

Shift Supervisor will follow the below procedures:

- Notify immediately the warden or designee, the PREA Compliance Manager, and the Investigator. The Investigator assumes control.
- Assign an officer to remain at the crime scene to protect area.
- Attend to the victim. Ensure the alleged victim is assessed by medical staff and housed in the Infirmary Isolation cells. Do not speak loudly or call unnecessary attention to the victim.

- A security staff member is placed outside the cell or area for direct observation to ensure these actions are not performed. The alleged victim must not be left alone until evaluated by Mental Health Staff for suicide risk.
- The alleged abuser remains in the dry cell/area under direct supervision of a same sex correctional officer to ensure he does not destroy potential evidence.
- After the investigator has completed the interview, separate and apart from the alleged victim, the alleged abuser is referred to medical for further assessment and treatment as deemed necessary by healthcare providers. Visible injuries are documented both photographically and in writing and placed in the abuser's medical record.
- Thereafter, the alleged abuser is held in segregation pending further investigation.
- A brief inquiry will be made to each individual separately and apart from each other to determine if the sexual contact was consensual or non-consensual. Note: Designated staff interpreters will be used when communicating with victims with limited English proficiency, unless exigent circumstances exist which will be fully documented.
- Ensure all persons who played an active role in the response document their actions, providing as much detail as possible, and ensure that they remain on duty until properly debriefed and relieved as appropriate.
- Ensure referrals to EAP for staff in need of crisis intervention counseling.
- Incidents are fully documented.
 - Log Book
 - Security Video
 - Photos

Facility Crime Scene

- Start a crime scene log. Everyone who enters the crime scene area must sign the log. Document each person entering the crime scene, the time of entry and time of departure. Note: Only persons allowed to enter the crime scene are assigned investigators, medical staff, and the Warden or designee.
- Video and photograph the crime scene area before removal of any items from the area.
- Identify staff that will touch and/or handle evidence.

Notifications Required when Sexual Abuse is Alleged: Ensure below notifications are made within two hours of the occurrence:

- Warden
- PREA Compliance Manager
- Investigator
- Health Care Authority
- Mental Health

For allegations of sexually abusive behavior in which an employee is the alleged abuser, only the Warden and investigator are notified of the specifics of the allegation. They make notifications and referrals to outside law enforcement agencies and licensing board as appropriate.

Note: In every case where the alleged abuser is an employee, contractor, or volunteer there is to be no contact between the alleged abuser and the alleged victim pending the outcome of an investigation.

Evidence Protocol

If the abuse occurred within 72 hours, procedures will be followed in accordance with DCI policy 02-01-007- "Crimes Committed on Grounds of DCI".

Responsibility when Sexual Harassment is Alleged

Some offender allegations rise only to the level of sexual harassment. For allegations of sexual harassment, responding supervisory staff:

- Ensure that the alleged victim and abuser are separated.
- A brief inquiry will be made to each individual separate and apart from each other to ascertain if the sexual behavior was consensual or nonconsensual.
- Ensure that your supervisor and the investigator are notified.
- Incidents of this sort are fully documented.
- The incidents are investigated and the alleged abuser may be segregated pending the outcome of the investigation.
- The alleged victim is referred to Mental Health for re-assessment to determine if any issues need to be addressed.
- If the allegation is substantiated, the abuser is referred for administrative disciplinary sanctions and re-assessed to determine if any issues need to be addressed.

Responsibility When Sexual Activity is Alleged

Not all reports or allegations require a full response protocol. For reports or allegations of sexual activity where the involved inmates independently report a non-coercive consensual sexual encounter, responding supervisory staff:

- Ensure that the involved individuals are separated.
- A brief inquiry will be made to each individual independently to ascertain if the sexual encounter was consensual or nonconsensual
- Notify your supervisor and the Investigator.
- If the Investigator determines the behavior is in fact sexual activity, the involved inmates are referred for administrative disciplinary sanctions. The disciplinary board refers the offender to mental health for an assessment as to whether an offender's mental disabilities or mental illness contributed to his behavior when determining what type of sanction, if any, should be imposed.
- The involved individuals are always re-assessed to determine if any issues need to be addressed.

In other cases, there may be insufficient reason to proceed (the alleged victim credibly recanted, or the alleged abuser was not in the facility on the date of the allegation, etc.) and the response protocol may be terminated. Incidents of this sort are still reported.

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

115.66 (a)

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

115.66 (b)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

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

Interviews with the DPS&C PREA Coordinator and an DCI Contracts staff report that DCI and LA DPS&C have no contracts or agreements that would limit DCI's ability to remove the alleged staff sexual abuser from contact with any offender pending outcome of the investigation or of a determination of whether and to what extent any staff discipline is warranted.

Standard 115.67: Agency protection against retaliation

115.67 (a)

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

115.67 (b)

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

115.67 (c)

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

- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff? Yes No
- Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need? Yes No

115.67 (d)

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

115.67 (e)

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

115.67 (f)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

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

Retaliation is prohibited in DPS&C. If detected or alleged, the appropriate supervisor is directed to immediately contact the facility investigative section. Staff is trained to also report any claims of retaliation against inmates and other staff for reporting abuse, as well as any staff neglect or violation of responsibility that may have contributed to an incident or retaliation. The Assistant Warden for Administration is responsible for collaborating with the Investigator to monitor retaliation. Interview of the Assistant Warden indicates a system of informal checks and maintaining sensitivity to housing changes, disciplinary reports, job changes, etc. He indicated he maintains contact even in cases determined to be unfounded. Further, his interview and the PCM interview both indicated that the 90 days was a guideline and had been exceeded on occasion when it appeared advisable.

There are multiple protection measures in place for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with an investigation. To the

maximum extent possible, staff referenced in an offender's grievance or ARP are moved until the conclusion of the investigation. Mental health services are always available to inmates by writing to mental health.

Except in instances where DCI determines that a report of sexual abuse is unfounded, the facility does the following for at least 90 days following a report of sexual abuse:

- Monitor the conduct and treatment of offender or staff who report sexual abuse to see if there are changes that may suggest possible retaliation by other inmates or staff;
- Monitor the conduct and treatment of inmates who suffered sexual abuse to see if there are changes that may suggest possible retaliation by other inmates or staff;
- Act promptly to remedy any retaliation;
- Monitor offender disciplinary reports;
- Monitor offender housing changes;
- Monitor offender program changes;
- Monitor negative performance review of staff;
- Monitor reassignments of staff;
- Continue monitoring beyond 90 days if the initial monitoring indicates a continuing need.

Inmates receive a periodic status check for at least 90 days following a report of sexual abuse; the DCI investigator monitors the conduct and treatment of inmates or staff who reported the sexual abuse and inmates who were reported to have suffered sexual abuse. If any changes suggest retaliation, the investigator discusses them with the PREA Compliance Manager and Deputy Warden in order to act promptly to remedy any such retaliation. Items monitored include offender disciplinary reports, housing or program changes, or negative performance reviews or reassignments of staff.

Such monitoring continues beyond 90 days if the initial monitoring period indicates a continuing need. The reason is documented on the PREA Agency Protection against Retaliation for Inmates/Staff Form. If an offender who is being monitored for retaliation is transferred, the PREA Compliance Manager at the sending facility follows up with the receiving facility to ensure continuity of retaliation monitoring.

Standard 115.68: Post-allegation protective custody

115.68 (a)

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

Auditor Overall Compliance Determination

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

Does Not Meet Standard (*Requires Corrective Action*)

In the past 12 months, two inmates were held in involuntary protective custody for protection during the investigation.

INVESTIGATIONS

Standard 115.71: Criminal and administrative agency investigations

115.71 (a)

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

115.71 (b)

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

115.71 (c)

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

115.71 (d)

- When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether

compelled interviews may be an obstacle for subsequent criminal prosecution? Yes
 No

115.71 (e)

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

115.71 (f)

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

115.71 (g)

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

115.71 (h)

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

115.71 (i)

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

115.71 (j)

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

115.71 (k)

- Auditor is not required to audit this provision.

115.71 (l)

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

Auditor Overall Compliance Determination

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

The DPS&C Secretary has appointed a senior headquarters staff member to serve as DPS&C's major PREA Investigator, a position that oversees all investigations for the Department and works in conjunction with the Wardens and individual investigators. All investigation case reports are required to be concluded, reviewed and forwarded to Headquarters within 30 days of receiving the initial allegation. In the event an extension of the 30-day time period is needed, a request is submitted to the Headquarters Director of Investigations. This position also tracks SAFE/SANE evaluations and enters required data into the annual State report on investigations.

Incidents involving criminal acts of sexual assault and sexual misconduct where local law enforcement is not conducting the investigation should be investigated by an investigator who is acting under the authority of DPS&C's HQ-level PREA Investigator. If an investigator is not assigned to the reporting prison, one is assigned to the facility by the Chief of Operations. In actual practice, the agency or facility refers all criminal sexual assault cases to the Parish Sheriff's Office.

Prompt attention is given to providing objective and thorough investigations pertaining to sexual abuse and/or sexual harassment that are conducted regardless of how they are reported. When sexual abuse is alleged, DCI uses investigators who have received special training in sexual assault and sexual misconduct investigations; crime scene management; elimination of contamination; evidence collection protocol; and crisis intervention.

Investigations include the collection of and preservation of direct and circumstantial evidence as well as interviews with the victim(s), suspected perpetrator(s) and any witnesses. Investigators also check for prior reports or complaints that may have been filed against the suspected perpetrator. Any physical and DNA evidence is collected in accordance with DCI policy 02-01-007 – Crimes Committed on the Grounds of DCI.

Per the investigator interview, investigators are trained to be objective and consider the facts of the allegation(s) and not weigh the individuals' status as an offender or as an employee. Offender

victims are not subjected to a polygraph examination as a condition of preceding with an investigation.

Investigations (both criminal and administrative) review all details including what staff actions or inactions may have led to the sexual abuse and/or sexual harassment and these later receive Sexual Assault Incident Reviews per DOC policy. Investigative reports are compiled in accordance with DPS&C Form E (Standardized Case Report Format) which includes descriptions of the physical evidence and testimonial evidence as well as the reasoning behind credibility assessments and facts and findings.

Substantiated allegations of sexual abuse are referred for criminal prosecution. Investigative reports of unsubstantiated or unfounded claims are maintained in accordance with the Department Records Management Program, which require that reports from the active year plus 6 years be archived.

In an investigation of recent sexual assault or sexual misconduct occurring within 72 hours, steps to be taken by the Warden or designee include the referral for forensic examination and detailed preservation and study of the scene.

The Warden reports he is always notified and an investigation initiated as directed. Based upon the initial inquiry and/or evidence that the allegation represents possible criminal activity, the Warden notifies local law enforcement and the facility investigative section. At the initiation of the investigation, alleged victim(s) and alleged aggressor(s) are immediately separated if not already done. The Warden or PREA Compliance Manager coordinates with the assigned investigator in decisions regarding the housing and management of the alleged offender/victim(s), alleged inmates and any alleged offender/witness(es) so as not to inadvertently interfere with the criminal investigation.

Investigations of sexual abuse occurring more than 72 hours after the incident are relatively similar, except that a determination is made based upon the amount of time that has passed since the alleged incident as to whether the alleged offender aggressor should be placed in a dry cell to preserve forensic evidence.

Substantiated allegations are forwarded to the local District Attorney for a decision regarding prosecution; and the PREA Investigator works with the District Attorney's Office to ensure appropriate criminal prosecution of substantiated cases of sexual assault. Cases sent for criminal prosecution are maintained as long as the alleged abuser is incarcerated or the employee is still employed, plus five years. The release of the accused abuser (offender or staff) does not constitute grounds for termination of an investigation.

Since the last audit, 3 cases were referred for criminal prosecution.

Standard 115.72: Evidentiary standard for administrative investigations

115.72 (a)

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

Auditor Overall Compliance Determination

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

Per policy and interviews with the investigator, Warden and PCM, neither DPS&C nor DCI impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.

Of the 52 total allegations this past year, 29 were determined unfounded. There were 23 criminal and/or administrative investigations of alleged sexual abuse in the last 12 months and all were followed by an incident review within 30 days.

Standard 115.73: Reporting to inmates

115.73 (a)

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

115.73 (b)

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

115.73 (c)

- Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit? Yes No

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

115.73 (d)

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

115.73 (e)

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

115.73 (f)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

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

DPS&C policy is that inmates shall be notified of the outcome of investigations into allegations made by the offender that he suffered sexual abuse. Following the conclusion of an investigation into an offender's allegation that the offender suffered sexual abuse, the investigator interviewed stated that he informs the offender as to whether the allegation was determined to be substantiated, unsubstantiated or unfounded. If the prison did not conduct the investigation, it requests the relevant information from the investigative entity in order to inform the offender of the investigative findings. All 52 of the investigations of alleged sexual abuse had documented results reported back to the inmate after completion of the administrative investigations; there were no external agency investigations.

Following an offender's allegation that an employee has committed sexual abuse against him, unless it has been determined that the allegation is unfounded or unless the offender has been released from custody, the offender is informed of the following:

- The employee is no longer posted within the offender's housing unit;
- The employee is no longer employed;
- The facility learns of the employee's indictment on charges related to sexual abuse;
- The facility learns of the employee's conviction on charges related to sexual abuse.

Following an offender's allegation that an offender has committed sexual abuse against him, he is notified of the following:

- The alleged abuser has been indicted on a charge related to sexual abuse;
- The alleged abuser has been convicted on a charge related to sexual abuse.
- These notifications are documented in the case report.

The investigator indicated that all notifications use the Notification of "Outcome of PREA Allegation" form for substantiating delivery of the notice.

DISCIPLINE

Standard 115.76: Disciplinary sanctions for staff

115.76 (a)

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

115.76 (b)

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

115.76 (c)

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

115.76 (d)

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

Auditor Overall Compliance Determination

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

All employees are subject to disciplinary sanctions up and including termination for violating Department Regulations regarding the "Prison Rape Elimination Act" and regarding "Sexual Harassment and Unlawful Discrimination based Upon Sex". Termination is the presumptive disciplinary sanction for an employee who engages in sexual abuse.

The seriousness of the conduct is taken into account in determining the appropriate response according to the interview with the Warden. Regarding sexual harassment, "repeated" for the purpose of counseling sessions is more than three complaints. A third alleged sexual harassment complaint against a staff member requires formal counseling session with the appropriate supervisor to discuss the complaint. Serious sexual harassment complaints, even if committed once, is still addressed by the Warden or leadership designee.

Alleged inappropriate touching of a romantic nature by staff, whether wanted or unwanted, are evaluated on a case by case basis to determine if the incident is a violation of PREA. Disciplinary sanctions are commensurate with the nature and circumstances of the acts committed, the employees' disciplinary history, and the sanctions imposed for comparable offenses.

Substantiated cases of sexual abuse and/or sexual harassment are reported to local law enforcement regardless of whether the employee is terminated or resigns to avoid termination. Those employees with licensure are reported to the appropriate licensing boards.

In the past 12 months, 3 staff have violated agency policy related to sexual abuse or harassment and all 3 have departed after termination; no staff were disciplined with less than termination for violations. Two of the three staff were reported to law enforcement for these violations in the past 12 months. No contractors or volunteers were reported during this same period.

Of the 52 total allegations, 29 were determined unfounded. There were 23 criminal and/or administrative investigations of alleged sexual abuse in the last 12 months and all were followed by an incident review within 30 days.

Standard 115.77: Corrective action for contractors and volunteers

115.77 (a)

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

115.77 (b)

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

Auditor Overall Compliance Determination

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

Contractors and volunteers who engage in sexual abuse are prohibited from having contact with inmates and banned from the institution indefinitely. Violations of this policy by contractors and volunteers are reported to law enforcement and the respective licensing board. No contractors or volunteers were reported to law enforcement or licensing boards during this same period.

Standard 115.78: Disciplinary sanctions for inmates

115.78 (a)

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

115.78 (b)

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

115.78 (c)

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

115.78 (d)

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

115.78 (e)

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

115.78 (f)

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

115.78 (g)

- Does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.) Yes No NA

Auditor Overall Compliance Determination

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

Inmates found guilty pursuant to a formal disciplinary of engaging in offender-on-offender sexual abuse are written-up on a rule violation as enumerated in Disciplinary Rules and Procedures for Adult Inmates. All sexual contact between inmates is prohibited and violators will be charged with the appropriate rule #21 (a-e) violation. Sanctions are commensurate with the nature and circumstances of the abuse committed and includes the offender disciplinary history and comparable offenses by other inmates.

Inmates are disciplined for violations of rules for engaging in sexual conduct with an employee. Inmates and staff are informed that there is no consenting to sexual activity in the Department of Corrections between an employee and offender.

Mental health staff interviewed indicated that the disciplinary process takes into consideration the mental faculties of the offender who perpetrated the act when determining the sanctions. In these cases, a referral to mental health is made and the report deferred until the completion of the mental health evaluation. Reports of sexual abuse and/or sexual harassment made in good faith and based on reasonable belief that the alleged conduct occurred is not false reporting or considered lying. Decisions are based on the preponderance of evidence.

There were 6 offender-on-offender PREA allegations and all allegations were investigated. Outcomes of the 6 investigations were 4 determined unfounded and 1 unsubstantiated.

MEDICAL AND MENTAL CARE

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

115.81 (a)

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

115.81 (b)

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

115.81 (c)

- If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? Yes No

115.81 (d)

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

115.81 (e)

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

Auditor Overall Compliance Determination

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

Staff report 100% of inmates reporting a prior victimization were referred to medical or mental health. No inmates reported prior victimization or were determined to have previously perpetrated sexual abuse during screening. If the PREA screening indicates that an offender has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, or that an offender perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, mental health staff interviewed state that they ensure that the offender is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening. The Classification Department completes an Availability of Mental

Health Counseling Form upon intake for those inmates with a history of sexual victimization or who have previously perpetrated sexual abuse and this form is forwarded to the Mental Health Director for completion and placement into the Mental Health Section of the Medical Record.

Any information related to sexual victimization or abusiveness that occurred in an institutional setting is limited to treatment staff (and others only as necessary) in order to develop treatment plans and security and management decisions, including housing, bed, work, education and program assignments, or as otherwise required by Federal, State or local law. All staff interviewed were aware of the privacy standards for the offender medical and or mental health information.

Medical and mental health practitioners stated they obtain informed consent from inmates before reporting information regarding prior sexual victimization that did not occur in an institutional setting, unless the offender is under the age of 18.

Standard 115.82: Access to emergency medical and mental health services

115.82 (a)

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

115.82 (b)

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

115.82 (c)

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

115.82 (d)

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

Auditor Overall Compliance Determination

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

Policy is that inmates receive timely, unimpeded access to emergency medical treatment and crisis intervention services in accordance with the professional judgement rendered by medical and mental health practitioners. The medical staff supervisor interviewed supports this and it also appears very evident at DCI, especially with their significant number of aging inmates.

All PREA incident cards (carried by every staff member) list the preliminary steps to protect the offender victim and include the immediate notification of medical and mental health staff.

Victims of sexual abuse or sexual harassment are evaluated and treated, and also receive follow-up services that include treatment plans and referrals upon discharge.

DCI offers all victims of sexual abuse forensic medical examinations at an outside facility, without financial cost to the victim, when evidentiary or medically appropriate. Such examinations are performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) when possible. If SAFEs or SANEs cannot be made available, the examination is performed by other qualified medical practitioners. DCI documents efforts it has made to provide SAFEs and SANEs and these personnel are, in fact, normally available. The facility primarily utilizes Our Lady of the Lake for forensic exams due to their larger size and greater likelihood of a SAFE/SANE being on duty at any given time.

There were 3 instances of forensic exams last year and all were conducted at Our Lady of the Lake or Lane Memorial, none were done at the prison. Testing for sexually transmitted diseases and other diseases as determined by the attending physician and counseling are made available to the alleged victim when appropriate. Referral to MH always occurs and after-incident support is offered. Documentation of all initial emergent care and follow-up is maintained within the medical record and appropriately maintained in regard to privacy requirements.

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

115.83 (a)

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

115.83 (b)

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

115.83 (c)

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

115.83 (d)

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

115.83 (e)

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

115.83 (f)

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

115.83 (g)

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

115.83 (h)

- If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.) Yes No NA

Auditor Overall Compliance Determination

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

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

Community level of care is the DCI target performance level for medical and mental health services rendered to victims. Random and specialized staff interviewed all felt that this is achieved and likely surpassed when considering many other underserved areas of the state.

Inmates who have been victimized by sexual abuse in any prison, jail, lock-up or juvenile facility are offered medical and mental health evaluations and, as appropriate, treatment. Follow-up services and treatment plans, as well as referral for continuing care following transfer or placement in other facilities, are provided for victims. Interviews indicated care and counseling often continues for numerous months but can also continue throughout the incarceration.

Mental health evaluations are conducted on all-known offender-on-offender abusers within 60 days of learning of the abuse. DCI frequently offers a sex offender program to such inmates.

Victims of sexual abuse are offered tests for sexually transmitted infections as appropriate.

These services are at no cost to the victim regardless of whether the victim names the abuser or cooperates with any investigation.

DATA COLLECTION AND REVIEW

Standard 115.86: Sexual abuse incident reviews

115.86 (a)

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

115.86 (b)

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

115.86 (c)

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

115.86 (d)

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

115.86 (e)

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

Auditor Overall Compliance Determination

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

The prison conducts a Sexual Abuse Incident Review within 30 days of the conclusion of every sexual abuse investigation unless the allegation is determined to be unfounded. The review team includes upper management officials, (Deputy Warden, or Assistant Wardens and PREA Compliance Manager, etc.) with input from line supervisors, investigators and medical or mental health practitioners. The review team prepares a Sexual Abuse Incident Review Form that follows the elements of the Standard. The completed form is maintained in the investigative file and a copy is sent to the Warden and the PREA Compliance Manager.

The review team members interviewed all agreed that the review considers the following:

- A need to change policy or practice to better prevent, detect, or respond to sexual abuse;
- Was the abuse motivated by race, ethnicity, gender identity, lesbian, gay, bisexual, transgender, or intersex identification status or the perceived status;
- An examination of the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse;
- Adequacy of staffing levels in the area;
- Considers whether monitoring technology should be deployed or augmented;
- A report of the findings is submitted to the Warden.

Recommendations for improvement that are in the Warden's control are considered and normally implemented. Documentation is provided if a recommendation from the Incident Review team is not implemented.

Of the 52 total allegations, 29 were determined unfounded. There were 23 criminal and/or administrative investigations of alleged sexual abuse in the last 12 months and all were followed by an incident review within 30 days. The investigations department determines whether there is any substantiation or foundation to the charges. There were 6 offender-on-offender PREA allegations and all allegations were investigated. Outcomes of the 6 investigations were: 5 unfounded and 1 unsubstantiated. During a review of files, all incident reviews were present and completed fully.

Standard 115.87: Data collection

115.87 (a)

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

115.87 (b)

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

115.87 (c)

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

115.87 (d)

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

115.87 (e)

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

115.87 (f)

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

Auditor Overall Compliance Determination

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

The LA DPS&C monitoring instrument is used to collect and track uniform data of sexual abuse at facilities. This incident-based data instrument includes all the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice's Bureau of Justice Statistics. An aggregated assessment is made of the data annually and included in a compiled report by the PREA Coordinator for placement on the DOC website, and the PREA Coordinator and PCM interviews state that this is the procedure that is followed.

DPS&C Procedures for Reporting to the United States Department of Justice:

- DPS&C's HQ-level PREA Investigator prepares the annual Survey of Sexual Victimization (SSV Report) for State Prison Systems report, containing required statistics for DPS&C owned and operated facilities.
- A separate Incident Form is prepared for each substantiated sexual victimization allegation reported at a Department facility and is created by the PREA Investigator at the facility where the incident occurred.
- These forms are submitted by the PREA Investigator to the United States Department of Justice by September 1st of each year for the statistics accumulated the prior calendar year.
- A second report is completed by DPS&C's PREA Investigator which includes all privately-operated prisons and transitional work programs under contract to or under cooperative endeavor agreement with the DPS&C.
- The Department's PREA Investigator maintains any reports concerning a substantiated sexual victimization allegation occurring at all state privately operated prisons and all transitional work programs under contract or cooperative agreement with the DPS&C.
- The Department's PREA Investigator submits copies of both SSV reports to the Secretary

and the Chief of Operations prior to September 1st of each year.

- The aggregate numbers of the SSV reports' statistics from the state facilities, privately operated prison facilities and transitional work programs are posted on DPS&C's website by October 1st of each year.
- The Department maintains sexual abuse data collected pursuant to La. R.S. 115.87 for at least 10 years after the date of initial collection.

Standard 115.88: Data review for corrective action

115.88 (a)

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

115.88 (b)

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

115.88 (c)

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

115.88 (d)

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

Auditor Overall Compliance Determination

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

Reviews of all data collected are used to assess and improve the effectiveness of sexual abuse prevention, detection, and response policies, practices, and training, including identifying problem areas in DPS&C. DCI's annual report contains statistics for the fiscal reporting year and can be compared to the previous year data.

Investigations (both criminal and administrative) review all details, including what staff actions or inactions may have led to the sexual abuse and/or sexual harassment, and these are reviewed at each successive level per DOC policy. Investigative reports are compiled in accordance with DPS&C's Standardized Case Report Format, which includes descriptions of physical and testimonial evidence as well as the reasoning behind credibility assessments and findings.

The Warden and PCM stated that the Warden approves the Annual Reports and submits them to the parent agency (DPS&C). Review of this data is accomplished at each level for analysis, determining trends or needs, etc.

For annual reporting purposes redaction is not needed as it (the report) only contains statistical data and does not make reference to any individual(s).

Standard 115.89: Data storage, publication, and destruction

115.89 (a)

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

115.89 (b)

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

115.89 (c)

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

115.89 (d)

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

Auditor Overall Compliance Determination

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

DPS&C's PREA Coordinator makes an annual report regarding all sexual abuse data from DPS&C facilities available to the public through DPS&C's website www.doc.la.gov. The report consists of numbers only and does not include personal identifiers or specific institutions. DCI provides its data to the PREA Coordinator. All reports are available through public records request via the la.gov website.

All data is securely preserved and retained in accordance with the procedures outlined in 115.87. In accordance with Department Regulations regarding the Records Management Program, Investigative Reports are retained as Active plus six years.

Investigations (both criminal and administrative) review all details including what staff actions or inactions may have led to the sexual abuse and/or sexual harassment, and these are later reviewed for potential changes to policy or operations. Investigative reports are compiled in accordance with DPS&C Standardized Case Report Format, which includes descriptions of the physical evidence and testimonial evidence as well as the reasoning behind credibility assessments and facts and findings.

Cases sent for criminal prosecution are maintained as long as the alleged abuser is incarcerated or the employee is still employed, plus five years. The release of the accused abuser (offender or staff) does not constitute grounds for termination of the investigation.

The PREA Coordinator and investigator report that unsubstantiated or unfounded claims are maintained in accordance with the Department Records Management Program, which require the active year plus 6 years be archived.

AUDITING AND CORRECTIVE ACTION

Standard 115.401: Frequency and scope of audits

115.401 (a)

- During the three-year period starting on August 20, 2013, and during each three-year period thereafter, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (N/A before August 20, 2016.) Yes No NA

115.401 (b)

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

115.401 (h)

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

115.401 (i)

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

115.401 (m)

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

115.401 (n)

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

Auditor Overall Compliance Determination

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

The Warden, PREA Compliance manager and staff were extremely supportive and made all efforts to ensure full access and ease of audit operation for the auditors, both before and after the site visit and during the time at the prison. Timely access to all supporting documentation requested was provided as well as escort to any areas requested.

Standard 115.403: Audit contents and findings

115.403 (f)

- The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports within 90 days of issuance by auditor. The review period is for prior audits completed during the past three years PRECEDING THIS AGENCY AUDIT. In the case of single facility agencies, the auditor shall ensure that the facility's last audit report was published. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or in the case of single facility agencies that there has never been a Final Audit Report issued.) Yes No NA

Auditor Overall Compliance Determination

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

The LA DPS&C PREA Coordinator publishes all required reporting data and makes an annual report regarding all sexual abuse data from DPS&C facilities available to the public through DPS&C's website www.doc.la.gov

AUDITOR CERTIFICATION

I certify that:

- The contents of this report are accurate to the best of my knowledge.
- No conflict of interest exists with respect to my ability to conduct an audit of the agency under review, and

- I have not included in the final report any personally identifiable information (PII) about any inmate or staff member, except where the names of administrative personnel are specifically requested in the report template.

William E Peck
Auditor Signature

December 3, 2018
Date