

# PREA Facility Audit Report: Final

**Name of Facility:** Manson Youth Institution - PAQ REVIEW ONLY

**Facility Type:** Prison / Jail

**Date Interim Report Submitted:** 06/28/2024

**Date Final Report Submitted:** 02/05/2025

## Auditor Certification

The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input type="checkbox"/>
<b>Auditor Full Name as Signed:</b> Sonya Love	<b>Date of Signature:</b> 02/05/2025

## AUDITOR INFORMATION

<b>Auditor name:</b>	Love, Sonya
<b>Email:</b>	sonya.love57@outlook.com
<b>Start Date of On-Site Audit:</b>	03/25/2024
<b>End Date of On-Site Audit:</b>	03/27/2024

## FACILITY INFORMATION

<b>Facility name:</b>	Manson Youth Institution - PAQ REVIEW ONLY
<b>Facility physical address:</b>	42 Jarvis Street, Cheshire, Connecticut - 06410
<b>Facility mailing address:</b>	

## Primary Contact

<b>Name:</b>	Sammy Otero
<b>Email Address:</b>	Sammy.Otero@ct.gov
<b>Telephone Number:</b>	860-205-7467

### **Warden/Jail Administrator/Sheriff/Director**

<b>Name:</b>	Michael Pierce
<b>Email Address:</b>	michael.pierce@ct.gov
<b>Telephone Number:</b>	2038062502

### **Facility PREA Compliance Manager**

<b>Name:</b>	
<b>Email Address:</b>	
<b>Telephone Number:</b>	

### **Facility Health Service Administrator On-site**

<b>Name:</b>	Kirsten Shea
<b>Email Address:</b>	Kirsten.Shea@ct.gov
<b>Telephone Number:</b>	860-692-6277

### **Facility Characteristics**

<b>Designed facility capacity:</b>	713
<b>Current population of facility:</b>	308
<b>Average daily population for the past 12 months:</b>	309
<b>Has the facility been over capacity at any point in the past 12 months?</b>	No
<b>What is the facility's population designation?</b>	Mens/boys

<b>Which population(s) does the facility hold? Select all that apply (Nonbinary describes a person who does not identify exclusively as a boy/man or a girl/woman. Some people also use this term to describe their gender expression. For definitions of "intersex" and "transgender," please see <a href="https://www.prearesourcecenter.org/standard/115-5">https://www.prearesourcecenter.org/standard/115-5</a>)</b>	
<b>Age range of population:</b>	15-21 years old
<b>Facility security levels/inmate custody levels:</b>	1=19,2=13,3=46,4=220 on 2/1/2024
<b>Does the facility hold youthful inmates?</b>	Yes
<b>Number of staff currently employed at the facility who may have contact with inmates:</b>	332
<b>Number of individual contractors who have contact with inmates, currently authorized to enter the facility:</b>	0
<b>Number of volunteers who have contact with inmates, currently authorized to enter the facility:</b>	84

<b>AGENCY INFORMATION</b>	
<b>Name of agency:</b>	Connecticut Department of Correction
<b>Governing authority or parent agency (if applicable):</b>	
<b>Physical Address:</b>	24 Wolcott Hill Road , Wethersfield, Connecticut - 06109
<b>Mailing Address:</b>	
<b>Telephone number:</b>	

<b>Agency Chief Executive Officer Information:</b>	
<b>Name:</b>	

<b>Email Address:</b>	
<b>Telephone Number:</b>	

## Agency-Wide PREA Coordinator Information

<b>Name:</b>	David McNeil	<b>Email Address:</b>	David.mcneil@ct.gov
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## Facility AUDIT FINDINGS

### Summary of Audit Findings

The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.

Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.

#### Number of standards exceeded:

0

#### Number of standards met:

45

#### Number of standards not met:

0

## POST-AUDIT REPORTING INFORMATION

### GENERAL AUDIT INFORMATION

#### On-site Audit Dates

<b>1. Start date of the onsite portion of the audit:</b>	2024-03-25
<b>2. End date of the onsite portion of the audit:</b>	2024-03-27

#### Outreach

<b>10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>a. Identify the community-based organization(s) or victim advocates with whom you communicated:</b>	The Alliance

### AUDITED FACILITY INFORMATION

<b>14. Designated facility capacity:</b>	713
<b>15. Average daily population for the past 12 months:</b>	309
<b>16. Number of inmate/resident/detainee housing units:</b>	11
<b>17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

**Audited Facility Population Characteristics on Day One of the Onsite Portion of the Audit**

**Inmates/Residents/Detainees Population Characteristics on Day One of the Onsite Portion of the Audit**

<b>18. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:</b>	297
<b>19. Enter the total number of youthful inmates or youthful/juvenile detainees in the facility as of the first day of the onsite portion of the audit:</b>	52
<b>20. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:</b>	4
<b>21. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:</b>	1
<b>22. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>23. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>24. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:</b>	0

<p><b>25. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:</b></p>	1
<p><b>26. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:</b></p>	0
<p><b>27. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:</b></p>	0
<p><b>28. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:</b></p>	0
<p><b>29. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:</b></p>	0
<p><b>30. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):</b></p>	No text provided.
<p><b>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</b></p>	
<p><b>31. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:</b></p>	332

<p><b>32. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</b></p>	84
<p><b>33. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</b></p>	12
<p><b>34. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:</b></p>	No text provided.
<h2>INTERVIEWS</h2>	
<h3>Inmate/Resident/Detainee Interviews</h3>	
<h4>Random Inmate/Resident/Detainee Interviews</h4>	
<p><b>35. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:</b></p>	12
<p><b>36. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</b></p>	<p><input checked="" type="checkbox"/> Age</p> <p><input checked="" type="checkbox"/> Race</p> <p><input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic)</p> <p><input checked="" type="checkbox"/> Length of time in the facility</p> <p><input checked="" type="checkbox"/> Housing assignment</p> <p><input checked="" type="checkbox"/> Gender</p> <p><input type="checkbox"/> Other</p> <p><input type="checkbox"/> None</p>

<p><b>37. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</b></p>	<p>Random samples were identified by housing unit, gender identity, age, race and other factors.</p>
<p><b>38. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</b></p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
<p><b>39. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</b></p>	<p>No text provided.</p>
<p><b>Targeted Inmate/Resident/Detainee Interviews</b></p>	
<p><b>40. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</b></p>	<p>17</p>
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	
<p><b>41. Enter the total number of interviews conducted with youthful inmates or youthful/juvenile detainees using the "Youthful Inmates" protocol:</b></p>	<p>2</p>
<p><b>42. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:</b></p>	<p>4</p>

<p><b>43. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:</b></p>	<p>0</p>
<p><b>43. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p><b>43. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p>	<p>Discussed targeted groups with medical and mental health practitioners and the PCM.</p>
<p><b>44. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:</b></p>	<p>0</p>
<p><b>44. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>

<p><b>44. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p>	<p>Discussed targeted groups with medical and mental health practitioners and the PCM.</p>
<p><b>45. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</b></p>	<p>0</p>
<p><b>45. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p><b>45. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p>	<p>Discussed targeted groups with medical and mental health practitioners and the PCM.</p>
<p><b>46. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</b></p>	<p>0</p>
<p><b>46. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>

<p><b>46. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p>	<p>Interview 8 inmates who were identified as LEP. They inmates sampled were bilingual and spoke and understood both English and Spanish.</p>
<p><b>47. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</b></p>	<p>1</p>
<p><b>48. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</b></p>	<p>0</p>
<p><b>48. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p><b>48. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p>	<p>Discussed targeted groups with medical and mental health practitioners and the PCM.</p>
<p><b>49. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</b></p>	<p>0</p>

<p><b>49. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p><b>49. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p>	<p>Consulted with the PCM to determine if this population exists in the audited facility.</p>
<p><b>50. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</b></p>	<p>2</p>
<p><b>51. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:</b></p>	<p>0</p>
<p><b>51. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>

<p><b>51. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p>	<p>Consulted with the PCM to determine if this population exists in the audited facility. The facility tour included segregation. Informal conversations with inmates confirmed zero were placed in segregation to protect them from retaliation or sexual victimization.</p>
<p><b>52. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</b></p>	<p>Manson holds youthful inmates in segregated housing out of sight and sound of adult inmates over the age of 21. Inmates 17 and under are housed separately from inmates 18-21.</p>

## Staff, Volunteer, and Contractor Interviews

### Random Staff Interviews

<p><b>53. Enter the total number of RANDOM STAFF who were interviewed:</b></p>	<p>14</p>
<p><b>54. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</b></p>	<p><input checked="" type="checkbox"/> Length of tenure in the facility  <input checked="" type="checkbox"/> Shift assignment  <input checked="" type="checkbox"/> Work assignment  <input checked="" type="checkbox"/> Rank (or equivalent)  <input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken)  <input type="checkbox"/> None</p>
<p><b>55. Were you able to conduct the minimum number of RANDOM STAFF interviews?</b></p>	<p><input checked="" type="radio"/> Yes  <input type="radio"/> No</p>
<p><b>56. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</b></p>	<p>No text provided.</p>

### **Specialized Staff, Volunteers, and Contractor Interviews**

Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.

<b>57. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):</b>	15
<b>58. Were you able to interview the Agency Head?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No
<b>58. Explain why it was not possible to interview the Agency Head:</b>	The agency designated the PREA Coordinator for the interview.
<b>59. Were you able to interview the Warden/Facility Director/Superintendent or their designee?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>60. Were you able to interview the PREA Coordinator?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>61. Were you able to interview the PREA Compliance Manager?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

**62. Select which SPECIALIZED STAFF roles were interviewed as part of this audit from the list below: (select all that apply)**

- Agency contract administrator
- Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment
- Line staff who supervise youthful inmates (if applicable)
- Education and program staff who work with youthful inmates (if applicable)
- Medical staff
- Mental health staff
- Non-medical staff involved in cross-gender strip or visual searches
- Administrative (human resources) staff
- Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff
- Investigative staff responsible for conducting administrative investigations
- Investigative staff responsible for conducting criminal investigations
- Staff who perform screening for risk of victimization and abusiveness
- Staff who supervise inmates in segregated housing/residents in isolation
- Staff on the sexual abuse incident review team
- Designated staff member charged with monitoring retaliation
- First responders, both security and non-security staff
- Intake staff

	<input type="checkbox"/> Other
<b>63. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No
<b>64. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>64. Enter the total number of CONTRACTORS who were interviewed:</b>	2
<b>64. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)</b>	<input type="checkbox"/> Security/detention <input checked="" type="checkbox"/> Education/programming <input checked="" type="checkbox"/> Medical/dental <input type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input type="checkbox"/> Other
<b>65. Provide any additional comments regarding selecting or interviewing specialized staff.</b>	No text provided.

## SITE REVIEW AND DOCUMENTATION SAMPLING

### Site Review

PREA Standard 115.401 (h) states, "The auditor shall have access to, and shall observe, all areas of the audited facilities." In order to meet the requirements in this Standard, the site review portion of the onsite audit must include a thorough examination of the entire facility. The site review is not a casual tour of the facility. It is an active, inquiring process that includes talking with staff and inmates to determine whether, and the extent to which, the audited facility's practices demonstrate compliance with the Standards. Note: As you are conducting the site review, you must document your tests of critical functions, important information gathered through observations, and any issues identified with facility practices. The information you collect through the site review is a crucial part of the evidence you will analyze as part of your compliance determinations and will be needed to complete your audit report, including the Post-Audit Reporting Information.

<b>66. Did you have access to all areas of the facility?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>Was the site review an active, inquiring process that included the following:</b>	
<b>67. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>68. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>69. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>70. Informal conversations with staff during the site review (encouraged, not required)?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No

<p><b>71. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).</b></p>	<p>No text provided.</p>
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### **Documentation Sampling**

Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.

<p><b>72. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?</b></p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
<p><b>73. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).</b></p>	<p>No text provided.</p>

## **SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY**

### **Sexual Abuse and Sexual Harassment Allegations and Investigations Overview**

Remember the number of allegations should be based on a review of all sources of allegations (e.g., hotline, third-party, grievances) and should not be based solely on the number of investigations conducted. Note: For question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, or detainee sexual abuse allegations and investigations, as applicable to the facility type being audited.

**74. Total number of SEXUAL ABUSE allegations and investigations overview during the 12 months preceding the audit, by incident type:**

	<b># of sexual abuse allegations</b>	<b># of criminal investigations</b>	<b># of administrative investigations</b>	<b># of allegations that had both criminal and administrative investigations</b>
<b>Inmate-on-inmate sexual abuse</b>	1	0	1	0
<b>Staff-on-inmate sexual abuse</b>	1	0	1	0
<b>Total</b>	2	0	2	0

**75. Total number of SEXUAL HARASSMENT allegations and investigations overview during the 12 months preceding the audit, by incident type:**

	<b># of sexual harassment allegations</b>	<b># of criminal investigations</b>	<b># of administrative investigations</b>	<b># of allegations that had both criminal and administrative investigations</b>
<b>Inmate-on-inmate sexual harassment</b>	0	0	0	0
<b>Staff-on-inmate sexual harassment</b>	0	0	0	0
<b>Total</b>	0	0	0	0

## Sexual Abuse and Sexual Harassment Investigation Outcomes

### Sexual Abuse Investigation Outcomes

Note: these counts should reflect where the investigation is currently (i.e., if a criminal investigation was referred for prosecution and resulted in a conviction, that investigation outcome should only appear in the count for "convicted.") Do not double count. Additionally, for question brevity, we use the term "inmate" in the following questions. Auditors should provide information on inmate, resident, and detainee sexual abuse investigation files, as applicable to the facility type being audited.

#### 76. Criminal SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
<b>Inmate-on-inmate sexual abuse</b>	0	0	0	0	0
<b>Staff-on-inmate sexual abuse</b>	0	0	0	0	0
<b>Total</b>	0	0	0	0	0

#### 77. Administrative SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:

	Ongoing	Unfounded	Unsubstantiated	Substantiated
<b>Inmate-on-inmate sexual abuse</b>	0	0	1	0
<b>Staff-on-inmate sexual abuse</b>	0	1	0	0
<b>Total</b>	0	1	1	0

### Sexual Harassment Investigation Outcomes

Note: these counts should reflect where the investigation is currently. Do not double count. Additionally, for question brevity, we use the term "inmate" in the following questions. Auditors should provide information on inmate, resident, and detainee sexual harassment investigation files, as applicable to the facility type being audited.

**78. Criminal SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:**

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
<b>Inmate-on-inmate sexual harassment</b>	0	0	0	0	0
<b>Staff-on-inmate sexual harassment</b>	0	0	0	0	0
<b>Total</b>	0	0	0	0	0

**79. Administrative SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:**

	Ongoing	Unfounded	Unsubstantiated	Substantiated
<b>Inmate-on-inmate sexual harassment</b>	0	0	0	0
<b>Staff-on-inmate sexual harassment</b>	0	0	0	0
<b>Total</b>	0	0	0	0

**Sexual Abuse and Sexual Harassment Investigation Files Selected for Review**

**Sexual Abuse Investigation Files Selected for Review**

**80. Enter the total number of SEXUAL ABUSE investigation files reviewed/ sampled:**

2

<p><b>81. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</b></p>	<p><input type="radio"/> Yes  <input type="radio"/> No  <input checked="" type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)</p>
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#### Inmate-on-inmate sexual abuse investigation files

<p><b>82. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b></p>	<p>2</p>
<p><b>83. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</b></p>	<p><input type="radio"/> Yes  <input checked="" type="radio"/> No  <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p><b>84. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</b></p>	<p><input checked="" type="radio"/> Yes  <input type="radio"/> No  <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>

#### Staff-on-inmate sexual abuse investigation files

<p><b>85. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b></p>	<p>1</p>
<p><b>86. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</b></p>	<p><input type="radio"/> Yes  <input checked="" type="radio"/> No  <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>

<p><b>87. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</b></p>	<p><input checked="" type="radio"/> Yes  <input type="radio"/> No  <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>
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#### **Sexual Harassment Investigation Files Selected for Review**

<p><b>88. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</b></p>	<p>0</p>
<p><b>88. Explain why you were unable to review any sexual harassment investigation files:</b></p>	<p>None during this reporting period.</p>
<p><b>89. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</b></p>	<p><input type="radio"/> Yes  <input type="radio"/> No  <input checked="" type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)</p>

#### **Inmate-on-inmate sexual harassment investigation files**

<p><b>90. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</b></p>	<p>0</p>
<p><b>91. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</b></p>	<p><input type="radio"/> Yes  <input checked="" type="radio"/> No  <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>

<p><b>92. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</b></p>	<p><input type="radio"/> Yes  <input checked="" type="radio"/> No  <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
<p><b>Staff-on-inmate sexual harassment investigation files</b></p>	
<p><b>93. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</b></p>	<p>0</p>
<p><b>94. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?</b></p>	<p><input type="radio"/> Yes  <input checked="" type="radio"/> No  <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</p>
<p><b>95. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</b></p>	<p><input type="radio"/> Yes  <input checked="" type="radio"/> No  <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</p>
<p><b>96. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.</b></p>	<p>No text provided.</p>

## SUPPORT STAFF INFORMATION

### DOJ-certified PREA Auditors Support Staff

**97. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.**

Yes

No

### Non-certified Support Staff

**98. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.**

Yes

No

**98. Enter the TOTAL NUMBER OF NON-CERTIFIED SUPPORT who provided assistance at any point during this audit:**

2

## AUDITING ARRANGEMENTS AND COMPENSATION

### 99. Who paid you to conduct this audit?

The audited facility or its parent agency

My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)

A third-party auditing entity (e.g., accreditation body, consulting firm)

Other

## Standards

### Auditor Overall Determination Definitions

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

### Auditor Discussion Instructions

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

<b>115.11</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.11 (a): The agency shall have a written policy mandating zero tolerance toward sexual abuse and sexual harassment and outlining the agency's approach to preventing, detecting, and responding to such conduct.</p> <p>By examination, this Auditor determined that the Connecticut Department of Corrections has a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment and outlining the agency's approach to preventing, detecting, and responding to such conduct. (See Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention). The agency/facility has a policy outlining how it will implement the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment.</p> <p>115.11 (b): The agency shall employ or designate an upper-level, agency-wide PREA coordinator with sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities.</p> <p>Through a thorough examination, this Auditor has determined that the Connecticut</p>

Department of Corrections has a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment. The agency also employs or designates an upper-level, agency-wide PREA coordinator. With sufficient time and authority, this individual is dedicated to developing, implementing, and overseeing agency efforts to comply with the PREA standards in all its facilities. This Auditor had the opportunity to interview the agency's PREA Coordinator and director of the agency's PREA Unit, who confirmed the coordinator's commitment and capabilities. (See Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention).

115.11 (c): Where an agency operates more than one facility, each facility shall designate a PREA compliance manager with sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards.

During a review of the agency CDOC's website, this Auditor determined that CDOC operates multiple facilities. According to the PREA Coordinator, each facility has a designated PREA Compliance Manager (PCM). By reviewing archival PREA final reports, this Auditor also confirmed that during the respective reporting periods, CDOC has PCMs assigned to each facility following this substandard. Moreover, during this audit, the Auditor interviewed the PCM for Manson. He confirmed having sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards.

**Evidence relied upon:**

1. PAQ
2. Interview with the PREA Coordinator
3. Interview with the PREA Compliance Manager
4. Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention
5. CDOC, Family and Friends Handbook, dated June 26, 2013, Employee PREA Training Curriculum and Sign-in sheets
6. CDOC, Inmate Handbook,
7. CDOC Organizational Chart,
8. CDOC Institutional Organizational Chart

**Conclusion:**

The narrative above includes a comprehensive discussion of all the evidence used to determine compliance or non-compliance, the Auditor's analysis and reasoning, and the Auditor's conclusions.

<b>115.12</b>	<b>Contracting with other entities for the confinement of inmates</b>
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	<b>Auditor Overall Determination:</b> Meets Standard
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	<b>Auditor Discussion</b>
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115.12 (a): A public agency that contracts for the confinement of its inmates with private agencies or other entities, including other government agencies, shall include in any new contract or contract renewal the entity's obligation to adopt and comply with the PREA standards.

115.12 (a)-1 The agency has entered into or renewed a contract for the confinement of inmates on or after August 20, 2012, or since the last PREA audit, whichever is later. Yes.

State of Connecticut, Department of Corrections, Parole and Community Services, Residential Provider Manual (effective 07/2023) pages 1-61.

State of Connecticut, Department of Corrections, Parole and Community Services, Residential Provider Manual, Section Prison Rape Elimination Act Policy (effective 07/2023) pages 17-18.

Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, the Community Confinement Provider Manual indicates that it is the responsibility of the CDOC to ensure that any new contract or contract renewal includes the entity's obligation to adopt and comply with the PREA standards. A review of archival final PREA reports includes community facilities under contract with the CDOC, such as Community Connections. Reviewing final reports posted on the CDOC website demonstrates CDOC's commitment to enforcing these standards in its contracts with private agencies and contract renewals, including the confinement of its contracting entity's obligation to adopt and comply with the PREA standards. During an interview with the agency contract administrator, she confirmed the agency's compliance with all guidelines outlined in Standard 115.12.

115.12 (a)-2 All of the above contracts require contractors to adopt and comply with PREA standards. Yes.

115.12 (a)-3 The number of contracts for the confinement of inmates that the agency entered into or renewed with private entities or other government agencies on or after August 20, 2012, or since the last PREA audit, whichever is later: 14.

115.12 (a)-4 The number of above contracts that DID NOT require contractors to adopt and comply with PREA standards: 0.

115.12 (b): Any new contract or contract renewal shall provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards.

115.12 (b)-1 All of the above contracts require the agency to monitor the contractor's compliance with PREA standards. Yes

State of Connecticut, Department of Corrections, Parole and Community Services, Residential Provider Manual, Section Reports to CTDOC Policy (effective 07/2023) pages 11-13.

State of Connecticut, Department of Corrections, Parole and Community Services, Residential Provider Manual, Section Prison Rape Elimination Act Policy (effective 07/

2023) pages 17-18.

A review of archival final PREA reports includes community facilities under contract with the CDOC, such as Community Connections. The final reports posted on the CDOC website demonstrate CDOC's commitment to enforcing these standards in its contracts with private agencies and contract renewals, including the confinement of the contracting entity's obligation to adopt and comply with the PREA standards. During an interview with the agency contract administrator, she confirmed the agency's compliance with all guidelines outlined in Standard 115.12.

**Evidence relied upon:**

1. PAQ
2. Interview with the Contract Administrator
3. Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention (effective 11/02/2014) pages 1-19
4. State of Connecticut, Department of Corrections, Parole and Community Services, Residential Provider Manual, Section Reports to CTDOC Policy (effective 07/2023) pages 11-13.
5. State of Connecticut, Department of Corrections, Parole and Community Services, Residential Provider Manual, Section Prison Rape Elimination Act Policy (effective 07/2023) pages 17-18.
6. Contract examination, The Connection's.

**Conclusion:**

1. The narrative above includes a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the Auditor's analysis and reasoning, and the Auditor's conclusions.

<b>115.13 Supervision and monitoring</b>	
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	115.13 (a): The agency shall ensure that each facility it operates shall develop, document, and make its best efforts to comply regularly with a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring to protect inmates against sexual abuse. In calculating adequate staffing levels and determining the need for video monitoring, facilities shall take into consideration: (1) Generally accepted detention and correctional practices; (2) Any judicial findings of inadequacy; (3) Any findings of inadequacy from Federal investigative agencies; (4)

Any findings of inadequacy from internal or external oversight bodies; (5) All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated); (6) The composition of the inmate 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; and (11) Any other relevant factors.

115.13 (a)-1 The agency requires each facility to develop, document, and make its best efforts to regularly comply with a staffing plan that provides for adequate staffing and, where applicable, video monitoring to protect inmates against abuse. Yes.

According to Connecticut Department of Corrections (CDOC) Administrative Directive 2.15 Hazardous Duty Staff, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, and Manson Youth Institution Post Plan, CDOC ensures by directive that each facility it operates shall develop, document, and make its best efforts to comply regularly with a staffing plan that provides for adequate levels of staffing, and, where applicable, video monitoring, to protect inmates against sexual abuse. In calculating adequate staffing levels and determining the need for video monitoring, facilities shall take into consideration: (1) Generally accepted detention and correctional practices; (2) Any judicial findings of inadequacy; (3) Any findings of inadequacy from Federal investigative agencies; (4) Any findings of inadequacy from internal or external oversight bodies; (5) All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated); (6) The composition of the inmate 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; and (11) Any other relevant factors.

According to the Connecticut Department of Corrections (CDOC) Administrative Directive 6.12, Section 4, Staffing, indicates that the agency PREA Coordinator shall assist in the development and documentation of a staffing plan that provides for adequate levels of staffing in all facilities and, where applicable, video monitoring to protect inmates against sexual abuse. Each facility must document and justify all deviations from the staffing plan. Whenever necessary, but at least once a year for each facility, the agency PREA Coordinator shall, in consultation with others in the agency, assess, determine, and document whether adjustments are needed to the staffing plan, video, and other monitoring technology, and the resources the facility has available to adhere to the staffing plan.

The Auditor observed shift staff and contractors during the facility-wide tour (e.g., living units, medical, mental health, visitation, kitchen, and segregation) to determine whether sufficient staffing was provided, as indicated in the Manson staffing plan of 35-39-19. Per the staffing plan, 93 correctional staff posts were assigned to work directly with inmates throughout the facility. Further, during the same facility tour, this Auditor observed a minimum of 1:8 ratio of inmates to staff. In some locations, the ratio exceeded 1:8. By observation; this Auditor confirmed that during the onsite

portion of this audit, Manson was staffed according to the staffing plan outlined, reviewed, and approved by the PREA Coordinator. Zero volunteers were observed. Contractors were observed working in the clinic, food service, and mental health department. This Auditor observed demarcation zones where inmates were not allowed to cross, such as unit control rooms, reception desks, and some offices located in the medical (e.g., file room). Manson will provide staffing reports for the days requested by the Auditor. The Auditor will review and compare staffing against the approved staffing plan approved by the PREA Coordinator.

115.13 (a)-2 Since August 20, 2012, or the last PREA audit, whichever is later, the average daily number of inmates is 319.

115.13 (a)-3 Since August 20, 2012, or last PREA audit, whichever is later, the average daily number of inmates on which the staffing plan was predicated was 319.

During an interview with the PCM, the PCM confirmed that when assessing adequate staffing levels and the need for video monitoring, please explain if and how the facility staffing plan considers each criterion as outlined in this standard, such as :

- Generally accepted detention and correctional practices
- Any judicial findings of inadequacy;
- Any findings of inadequacy from federal investigative agencies;
- Any findings of inadequacy from internal or external oversight bodies,
- All components of the facility's physical plant (including "blind spots" or areas where staff or inmates may be isolated);
- The composition of the inmate population;
- The number and placement of supervisory staff;
- Institution programs occurring on a particular shift;
- Any applicable state or local laws, regulations, or standards
- The prevalence of substantiated and unsubstantiated incidents of sexual abuse
- Any other relevant factors

During an interview with the Warden or designee, he confirmed that when assessing adequate staffing levels and the need for video monitoring, please explain if and how the facility staffing plan considers each criterion as outlined in this standard.

**115.13 (b): When the staffing plan is not complied with, the facility documents and justifies all deviations from the plan.**

115.13 (b)-1 Each time the staffing plan is not complied with, the facility documents and justifies all deviations from the staffing plan. Yes.

The PCM confirmed and, according to the Connecticut Department of Corrections (CDOC) Administrative Directive 6.12, Section 4, Staffing, the agency PREA Coordinator shall assist in the development and documentation of a staffing plan that provides for adequate levels of staffing in all facilities and, where applicable, video monitoring to protect inmates against sexual abuse. Each facility must document and

justify all deviations from the staffing plan. More, informal conversations with custody staff indicated that Manson when understaffed, is employed overtime or post closures to compensate for the shortage.

115.13 (b)-2 If documented, the six most common reasons for deviating from the staffing plan in the past 12 months are vacancies, vacation, and leave.

According to shutdown orders provided by Manson, the facility deviated from the staffing plan on the following days: 1/3/24, 1/4-5/24, 1/5/24, 1/11/24, 1/7/24, 1/16/24, 4/10 /24, 5/13/23, 6/14/23, 8 /15/23, 12/20/23, and 12/21/23. The facility documented and justified all deviations from the staffing plan.

During an interview with the Warden or designee, he confirmed that when assessing adequate staffing levels and the need for video monitoring, please explain if and how the facility staffing plan considers each criterion as outlined in this standard.

115.13 (c): Whenever necessary, but no less frequently than once each year, for each facility the agency operates, in consultation with the PREA coordinator required by § 115.11, the agency shall assess, determine, and document whether adjustments are needed to: (1) The staffing plan established under paragraph (a) of this section; (2) The facility's deployment of video monitoring systems and other monitoring technologies; and (3) The resources the facility has available to commit to ensure adherence to the staffing plan.

115.13 (c)-1 At least once every year, the facility/agency, in collaboration with the PREA Coordinator, reviews the staffing plan to see whether adjustments are needed to (a) the staffing plan, (b) the deployment of monitoring technology, or (c) the allocation of facility/agency resources to commit to the staffing plan to ensure compliance with the staffing plan. Yes.

According to the CDOC PREA Unit meeting minutes with the Manson Warden, Deputy Warden, PREA Coordinator, and Captain of the PREA Unit in attendance, the staffing plan was on the agenda. Problematic, the details of the meeting were omitted as evidence. The minutes from the Mason PREA meeting, where the staffing plan was discussed, were quite general. It would be beneficial to have more specific details included. This substandard requires corrective action.

115.13 (d): Each facility agency shall implement 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. Such policy and practice shall be implemented for night and day shifts. Each agency shall have a policy to prohibit staff from alerting other staff members that these supervisory rounds are occurring unless such announcement is related to the legitimate operational functions of the facility.

115.13 (d)-1 The facility requires that intermediate-level or higher-level staff conduct unannounced rounds to identify and deter staff sexual abuse and sexual harassment. Yes.

Connecticut Department of Corrections (CDOC) Administrative Directive 6.12, Inmate Sexual Abuse/ Sexual Harassment Prevention and Intervention (effective 08/01/2023)  
Connecticut Department of Corrections (CDOC) Administrative Directive 2.15 Hazardous Duty Staff (effective 02/23/2018)  
Connecticut Department of Corrections (CDOC) Administrative Directive 1.9 Emergency Staffing Policy (effective 11/01/2022)  
Connecticut Department of Corrections (CDOC) Administrative Directive 1.9 Emergency Staffing Policy (effective 11/01/2022), Manson Post Shutdown Worksheet (effective 04/27/23)  
Connecticut Department of Corrections (CDOC) Administrative Directive, 6.1 Tours and Inspection (effective 08/01/2023)  
Connecticut Department of Corrections (CDOC) Administrative Directive, 6.2 Post Orders and Logs (effective 09/09/23)

According to the Connecticut Department of Corrections (CDOC) Administrative Directive 6.12, Sections 4 and 13, mandate that each facility agency shall implement 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. The same policy and practice are mandated for implementation for all shifts. Each agency shall have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring unless such announcement is related to the facility's legitimate operational functions. Interviews with intermediate or higher-level supervisors confirmed their understanding that by the policy, they are mandated to conduct unannounced and document unannounced rounds on all shifts. Random interviews with correctional staff confirmed their understanding not to alert other staff that a supervisor is conducting unannounced rounds. (Also see Connecticut Department of Correction, Administrative Directive Manson Post Plans and sample logbook entries).

115.13 (d)-2 If YES, the facility documents unannounced rounds. Yes.

Evidence was omitted during the initial review.

115.13 (d)-4 The facility prohibits staff from alerting other staff of the conduct of such rounds: Yes.

Connecticut Department of Corrections (CDOC) Administrative Directive, 6.1 Tours and Inspection, Section 4., General Principles (effective 08/01/2023), pages 2-4, states that unscheduled tours shall be conducted on an irregular basis to prevent predictability of the unscheduled tour. Interview with an intermediate supervisor who conducts unannounced rounds confirmed that in his role as supervisor he:

- Conducts unannounced rounds
- Documents unannounced rounds
- Irregularly conduct unscheduled rounds to not alert staff of a patterned behavior.

**Evidence relied upon:**

1. PAQ
2. Interview with the Warden or Designee
3. Interview with the PREA Coordinator
4. Interview with the PREA Compliance Manager
5. Connecticut Department of Corrections (CDOC) Administrative Directive 6.12, Inmate Sexual Abuse/ Sexual Harassment Prevention and Intervention (effective 08/01/2023)
6. Connecticut Department of Corrections (CDOC) Administrative Directive 2.15 Hazardous Duty Staff (effective 02/23/2018)
7. Connecticut Department of Corrections (CDOC) Administrative Directive 1.9 Emergency Staffing Policy (effective 11/01/2022)
8. Connecticut Department of Corrections (CDOC) Administrative Directive 1.9 Emergency Staffing Policy (effective 11/01/2022), Manson Post Shutdown Worksheet (effective 04/27/23)
9. Connecticut Department of Corrections (CDOC) Administrative Directive, 6.1 Tours and Inspection (effective 08/01/2023)
10. Connecticut Department of Corrections (CDOC) Administrative Directive, 6.2 Post Orders and Logs (effective 09/09/23)
11. Manson Post Plan
12. Manson Meeting agenda

**Corrective Action:**

1. 115.13 (a): The agency shall ensure that each facility it operates shall develop, document, and do its best to comply regularly with a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring to protect inmates against sexual abuse. In calculating adequate staffing levels and determining the need for video monitoring, facilities shall take into consideration: (1) Generally accepted detention and correctional practices; (2) Any judicial findings of inadequacy; (3) Any findings of inadequacy from Federal investigative agencies; (4) Any findings of inadequacy from internal or external oversight bodies; (5) All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated); (6) The composition of the inmate 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; and (11) Any other relevant factors. Manson will provide staffing reports for the days on the onsite portion of the audit. The Auditor will review and compare staffing against the approved staffing plan approved by the PREA Coordinator.
2. 115.13 (c): Whenever necessary, but no less frequently than once each year, for each facility the agency operates, in consultation with the PREA coordinator required by § 115.11, the agency shall assess, determine, and document whether adjustments are needed to: (1) The staffing plan

established according to paragraph (a) of this section; (2) The facility's deployment of video monitoring systems and other monitoring technologies; and (3) The resources the facility has available to commit to ensure adherence to the staffing plan.

According to the CDOC PREA Unit meeting minutes, which included the Manson Warden, Deputy Warden, PREA Coordinator, and Captain of the PREA Unit, the staffing plan was on the agenda. However, the Mason PREA meeting minutes, where the staffing plan was discussed, were quite general. It would be beneficial to have more specific details included. The CDOC PREA Coordinator will provide more details as Substandard 115.13 (c) indicates. According to the PREA Coordinator, Manson discussed the staffing plan in detail, but the notetaker generalized the discussion. Any additional corrections are contingent upon the documents provided for review. This Auditor recommends providing more details on staffing plans in the future.

**Conclusion:**

The narrative above must include a comprehensive discussion of all the evidence relied upon in making the compliance after completing the corrective action period, the determination, the Auditor's analysis and reasoning, and the Auditor's conclusions.

<b>115.14</b>	<b>Youthful inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	115.14 (a): A youthful inmate shall not be placed in a housing unit in which the youthful inmate will have sight, sound, or physical contact with any adult inmate through use of a shared dayroom or other common space, shower area, or sleeping quarters.  115.14 (a)-1 The facility prohibits placing youthful inmates in a housing unit where they will have sight, sound, or physical contact with any adult inmate through a shared dayroom or other common space, shower area, or sleeping quarters. Yes.  In PAQ 115.14 (a), Manson answered yes. Manson houses juveniles sentenced as adults. Some juveniles over 17 years old are being held by court order at Manson after being committed to the Department of Juvenile Justice until age 21.  Connecticut Department of Corrections, Unit Directive 9.2, Offender Classification (effective 04/12/2019), pages 1-16.  115.14 (a)-2 The facility has housing units to which youthful inmates are assigned to provide sight and sound separation between youthful and adult offenders in

dayrooms, common areas, showers, and sleeping quarters. Yes.

115.14 (a)-3 The facility places youthful inmates in the SAME HOUSING UNIT as adults. No.

See Connecticut Department of Corrections, Unit Directive 9.2, Offender Classification, Section 7E1 (effective 04/12/2019), page 3.

115.14 (a)-4 Youthful inmates who are placed in the SAME HOUSING UNIT as adults have sight, sound, or physical contact with any adult inmate using a shower area, sleeping quarters, shared dayroom, or other common space. No.

See 115.14 (a) 3.

115.14 (a)-5 In the past 12 months, the number of housing units to which youthful inmates are assigned that provide sight and sound separation between youthful and adult offenders in dayrooms, common areas, showers, and sleeping quarters: Two, Units I and J.

115.14 (a)-6 In the past 12 months, the number of youthful inmates placed in SAME HOUSING UNIT as adults at this facility: 0.

A custody line staff (1) who supervises Youthful inmates was interviewed. The line staff person was asked:

1. Can you maintain the separation of sight and sound between youthful and adult inmates? The custody staff person responded yes.
2. Have there been circumstances in the past 12 months when sight and sound separation requirements have been challenging? The custody staff person responded yes.
3. How have you tried to solve problems in achieving sight and sound separation between youthful and adult inmates? The custody staff member responded that the shift supervisor or warden could shut down nonessential posts and move custody staff to maintain adequate supervision levels for youthful inmates. Are youthful inmates placed in solitary confinement to comply with the sight and sound separation requirements between youthful and adult inmates? The custody staff person responded no.

This Auditor interviewed youthful inmates confined within the facility who had been admitted in the past 12 months. During the interviews, each youthful inmate (2) sampled was asked.

1. Do you have direct contact with adult inmates in your housing area? All responded no.
2. Can you touch or be touched by adult inmates? All responded no. All youthful inmates sampled confirmed that they live in separate units that are out of sight and sound of adult inmates.

Do you have direct contact with adult inmates outside your housing area (for example, taking classes, exercising, or working)? All youthful inmates sampled indicated that they are under constant observation by assigned staff who move with them when they are outside their segregated living units designated for youthful inmates. Work assignments are assigned in the living unit or in the classroom where staff are present.

During the facility tour, this Auditor noted that segregation, if necessary for youthful inmates, is designated in each living unit rather than in designated adult segregation or isolation cell space.

Youthful inmates (2) sampled were asked whether they were placed in this housing area to keep them away from adult inmates. During interviews with a sample of youthful inmates, each related that their placement, as explained to them by the administration, was a PREA-related mandate to protect their sexual safety.

The youthful inmates (2) surveyed reported exercising daily at Manson.

The youthful inmates (2) sampled were asked, "Are you going to school?" From the same sample of youthful inmates interviewed, this Auditor determined that youthful inmates without a GED or High School diploma attend school Monday through Friday, outside of holidays.

Two youthful inmates were asked, "Are you working?" One responded that he was pursuing his GED, while the other indicated he was not working. As the unit officer mentioned during an informal conversation, work assignments are limited to unit orderly and classroom teacher aide responsibilities because of their age and status designation.

The youthful inmates (2) sampled were asked, "Are you going to other programs?" "During the facility tour, this Auditor observed a Unit Counselor engaging youthful inmates in a behavior enrichment program. Each youthful inmate was allowed to discuss his motto of the day and the self-established goals he was working towards. According to the Unit Counselor, various volunteer groups work with youthful inmates every week. Youthful inmates are also encouraged to participate in online coursework.

115.14 (b): In areas outside of housing units, agencies shall either (1) maintain sight and sound separation between youthful inmates and adult inmates or (2) provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact.

115.14 (b)-1 The facility maintains sight, sound, and physical separation between youthful inmates and adult inmates in areas OUTSIDE HOUSING UNITS. No.

Connecticut Department of Corrections, Unit Directive 9.2, Offender Classification, Section 7E1, (effective 04/12/2019), pages 3.

Manson is a facility that houses juveniles sentenced as adults or youthful inmates. Some juveniles over 17 years old are held by court order at Manson after being

committed to the Department of Juvenile Justice until they turn 21. However, Manson classifies juveniles (youthful inmates) into living units by age group. In conjunction with the facility tour and site review, the documentation reviewed in the form of housing rosters supports that Manson houses juveniles (youthful inmates) under the age of 21. Furthermore, random and targeted Youthful inmates and adults were interviewed, confirming that age is a factor used in the classification and intake process to determine where a juvenile is placed at Manson. (See Administrative Directive 9.2, Offender Classification, and Juvenile Housing Unit Plan).

Education and program staff (1) who work with Youthful inmates were asked if there have been circumstances in the past 12 months when sight and sound separations were difficult to achieve. The Unit Counselor responded yes, during bad weather, vacations, or sicknesses. The Unit Counselor further explains that Manson has a shutdown directive, which correctional administrators of the shift supervisor can activate after consulting with the Warden. Also, see 115.14 (a)-6 for responses by line staff supervising youthful inmates.

This Auditor interviewed youthful inmates confined within the facility who had been admitted in the past 12 months. During the interviews, each youthful inmate (2) sampled was asked.

1. Do you have direct contact with adult inmates in your housing area? All responded no.
2. Can you touch or be touched by adult inmates? All responded no. All youthful inmates sampled confirmed that they live in separate units that are out of sight and sound of adult inmates.

Do you have direct contact with adult inmates outside your housing area (for example, taking classes, exercising, or working)? All youthful inmates sampled indicated that they are under constant observation by assigned staff who move with them when they are outside their segregated living units designated for youthful inmates. Work assignments are assigned in the living unit or classroom where staff are present.

115.14 (c): Agencies shall make their best efforts to avoid placing youthful inmates in isolation to comply with this provision. Absent exigent circumstances, agencies shall not deny youthful inmates daily large-muscle exercise and any legally required special education services to comply with this provision. Youthful inmates shall also have access to other programs and work opportunities to the extent possible.

115.14 (c)-1 The facility documents the exigent circumstances for each instance where youthful inmates' access to large-muscle exercise, legally required education services, and other programs and work opportunities were denied. Yes.

115.14 (c)-2 In the past 12 months, the number of youthful inmates who have been placed in isolation to separate them from adult inmates has been 0.

Manson has two housing units (I&J) designated for youthful inmates ages 15-17.

These units provide separation from inmates over 17. Some inmates over 17 are held by court order at Manson after being committed to the Department of Juvenile Justice until age 21.

During this audit, a line staff who supervises youthful inmates was asked:

1. In the past 12 months, if youthful inmates have been in isolation to separate them from adult inmates, did the youthful inmates have access to:
  1. daily large-muscle exercise, the staff responded yes
  2. legally required education services, the staff responded yes
  3. other programs and work opportunities, the staff responded that access to work is limited to jobs in the living unit or classroom due to concerns for the sexual safety of youthful inmates.

See also 115.14 (b)-1. The facility maintains sight, sound, and physical separation between youthful and adult inmates in areas OUTSIDE HOUSING UNITS. No.

Connecticut Department of Corrections, Unit Directive 9.2, Offender Classification, Section 7E1, (effective 04/12/2019), pages 3.

**Evidence relied upon:**

1. PAQ
2. Facility tour and site review
3. Connecticut Department of Corrections, Unit Directive 9.2, Offender Classification (effective 04/12/2019), pages 1-16.
4. Interview with Line Staff who Supervise Youthful Inmates (1)
5. Education and Program Staff who Work With Youthful Inmates (1)
6. Interview with Youthful Inmates (2)
7. Manson Population Report (Internet Search)
8. Manson Youth Institution, Juvenile Housing Unit Program (effective 12/2019)
9. Sample of documentation reviewed on unit logs of service delivery to youthful inmates under this standard.

**Conclusion:**

The narrative above must include a comprehensive discussion of all the evidence relied upon in making the compliance after completing the corrective action period, the determination, the Auditor's analysis and reasoning, and the Auditor's conclusions.

115.15	<b>Limits to cross-gender viewing and searches</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.15 (a): The facility shall not conduct cross-gender strip searches or cross-gender visual body cavity searches (meaning a search of the anal or genital opening) except in exigent circumstances or when performed by medical practitioners.</p>
	<p>115.15 (a)-1 The facility conducts cross-gender strip or cross-gender visual body cavity searches of inmates.</p>
	<p>Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, (effective 08/01/2023) pages 1-21.</p>
	<p>Connecticut Department of Correction (CDOC), Administrative Directive 6.7, Searches Conducted in Correctional Facilities, Section 1., (effective 10/13/23) page 1.</p>
	<p>Connecticut Department of Correction (CDOC), Administrative Directive 6.7, Searches Conducted in Correctional Facilities, Section 4., (effective 10/13/23) pages 2-3.</p>
	<p>Connecticut Department of Correction (CDOC) Unit Directive 8.17, Manson Unit Directive, follows CDOC Administrative Directive 8.17, Gender Diverse (effective 1/24/2024).</p>
	<p>Manson is an all-male adult facility with youthful inmates. Zero transgender/intersex males were housed at this facility during the onsite portion of this audit.</p>
	<p>Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, states that a staff member of the same sex as the inmate shall search, except where circumstances are such that delay would constitute an immediate threat to the inmate, staff, others, or the institution's security.</p>
	<p>Connecticut Department of Correction (CDOC), Administrative Directive 6.7, Searches Conducted in Correctional Facilities, Section 4, pat searches shall be conducted using the established Department of Correction and John R. Manson Youth Institution standards. All cross-gender pat searches shall be documented in form CN 6601 Incident Report, per Administrative Directive 6.6, Reporting of Incidents. CDOC, by agency mandate, prohibits conducting cross-gender strip searches or cross-gender visual body cavity searches (meaning a search of the anal or genital opening) except in exigent circumstances or when performed by medical practitioners.</p>
	<p>Connecticut Department of Correction (CDOC), Administrative Directive 8.17, Gender Diverse Intake, indicates that upon intake to the CDOC, an inmate who identifies as or is known to identify as gender diverse or having an intersex condition will be assessed for initial placement. This initial assessment, by custody, will be based on the safety and security of the inmate, the inmate population, and the staff at the</p>

respective facility. If this assessment can be completed before entry into the DOC as a new intake, the sending agency can transport the inmate to the appropriate facility. If the intake facility receives an inmate believed to be intersex or gender diverse without forewarning from the Judicial Marshals, other law enforcement agencies, or other sources, the receiving facility shall accept the inmate and initiate the assessment as described above. Intake staff shall notify the Unit Administrator, who will then notify the appropriate District Administrator. A CN 81701 Referral for Gender Assessment will be initiated by the custody staff completing the PREA screen (CN9306) or by the staff person to whom the inmate discloses as being gender diverse or having an intersex condition and submits it to the unit or shift supervisor for completion. The supervisor shall complete the referral form and submit it to the Unit Administrator. The Unit Administrator shall forward it within three (3) business days of receipt to the facility Supervising Psychologist for appropriate assessment.

Administrative Directive 8.17, Gender Diverse, Intake, Section 4, ii, indicates that during the orientation phase, or until the appropriate facility has been determined, the current facility housing for inmates shall:

1. CDOC administrative directives mandate that inmates be housed separately (during assessments), allowing inmates to participate in any orientation, recreation, and out-of-cell time with the rest of the population, following the rules of that unit.
2. Allow the inmate to shower separately from other inmates.
3. Determine the preferred gender of the officer who will conduct pat and/or strip searches.
  - a. The facility shall consider the inmate's gender preference, facility needs, and safety and security when making this determination.
  - b. This preference will be considered during routine nonemergency pat/strip searches. In an emergent situation, the safety and security of the inmate, the inmate population, and the facility will take priority.

115.15 (a)-2 In the past 12 months, the number of cross-gender strip or cross-gender visual body cavity searches of inmates: 0.

A sample of random and targeted adult and youthful inmates denied ever being pat-searched by female staff at Manson. A sample of random staff (14) were interviewed during the on-site portion of this audit. The same random staff sample denied conducting a cross-gender search under any circumstance. All confirmed that if a cross-gender search were necessary, the Shift Supervisor would immediately be notified, and the incident would be documented. All staff sampled confirmed awareness and understanding of the agency's directive, which prohibits cross-gender searches except under exigent circumstances. All random staff (14) interviewed confirmed a duty to document exigent circumstances where a cross-gender search was conducted by staff and an agency requirement to notify a supervisor before such a search occurred.

During the facility tour, this Auditor (female) observed same-gender (male) correctional staff exiting an area in intake designed to conduct pat searches. The search process was conducted in private. The lack of visibility was purposefully designed to obscure passersby and other staff who work in the area from viewing opposite-gender male inmates being searched. Zero opposite-gender supervisors and non-medical staff are allowed to pat search a male inmate unless in exigent circumstances, such as a medical emergency, to save the life of an individual. According to intake staff, intermediate, and upper managers interviewed separately during this audit, opposite-gender supervisors are not required to supervise or observe strip searches except in exigent circumstances.

115.15 (b): As of August 20, 2015, or August 20, 2017, for a facility whose rated capacity does not exceed 50 inmates, the facility shall not permit cross-gender pat-down searches of female inmates, absent exigent circumstances. Facilities shall not restrict female inmates' access to regularly available programming or other out-of-cell opportunities to comply with this provision.

115.15 (b)-1 The facility does not permit cross-gender pat-down searches of female inmates, absent exigent circumstances (facilities have until August 20, 2015, to comply or August 20, 2017, if their rated capacity does not exceed 50 inmates). Manson indicates this substandard is not applicable as the staff does not conduct cross-gender pat-searches.

Connecticut Department of Correction (CDOC), Administrative Directive 6.7, Searches Conducted in Correctional Facilities, Section 4, Inmate Pat Searches (effective 10/13/2023) pages 3-4.

Connecticut Department of Correction (CDOC), Administrative Directive 6.7, Searches Conducted in Correctional Facilities, Section 4. Inmate Pat Searches, Subsection 1., Inmate Strip-Searches (effective 10/13/2023) pages 3-4.

Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, (effective 08/01/2023) pages 1-21.

115.15 (b)-2 The facility does not restrict female inmates' access to regularly available programming or other out-of-cell opportunities to comply with this provision. Manson indicates this substandard is not applicable as the staff does not conduct cross-gender pat-searches.

115.15 (b)-3 The number of pat-down searches of female inmates that were conducted by male staff: Manson indicates this substandard is not applicable as the staff does not conduct cross-gender pat-searches. Manson indicates this substandard is not applicable as the staff does not conduct cross-gender pat-searches.

115.15 (b)-4 The number of pat-down searches of female inmates conducted by male staff that did not involve exigent circumstance(s): Manson indicates this substandard is not applicable as the staff does not conduct cross-gender pat-searches.

The Auditor interviewed random staff and asked them to explain cross-gender search practices. All staff interviewed (14) indicated that Manson does not conduct cross-gender searches of inmates. If male line custody staff are unavailable, the next step is to contact a supervisor to identify same-gender staff to assist in conducting the search unless gender specifics are outlined for the inmate's search. Furthermore, all random staff sampled confirmed their participation in training specifically to the requirements of this standard.

All staff (both male and female) reported cross-gender strip.

searches or cross-gender body cavity searches do not occur at this facility. The PCM confirmed that Manson has a rated capacity greater than 50 inmates. To comply with these provisions (e.g., Administrative Directive 6.7, Searches Conducted in Correctional Facilities, Section 4, Inmate Strip-Searches, and Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, states facilities shall not restrict female inmates' access to regularly available programming or other out-of-cell opportunities. Interview with the PCM, who confirmed that Manson is an all-male facility with zero transgender inmates currently assigned during the onsite portion of this audit.

115.15 (c): The facility shall document all cross-gender strip searches and cross-gender visual body cavity searches and shall document all cross-gender pat-down searches of female inmates.

115.15 (c)-1 Facility policy requires that all cross-gender strip searches and cross-gender visual body cavity searches be documented.

Connecticut Department of Correction (CDOC), Administrative Directive 6.7, Searches Conducted in Correctional Facilities, Section 4, Inmate Pat Searches (effective 10/13/2023) pages 3-4.

Connecticut Department of Correction (CDOC), Administrative Directive 6.7, Searches Conducted in Correctional Facilities, Section 4. Inmate Pat Searches, Subsection 1., Inmate Strip-Searches (effective 10/13/2023) pages 3-4.

Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, (effective 08/01/2023) pages 1-21.

115.15 (c)-2 Facility policy requires documenting all cross-gender pat-down searches of female inmates. Manson indicates that substandard is not applicable.

115.15 (d): The facility shall implement policies and procedures that enable inmates to shower, perform bodily functions, and change clothing without a non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. Such policies and procedures shall require staff of the opposite gender to announce their presence when entering an inmate housing unit.

115.15 (d)-1 The facility has implemented policies and procedures that enable

inmates to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks (this includes viewing via video camera).

Connecticut Department of Correction (CDOC), Administrative Directive 6.7, Searches Conducted in Correctional Facilities, Section 4, Inmate Pat Searches (effective 10/13/2023) pages 3-4.

Connecticut Department of Correction (CDOC), Administrative Directive 6.7, Searches Conducted in Correctional Facilities, Section 4. Inmate Pat Searches, Subsection 1., Inmate Strip-Searches (effective 10/13/2023) pages 3-4.

Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, (effective 08/01/2023) pages 1-21.

According to the facility Warden, Manson follows the Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention. Directive 6.12 enables inmates to shower, perform bodily functions, and change clothing without a non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. Such policies and procedures shall require staff of the opposite gender to announce their presence when entering an inmate housing unit. The directive requires staff of the opposite gender to announce their presence when entering an inmate housing unit.

115.15 (d)-2 Policies and procedures require staff of the opposite gender to announce their presence when entering an inmate housing unit. Yes.

Connecticut Department of Correction (CDOC), Directive 6.2, General Post Orders, Section E. Supervision and Monitoring (effective 11/01/2022), pages 20-21.

During the facility tour, the Auditor heard staff of the opposite gender verbally make announcements when entering each living unit. The announcement was made as we entered the living unit and were directed to stand near the control station. Inmates in the shared living unit area looked up from playing cards or chess immediately after the announcement. The time between the verbal announcement and the staff person's arrival provided sufficient time for an inmate to cover up before further staff entered the common area. The Auditor also observed single-man showers on each wing of every living unit. Each single-man shower stall had PREA-friendly shower curtains. The shower curtains are best described as sheer transparent top and bottom with an opaque middle to obscure the torso area.

Interviews with a sample of adult and youthful inmates all confirmed having procedures in place to allow inmates to shower, perform bodily functions, and change clothing without a non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks.

Interviews with a random sample of staff (14) confirmed that inmates are offered the ability to shower, perform bodily functions, and change clothing without a non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks.

115.15 (e): The facility shall not search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. If the inmate's genital status is unknown, it may be determined 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.

115.15 (e)-1 The facility has a policy prohibiting staff from searching or physically examining a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. Yes.

Connecticut Department of Correction (CDOC), Administrative Directive 6.7, Searches Conducted in Correctional Facilities, Section 1., (effective 10/13/23) page 1.

Connecticut Department of Correction (CDOC), Administrative Directive 6.7, Searches Conducted in Correctional Facilities, Section 4., (effective 10/13/23) pages 2-3.

Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, (effective 08/01/2023) pages 1-21.

Connecticut Department of Correction (CDOC), Administrative Directive 8.17, Gender Diverse, Section Intake, Subsection a., ii (effective 10/30/2023) pages 2-3.

The PCM confirmed that Administrative Directive 8.17, Gender Diverse Intake, indicates that upon intake to the CDOC, an inmate who identifies as or is known to identify as gender diverse or having an intersex condition will be assessed for initial placement. This initial assessment, by custody, will be based on the safety and security of the inmate, inmate population, and staff at the respective facility. If this assessment can be completed before entry into the DOC as a new intake, the sending agency can transport the inmate to the appropriate facility. If the intake facility receives an inmate believed to be intersex or gender diverse without forewarning from the Judicial Marshalls, other Law Enforcement Agencies, or other sources, the receiving facility shall accept the inmate and initiate assessment as above. Intake staff shall notify the Unit Administrator, who will then notify the appropriate District Administrator. A CN81701 Referral for Gender Assessment will be initiated by the custody staff completing the PREA screen (CN9306) or the staff person to whom the inmate discloses as being gender diverse or as having an intersex condition and submits to the unit or shift supervisor for completion. The supervisor shall complete the referral form and submit it to the Unit Administrator. The Unit Administrator shall forward within three (3) business days of receipt to the facility Supervising Psychologist for an appropriate assessment.

Administrative Directive 8.17, Gender Diverse, Intake, Section 4, ii, indicates that during the orientation phase, or until the appropriate facility has been determined, the current facility housing the inmate shall:

1. Under Administrative Directive 9.3, Inmate Admission, Transfers, and Discharges house inmates separately (during assessments are occurring), allowing for inmates to participate in any orientation, recreation, and out-of-cell time with the rest of the population following the rules of that unit.
2. Allow the inmate to shower separately from other inmates.
3. Determine the preferred gender of the officer who will conduct pat and/or strip searches.
  - a. The facility shall consider the inmate's gender preference, facility needs, and safety and security when making this determination.
  - b. This preference will be considered during routine nonemergency pat/strip searches. In an emergent situation, the safety and security of the inmate, the inmate population, and the facility will take priority.

Interviews with all randomly selected staff during the on-site portion of this audit confirmed that the facility staff should not search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. In circumstances where the inmate's genital status is unknown to the staff, it may be determined during conversations with the inmate by reviewing medical records or, if necessary, by acquiring that information as part of a broader medical examination conducted privately by a medical practitioner.

According to Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, and Administrative Directive 6.7, Searches Conducted in Corrections Facilities, facilities shall not search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. If the inmate's genital status is unknown, it may be determined 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.

This Auditor also examined investigative reports to determine if any incidents of inappropriate searches or physical examinations of a transgender or intersex inmate were reported during this reporting period. This Auditor found zero allegations of inappropriate searches of transgender or intersex inmates during this reporting period.

115.15 (f): The agency shall train security staff in how to conduct cross-gender pat-down searches and searches of transgender and intersex inmates professionally and respectfully and in the least intrusive manner possible, consistent with security needs.

115.15 (f)-1 The percent of all security staff who received training on conducting

cross-gender pat-down searches and searches of transgender and intersex inmates in a professional and respectful manner, consistent with security needs (the percentage given does not necessarily indicate compliance or non-compliance with the standard): 100.

By examination, CDOC Maloney Center for Training and Staff Development (MCTSD), Module 300, Correctional Practical Skills (CPS), Lesson CPS 301-H Search Techniques training curriculum slides 1-10 confirms CDOC has a training curriculum to address search procedures utilizing the quadrant search technique. Staff are reminded to maintain professionalism and always adhere to policy.

Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Administrative mandates training for security staff on how to conduct cross-gender pat-down searches and searches of transgender and intersex inmates professionally and respectfully and in the least intrusive manner possible, consistent with security needs. All random staff sampled confirmed participating in mandatory search training.

Administrative Directive 8.17 Gender Diverse, Section 10 also outlines Pre-service and In-service Training for direct contact staff.

- a. Pre-service Training. Under Administrative Directive 2.7, Training and Staff Development, a gender-responsive curriculum shall be part of the training program for all new Department employees with direct inmate contact.
- b. In-Service Training. Direct contact employees shall be required to participate in training at the interval determined by the Director of the Maloney Center for Training and Staff Development (MCTSD) and, when appropriate, by the training division of the DOC contracted healthcare provider in consultation with MCTSD.

During an informal conversation, all correctional staff indicated they must attend a 13-week training class at the Maloney Center for Training and Staff Development (MCTSD). The training includes how to conduct cross-gender pat-down searches and searches of transgender and intersex inmates professionally and respectfully, and in the least intrusive manner possible, consistent with security needs.

**Evidence relied upon:**

1. PAQ
2. Facility tour
  - a. Observed all living units to include segregation
  - b. Observed staff assigned to monitor electronic surveillance
  - c. Observed staff and inmates assigned to supervise youthful inmates
  - d. Observed housing assignment of I and J Units for youthful inmates
  - e. Observed housing roster for Manson

- f. Observed cross-gender announcements
- 3. Internet search of population 12 months.
- 4. CDOC Maloney Center for Training and Staff Development (MCTSD), Module 300, Correctional Practical Skills (CPS), Lesson CPS 301-H Search Techniques training curriculum slides 1-10.
- 5. Connecticut Department of Correction (CDOC), Directive 6.2, General Post Orders, Section E. Supervision and Monitoring (effective 11/01/2022), pages 20-21.
- 6. Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention (effective 08/01/2023) pages 1-21.
- 7. Connecticut Department of Correction (CDOC), Administrative Directive
- 8. Connecticut Department of Correction (CDOC), Administrative Directive 6.7, Searches Conducted in Correctional Facilities, Section 1., (effective 10/13/23) page 1.
- 9. Connecticut Department of Correction (CDOC), Administrative Directive 6.7, Searches Conducted in Correctional Facilities, Section 4., (effective 10/13/23) pages 2-3.
- 10. Connecticut Department of Correction (CDOC) Unit Directive 8.17, Manson Unit Directive, follows CDOC Administrative Directive 8.17, Gender Diverse (effective 1/24/2024).
- 11. Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, (effective 08/01/2023) pages 1-21.
- 12. Interviews with a sample of inmates (26)
- 13. Interviews with a random sample of staff (14)

**Conclusion:**

The narrative above must include a comprehensive discussion of all the evidence relied upon in making the compliance after completing the corrective action period, the determination, the Auditor's analysis and reasoning, and the Auditor's conclusions.

<b>115.16</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>

115.16 (a): The agency shall 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, or those who have intellectual, psychiatric, or speech 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. Such steps shall include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing providing access to interpreters who can interpret effectively, accurately, impartially, receptively, and expressively, using any necessary specialized vocabulary. In addition, the agency should ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities, including inmates with intellectual disabilities, limited reading skills, or who are blind or have low vision.

An agency is not required to take actions that it can demonstrate would result in a fundamental alteration like a service, program, or activity or undue financial and administrative burdens, as those terms are used in regulations promulgated under Title II of the Americans With Disabilities Act, 28 CFR 35.164.

115.16 (a)-1 is crucial to CDOC's Administrative Directive 6.12. This directive outlines specific steps the agency has established to provide disabled inmates with an equal opportunity to participate in or benefit from our efforts to prevent, detect, and respond to sexual abuse and sexual harassment. This directive serves as a guide for CDOC staff to ensure that facilities consistently meet the needs of disabled inmates. Yes.

This Auditor confirmed CDOC's efforts and methods for providing professionally hired interpreters to communicate with inmates with disabilities through an interview with the agency head. The agency head also detailed how the agency collaborates. Manson's PAQ supports this substandard. Further, accessibility to and availability of interpretation services is available by scheduling appointments through the CDOC Department of Aging and Disability Services. The Aging and Disability Services, Deaf, Hard of Hearing Interpreter Registry is maintained by this department. Sign Language Interpreters are also available in Connecticut through the CDOC Department of Aging and Disability Services.

During the on-site portion of the audit, the PCM denied having limited English proficiency (LEP) inmates in custody. This Auditor also verified that Manson did not have any LEP inmates in custody through informal conversations with intake staff and correctional counselors. This Auditor interviewed several bilingual inmates (8) who spoke fluent English. Each bilingual inmate confirmed that Manson provided PREA education and orientation in a language they understood, and they were allowed the option of Spanish or English PREA-related literature during the intake process.

According to the PCM, Manson would provide a staff person who spoke fluent Spanish for interviews with the population, which was the facility's real-time process for obtaining an interpreter on demand.

Medical services identified zero blind or low-vision inmates. Four inmates with physical disabilities, such as ankle or wrist injuries and orthosis, were interviewed.

Mental health practitioners identified six inmates with conditions such as autism, developmental delay, and borderline intellectual functioning. This Auditor interviewed four of the six inmates Manson identified as having cognitive challenges. All inmates with cognitive challenges were assigned to a mental health practitioner as an active client to monitor their progress based on their disability.

115.16 (b): The agency shall take reasonable steps to ensure meaningful access to all aspects of its efforts to prevent, detect, and respond to sexual abuse and sexual harassment for inmates who are limited English proficient. This includes providing interpreters who can interpret effectively, accurately, impartially, receptively, and expressively, using any necessary specialized vocabulary.

115.16 (b)-1 The agency has established procedures to provide inmates with limited English proficiency 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.

Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, (effective 08/01/2023) pages 1-21.

Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, indicates that CDOC shall take reasonable steps to ensure meaningful access to all aspects of its efforts to prevent, detect, and respond to sexual abuse and sexual harassment for inmates who are limited English proficient. This includes providing interpreters who can interpret effectively, accurately, and impartially, receptively, and expressively, using any necessary specialized vocabulary. According to the intake staff, Manson provided staff readers to assist all inmates during the intake and orientation process. Staff readers ensure that inmates with low vision, blindness, and challenges with reading comprehension have meaningful access to the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. According to intake staff, PREA-related and victim advocacy contact information is provided to the population in English and Spanish.

During the facility tour, this Auditor observed large, bold lettering signage to aid inmates with low vision in each living unit and common areas visited by staff, inmates, and the community. In a private room in the facility, Manson indicates that staff who are fluent in Spanish, when needed, would assist inmates with limited English proficiency. Accessibility to and availability of interpretation services is available by scheduling appointments through the CDOC Department of Aging and Disability Services. The Aging and Disability Services, Deaf, Hard of Hearing Interpreter Registry is maintained by this department. Sign Language Interpreters are also available in Connecticut through the CDOC Department of Aging and Disability Services. Interviews with random staff all confirm the completion of training specific to inmates with disabilities.

115.16 (c): The agency shall not rely on inmate interpreters, inmate readers, or other types of inmate assistants 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.

115.16 (c)-1 Agency policy prohibits use of inmate interpreters, inmate readers, or other types of inmate assistants 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.

Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, (effective 08/01/2023) pages 1-21.

Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, indicates that the agency shall not rely on inmate interpreters, inmate readers, or other types of inmate assistants 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. During interviews with random staff, all indicated that they would not rely on inmate interpreters, inmate readers, or other types of inmate assistants 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. By examination of investigative reports, this Auditor determined that during this reporting period, Manson did not rely on inmates as inmate interpreters, inmate readers, or other types of inmate assistants during any PREA investigation (e.g., sexual abuse or sexual harassment).

Documented circumstances when inmate interpreters, readers, and other inmate assistants were used. was zero during this reporting period. Moreover, as confirmed by the Captain of the CDOC PREA Unit and according to PAQ 115.16 (c)-3, In the past 12 months, the number of instances where inmate interpreters, readers, or other types of inmate assistants have been used and it was not the case that an extended delay in obtaining another interpreter could compromise the inmate's safety, the performance of first-response duties under § 115.64, or the investigation of the inmate's allegations was zero.

115.16 (c)-2 If YES, the agency or facility documents the limited circumstances in individual cases where inmate interpreters, readers, or other types of inmate assistants are used. Yes.

During the onsite portion of this audit, this Auditor interviewed (14) staff were asked if the agency ever allows the use of inmate interpreters, inmate readers, or other types of inmate assistants to help inmates with disabilities or those who are limited English proficient when making an allegation of sexual abuse or sexual harassment? All staff sampled responded no. Further, the same sample of random staff all denied any knowledge of Manson's use of inmate interpreters, inmate readers, or other types of inmate assistants concerning allegations of sexual abuse or sexual harassment.

A sample of inmates (8) identified as disabled (e.g., four - cognitive and four physical disabilities) were interviewed during the onsite portion of this audit. This same sample of inmates was asked if the facility provides information about sexual abuse and sexual harassment that they understand. Four of the eight inmates indicated that they are

115.16 (c)-3 In the past 12 months, the number of instances where inmate interpreters, readers, or other types of inmate assistants have been used, and it was not the case that an extended delay in obtaining another interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations: 0.

Four inmates with physical disabilities, such as ankle or wrist injuries and orthosis, were interviewed. Mental health practitioners identified six inmates with conditions such as autism, developmental delay, and borderline intellectual functioning. This Auditor interviewed four of the six inmates Manson identified as having cognitive challenges. All inmates with cognitive challenges were assigned to a mental health practitioner as an active client to monitor their progress based on their disability.

**Evidence relied upon:**

1. PAQ
2. Facility tour and observations
  - a. Examination of written material (e.g., posters, video)
3. Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, (effective 08/01/2023) pages 1-21.
4. Interview with the Agency Head
5. Interview with random staff (14)
6. Interview with inmates (26) total
7. Interview with inmates - disabled physical (4)
8. Interview with inmates - cognitive inmates (4)
9. Examination of staff training

**Conclusion:**

The narrative above must include a comprehensive discussion of all the evidence relied upon in making the compliance after completing the corrective action period, the determination, the Auditor's analysis and reasoning, and the Auditor's conclusions.

115.17	<b>Hiring and promotion decisions</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.17 (a): The agency shall not hire or promote anyone who may have contact with inmates and shall not enlist the services of any contractor who may have contact with inmates who— (1) Have 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); (2) 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; or (3) Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (a)(2) of this section.</p>
	<p>115.17 (a)-1 Agency policy prohibits hiring or promoting anyone who may have contact with inmates and prohibits enlisting the services of any contractor who may have contact with inmates who: (1) 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); (2) 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; or (3) Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (a)(2) of this section. Yes.</p>
	<p>Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention(effective 07/20/15) pages 1-19.</p>
	<p>Connecticut Department of Correction (CDOC), Administrative Directive 2.3—Employee Selection, Transfer and Promotion(effective 09/26/2014) pages 1-10.</p>
	<p>According to Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention and Administrative Directive 2.3—Employee Selection, Transfer and Promotion, CDOC prohibits facilities from hiring or promoting who may have contact with inmates and shall not enlist the services of any contractor who may have contact with inmates, who— (1) 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); (2) 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; or (3) Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (a)(2) of this section.</p>
	<p>Agency policy prohibits hiring or promoting anyone who may have contact with inmates and prohibits enlisting the services of any contractor who may have contact with inmates who: (1) Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42</p>

U.S.C. 1997); (2) 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; or (3) Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (a)(2) of this section.

During her interview, the Human Resource Representative confirmed that, as indicated in PAQ 115.17 (c)-2, 24 individuals who may have contact with inmates underwent criminal background checks within the 12 months before being hired. Files of those employed or promoted in the last 12 months were reviewed to ensure that proper criminal background checks had been conducted, and questions regarding past conduct were posed and answered. An Auditor's review of the background check files for individuals hired or promoted in the previous 12 months sought to confirm whether proper criminal record checks were performed and to address inquiries regarding past conduct, verifying that the CDOC completed the necessary criminal background checks as mandated by this standard. The Auditor examined the employment files of 14 medical staff, five administrative/education personnel, six staff promotions, and five staff rehires.

115.17 (b): The agency shall consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates or to enlist the services of any contractor.

During her interview, the Human Resource Representative confirmed that, as stated in PAQ 115.17 (b)-1, Agency policy requires the consideration of any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates or to enlist the services of any contractor.

115.17 (c): Before hiring new employees who may have contact with inmates, the agency shall (1) Perform a criminal background records check and (2), Consistent with Federal, State, and local law, do its best 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.

During her interview, the Human Resource Representative confirmed that, as stated in 115.17 (c)-1, Agency policy requires that before it hires any new employees who may have contact with inmates, it (a) conducts criminal background record checks and (b) consistent with federal, state, and local law, makes its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse. The Human Resource Representative also confirmed that 115.17 (c)-2 In the past 12 months, the number of people hired who may have contact with inmates with criminal background record checks was 24. The Auditor examined personnel files employed in the past 12 months to determine that the agency has completed checks consistently with 115.17(c). A review of criminal background checks by the Auditor included six promotions, five rehires, and five new employees.

115.17 (d): The agency shall also perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates.

During her interview, the Human Resource Representative confirmed that, as stated in PAQ115.17 (d)-1, Agency policy requires a criminal background record check before hiring contractors who may contact inmates. The Auditor reviewed criminal background checks for six promotions, five rehires, and five new employees for 24 individuals hired or rehired in the past 12 months.

115.17 (e): The agency shall conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have a system for otherwise capturing such information for current employees.

During her interview, the Human Resource Representative confirmed that, as stated in PAQ 115.17 (e)-1, Agency policy requires that criminal background record checks be conducted at least every five years for current employees and contractors who may have contact with inmates or that a system is in place for otherwise capturing such information for current employees. The Auditor reviewed criminal background checks for six promotions, five rehires, and five new employees for 24 individuals hired or rehired in the past 12 months and 16 five-year background checks of current employees. Initially, it appeared that Manson omitted a five-year background check of 2 current employees. Upon further investigation, it appears the agency completed the five-year background checks.

115.17 (f): The agency shall 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 and in any interviews or written self-evaluations conducted as part of reviews of current employees. The agency shall also impose a continuing affirmative duty to disclose any such misconduct upon employees.

According to the Human Resource Representative, the agency imposes upon employees a continuing affirmative duty to disclose any such misconduct; the agency asks 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, the agency asks 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. By examination, this Auditor confirmed that the CDOC onboarding process includes all written questions outlined in Substandard 115.17 (f). (See Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Administrative Directive 2.3—Employee Selection, Transfer and Promotion, Policy 10.4—Volunteer and Recreation Services, and the Five-Year Background Schedule).

115.17 (g): Material omissions regarding such misconduct or the provision of materially false information are grounds for termination.

According to the Human Resource Representative, any material omissions regarding such misconduct or the provision of materially false information are grounds for termination. (See Connecticut Department of Correction (CDOC), Administrative

Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Administrative Directive 2.3—Employee Selection, Transfer and Promotion, Policy 10.4—Volunteer and Recreation Services, and the Five-Year Background Schedule).

115.17 (h): Unless prohibited by law, the agency shall 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.

According to the Human Resource Representative, unless prohibited by law, the agency shall 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. (See Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Administrative Directive 2.3—Employee Selection, Transfer and Promotion, Policy 10.4—Volunteer and Recreation Services, and the Five-Year Background Schedule).

**Evidence relied upon:**

1. PAQ
2. Facility tour and site review
3. Interview with Administrative (Human Resources) Staff (1)
4. Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, (effective 07/20/15) pages 1-19.
5. Connecticut Department of Correction (CDOC), Administrative Directive 2.3—Employee Selection, Transfer and Promotion, (effective 09/26/2014) pages 1-10.
6. Background record verification - contractors
7. Background record verification - re-hires
8. Background record verification - promotions

**Conclusion:**

The narrative above must include a comprehensive discussion of all the evidence relied upon in making the compliance after completing the corrective action period, the determination, the Auditor's analysis and reasoning, and the Auditor's conclusions.

**115.18 Upgrades to facilities and technologies**

**Auditor Overall Determination:** Meets Standard

<b>Auditor Discussion</b>
<p>115.18 (a): When designing or acquiring any new facility and planning any substantial expansion or modification of existing facilities, the agency shall consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse.</p>
<p>115.18 (a)-1 The agency/facility has acquired a new facility or made a substantial expansion or modification to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later. Yes.</p>
<p>Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention(effective 07/20/15) pages 1-19.</p>
<p>During an interview with the CDOC agency head designated authority for PREA, the director of the PREA Unit confirmed that when designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, the agency shall consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse.</p>
<p>During an interview with the facility Warden, this Auditor asks if there have been any substantial expansions or modifications to the facility since August 20, 2012, or the last PREA audit (whichever is later); consider: How has the facility assessed the impact of the expansion or modification on its ability to protect inmates from sexual abuse? The Warden indicated that Manson has seen substantial upgrades in electronic monitoring technology to enhance the sexual safety of inmates and staff.</p>
<p>During the facility tour, Manson identified examples of electronic technology upgrades for the Auditor.</p>
<p>115.18 (b): When installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the agency shall consider how such technology may enhance the agency's ability to protect inmates from sexual abuse.</p>
<p>115.18 (b)-1 The agency/facility has 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.</p>
<p>During an interview with the agency's head designated authority for PREA, the director of the PREA Unit confirmed that when installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the agency shall consider how such technology may enhance the agency's ability to protect inmates from sexual abuse.</p>
<p>When installing or updating monitoring technology, such as a video monitoring system or electronic surveillance, the Warden indicated that technology enhancement enhances the sexual safety of inmates and staff by providing monitoring in lieu of staff presence and can assist investigators when investigating allegations of sexual</p>

abuse or sexual harassment.

**Evidence relied upon:**

1. PAQ
2. Facility tour and site review
3. Interview with the agency head designee (PREA Coordinator)
4. Interview with Warden
5. Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention(effective 07/20/15) pages 1-19.

**Conclusion:**

The narrative above must include a comprehensive discussion of all the evidence relied upon in making the compliance after completing the corrective action period, the determination, the Auditor's analysis and reasoning, and the Auditor's conclusions.

<b>115.21 Evidence protocol and forensic medical examinations</b>	
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>115.21 (a): To the extent the agency is responsible for investigating allegations of sexual abuse, the agency shall follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions.</p> <p>115.21 (a)-1, The agency/facility is responsible for conducting administrative sexual abuse investigations (including inmate-on-inmate sexual abuse or staff sexual misconduct). Yes.</p> <p>The agency is responsible for conducting administrative sexual abuse investigations (including inmate-on-inmate sexual abuse or staff sexual misconduct). but only to the extent the agency is responsible for investigating allegations of sexual abuse. During separate interviews with the director of the agency PREA Unit and the Captain of the PREA Unit, each confirmed that the CDOC PREA Unit is responsible for investigating allegations of sexual abuse in the event the Connecticut State Police declines to investigate a sexual abuse allegation. The agency PREA Unit's director and the PREA Unit's Captain (trained investigator) each confirmed that CDOC follows a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. (See Connecticut</p>

Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Memorandum to the Connecticut State Police regarding Evidence Protocol, Administrative Directive 8.1 Scope of Health Services Care, CDOC Policies 1.10 Investigations, 6.6 Reporting of Incidents. 6.9 Collections and Retention of Contraband and Physical Evidence, Memorandum of Understanding (MOU) between the Connecticut State Patrol and the Connecticut Department of Corrections and Memorandum of Understanding between the Connecticut Sexual Assault Crisis Services, Inc. and the Connecticut Department of Corrections Evidence Protocol Guidelines). A review of the uniform evidence protocol for evidence confirms that there is sufficient technical detail to aid responders in obtaining usable physical evidence.

During random interviews with a sample of random staff (14), they were asked if they knew and understood the agency's protocol for obtaining usable physical evidence if an inmate alleges sexual abuse. All replied yes. Staff sampled provided explanations such as:

1. We protect the crime scene (5)
2. Do not allow the victim to wash or change clothes or brush their teeth (14)
3. Separate the victim from the abuser (14)
4. Notify a supervisor (14)
5. Document the incident (14)

The same sample of select random staff (14) were asked if you are the first person to be alerted that an inmate has allegedly been the victim of sexual abuse; what is your responsibility in that situation? These same staff responded in the following ways:

1. I would do the same things as I said before (11)
2. Call a supervisor (3)
3. Protect the victim (3)
4. Document (3)

115.21 (a)-2 The agency/facility is responsible for conducting criminal sexual abuse investigations (including inmate-on-inmate sexual abuse or staff sexual misconduct). No.

115.21 (a)-3 If another agency has responsibility for conducting either administrative or criminal sexual abuse investigations, the name of the agency that has responsibility (if another agency has responsibility for conducting both administrative and criminal sexual abuse investigations, skip to 115.21(c)-1): Connecticut State Police.

According to Administrative Directive 6.12, inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 16, Investigation of Sexual Abuse/Sexual

Harassment, the Connecticut State Police serves as the primary investigating authority in all incidents of sexual abuse within the Department of Correction. When inmates are housed within the community confinement centers with which the Department contracts, the appropriate law enforcement agency shall be the investigating authority. All such referrals to the Connecticut State Police (CSP) shall be documented. The Department's PREA Investigation Unit shall assist the appropriate law enforcement agency and conduct an internal investigation into the incident under Administrative Directive 1.10, Investigations. The PREA Investigation Unit or designee shall serve as the primary investigating authority for all incidents of sexual harassment. All PREA investigators shall complete specialized training under Administrative Directive 1.10. If the appropriate law enforcement agency declines to investigate a sexual abuse allegation, the decline shall be documented on an Incident Report Form CN 6601, and the Unit Administrator is immediately notified.

115.21 (a)-4 When conducting a sexual abuse investigation, the agency investigators follow a uniform evidence protocol. Yes.

115.21 (b): The protocol shall be developmentally appropriate for youth where applicable and, as appropriate, shall be 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.

115.21 (b)-1 The protocol is developmentally appropriate for youth. Yes.

Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention (effective 07/20/2015) pages 1-17.

Memorandum to Major, Chief of Staff, Office of the Deputy Commissioner, Connecticut State Police (effective 09/02/2014) regarding adherence to PREA guideline 115.21 Evidence Protocol and Forensic Medical Examinations from CDOC agency PREA Coordinator.

115.21 (b)-2 The protocol was adapted from or otherwise based on the most recent edition of the DOJ'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. Yes.

Manson is an adult facility with youthful inmates. Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, indicates that the protocol shall be developmentally appropriate for youth and, as applicable, shall be adapted from or otherwise based on the most recent edition of the U.S. Department of Justice Office on Violence against Women's publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011.

CDOC provided the Auditor with a memorandum regarding the uniform protocol for evidence collection guidelines sent to CSP to notify the agency of the requirement for the outside investigative entity to comply fully with Standard 115.21 (b) and ensure that the protocol is developmentally appropriate for youth and adapted from or otherwise based on the DOJ's publication according to the director of the PREA Unit. (See Connecticut Department of Corrections Evidence Protocol Guidelines memorandum dated 9/2/2014 for documentation of the request regarding the requirements of §115.21(a) through (e) with an outside investigating agency).

115.21 (c): The agency shall 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. Such examinations shall be performed by sexual assault forensic examiners (SAFES) or sexual assault nurse examiners (SANEs) where possible. If SAFES or SANEs cannot be made available, the examination can be performed by other qualified medical practitioners. The agency shall document its efforts to provide SAFES or SANEs.

115.21 (c)-1 The facility offers all inmates who experience sexual abuse access to forensic medical examinations. If no, skip to 115.21 (d)-1. Yes.

According to PAQ 115.21 (c)-1, The Manson facility offers all inmates who experience sexual abuse access to forensic medical examinations, as confirmed by the PCM and Captain of the CDOC PREA Unit. When medically appropriate, Manson offers all inmates who experience sexual abuse access to forensic medical examinations in the local community with a SANE examiner, where possible, as confirmed by the Captain of the PREA Unit. If SAFES or SANEs cannot be made available, the examination can be performed by other qualified medical practitioners. The agency shall document its efforts to provide SAFES or SANEs.

Administrative Directive 8.1, Scope of Health Care Services, Section 8, is the Unit Directive for Manson Youth Institution and other facilities, which delineates the level of responsibilities of outside medical and mental health practitioners conducting forensic examinations. See Administrative Directive 8.1, Scope of Health Care Services, Diagnostic Services, Emergency Services, Intake Health Screening, Health Assessments, and Periodic Health Examinations for more information to confirm that all inmates have access to forensic examination.

115.21 (c)-2 The facility offers all inmates who experience sexual abuse access to forensic medical examinations onsite. No.

115.21 (c)-3 The facility offers all inmates who experience sexual abuse access to forensic medical examinations at an outside facility. Yes.

115.21 (c)-4 Forensic medical examinations are offered without financial cost to the victim. Yes.

Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 13 Staff monitoring and Intervention (Sexual Abuse) (effective 07/20/2015) pages 10-13.

Connecticut Department of Correction (CDOC), Administrative Directive 8.1 Scope of Health Care Services, Section F., Emergency Services (effective 11/02/2014) page 5.

115.21 (c)-5 Where possible, examinations are conducted by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs). Yes. Inmates are transported to an outside facility for a forensic examination where a SANE/SAFE is located.

115.21 (c)-6 When SANEs or SAFEs are unavailable, a qualified medical practitioner performs forensic medical examinations. Yes.

115.21 (c)-7 The facility documents efforts to provide SANEs or SAFEs. Not applicable during this reporting period. See 115.21 (c)-8, (c)-9 and (c)-10.

115.21 (c)-8 The number of forensic medical exams conducted during the past 12 months: 0.

115.21 (c)-9 The number of exams performed by SANEs/SAFEs during the past 12 months: 0.

According to PAQ 115.21 (c)-9, The number of exams performed by SANEs/SAFEs during the past 12 months was zero, as confirmed by the director of the PREA Unit and review of investigative reports for this reporting period. Further, PAQ 115.21 (c)-10 The number of exams performed by a qualified medical practitioner during the past 12 months: zero, as confirmed by the director of the PREA Unit and review of investigative reports for this reporting period.

An emergency room representative (ER) confirmed that the SANE medical examiner program is responsible for conducting all forensic medical examinations. Victims of sexual assault are transported to local hospitals for a forensic examination to be performed by a SANE examiner. Local Connecticut hospitals have SANE examiners available daily on all shifts. When a SANE examiner is unavailable, the physician assigned to the emergency room will conduct the SANE examination.

115.21 (c)-10 The number of exams a qualified medical practitioner performs during the past 12 months: 0.

See Connecticut Department of Correction (CDOC), Administrative Directive 8.1 Scope of Health Care Services, Section F., Emergency Services (effective 11/02/2014), page 5.

See Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 13 Staff monitoring and Intervention (Sexual Abuse) (effective 07/20/2015) pages 10-13.

115.21 (d): The agency shall attempt to make available to the victim a victim advocate from a rape crisis center. If a rape crisis center is not available to provide victim advocate services, the agency makes available to provide these services a qualified staff member from a community-based organization or a qualified agency staff member. Agencies shall document efforts to secure services from a rape crisis

center. For this standard, a rape crisis center refers to an entity that provides intervention and related assistance, such as the services specified in 42 U.S.C. 14043g(b)(2)(C), to victims of sexual assault of all ages. The agency may utilize a rape crisis center that is part of a governmental unit if the center is not part of the criminal justice system (such as a law enforcement agency) and offers a comparable level of confidentiality as a nongovernmental entity that provides similar victim services.

115.21 (d)-1 The facility attempts to make a victim advocate from a rape crisis center available to the victim, either in person or by other means. Yes.

See Connecticut Department of Correction (CDOC), Administrative Directive 8.1 Scope of Health Care Services, Section F., Emergency Services (effective 11/02/2014), page 5.

See Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 13 Staff monitoring and Intervention (Sexual Abuse) (effective 07/20/2015) pages 10-13.

Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, indicates that the agency shall attempt to make available to the victim a victim advocate from a rape crisis center. If a rape crisis center is not available to provide victim advocate services, the agency makes available to provide these services a qualified staff member from a community-based organization or a qualified agency staff member. Agencies shall document efforts to secure services from rape crisis centers. For this standard, a rape crisis center refers to an entity that provides intervention and related assistance, such as the services specified in 42 U.S.C. 14043g(b)(2)(C), to victims of sexual assault of all ages. The agency may utilize a rape crisis center that is part of a governmental unit as long as the center is not part of the criminal justice system (such as a law enforcement agency) and offers a comparable level of confidentiality as a nongovernmental entity that provides similar victim services. As reported in Substandard 115.21 (d), victim advocacy services are provided through unit personnel who have received specialized training when an advocate is not available from Connecticut Sexual Assault Crisis Services, Inc.

Further, Administrative Directive 8.1, Scope of Health Services Care indicates that all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility shall be offered any medical and mental health services that are medically appropriate, including initial evaluations, follow-up services, and, as needed, referrals for continued care following their transfer to or placement in other facilities or their release from custody. AD 8.1 Scope of Health Services Care, Emergency Services states where medically appropriate, inmate victims of sexual abuse, while incarcerated, shall be offered timely information about and timely access to emergency contraception testing for sexually transmitted diseases and sexually transmitted infections prophylaxis at no cost, following professionally accepted standards of care.

115.21 (d)-2 These efforts are documented. Yes.

As confirmed by the PCM, see 115.21 (c)-1, Manson offers all inmates who experience sexual abuse access to forensic medical examinations in the local community. Zero forensic examinations occur during this reporting period based on investigative reports provided by the agency.

CDOC provided this Auditor with evidence that the agency makes available to the victim a victim advocate through an agreement between CDOC and the Connecticut Sexual Assault Crisis Services (CONNSAC), a statewide victim advocacy alliance organization to provide (phone) emotional support services, support during a hospital forensic examination, support during the investigative process, and crisis counseling for inmates identified as sexually abused, or trauma victims. If victim advocacy services are unavailable through the Connecticut Sexual Assault Crisis Services (CONNSAC) per the agreement, CDOC will provide crisis intervention by a facility mental health practitioner who has received specialized training.

115.21 (d)-3 If and when a rape crisis center is not available to provide victim advocate services, the facility provides a qualified staff member from a community-based organization or a qualified agency staff member. Yes.

According to the Connecticut Alliance to End Sexual Violence, emotional support services are available 24/7. Calls received are routed to a designated regional or county affiliate.

During an interview with the facility PCM, the Auditor asked if victims who request a victim advocate, qualified agency staff member, or qualified community-based organization staff member would be accompanied and provided with emotional support, crisis intervention, information, and referrals during the forensic medical examination process and investigatory interviews. The PCM responded yes. During this reporting period, zero inmates received a forensic examination. Further, the PCM explained that services provided by medical practitioners and outside emotional support organizations include telephonic emotional support and follow-up services when the inmate is discharged. 115.21 (e): As requested by the victim, the victim advocate, qualified agency staff member, or qualified community-based organization staff member shall accompany and support the victim through the forensic medical examination process and investigatory interviews and provide emotional support, crisis intervention, information, and referrals.

Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, indicates that as requested by the victim, the victim advocate, qualified agency staff member, or qualified community-based organization staff member shall accompany and support the victim through the forensic medical examination process and investigatory interviews and provide emotional support, crisis intervention, information, and referrals.

Further, CDOC provided as evidence an agreement between CDOC and the Connecticut Sexual Assault Crisis Services (CONNSAC), a statewide alliance organization for victims of sexual assault, to give emotional phone support services, support during a hospital forensic examination, support during the investigative

process, and crisis counseling for inmates identified as sexually abused or trauma victims.

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

115.21 (e)-1 If requested by the victim, a victim advocate, qualified agency staff member, or qualified community-based organization staff member accompanies and supports the victim through the forensic medical examination process and investigatory interviews and provides emotional support, crisis intervention, information, and referrals. Yes. See PREA Victim Advocate MOU.

According to the Connecticut Alliance to End Sexual Violence, emotional support services are available 24/7. Calls received are routed to a designated regional or county affiliate.

115.21 (f): To the extent the agency itself is not responsible for investigating allegations of sexual abuse, the agency shall request that the investigating agency follow the requirements of paragraphs (a) through (e) of this section.

115.21 (f)-1 If the agency is not responsible for investigating administrative or criminal allegations of sexual abuse and relies on another agency to conduct these investigations, the agency has requested that the responsible agency follow the requirements of paragraphs §115.21 (a) through (e) of the standards. Yes.

See Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention (effective 07/20/2015), pages 1-17.

See the documentation of the request regarding the requirements of §115.21(a) through (e) with an outside investigating agency. 115.21 (b)-1., Memorandum to Major, Chief of Staff, Office of the Deputy Commissioner, Connecticut State Police (effective 09/02/2014) regarding adherence to PREA guideline 115.21 Evidence Protocol and Forensic Medical Examinations from CDOC agency PREA Coordinator.

Memorandum of Understanding (MOU) between the Connecticut State Patrol and the Connecticut Department of Corrections and the Memorandum of Understanding between the Connecticut Sexual Assault Crisis Services, Inc. and the Connecticut Department of Corrections Evidence Protocol Guidelines delineates the request that the investigating agency (Connecticut State Police) follow the requirements of paragraphs (a) through (e) of this section.

During the audit, the Auditor interviewed the PREA Compliance Manager and ask if how doe the agency ensures that a rape crisis center provides victim advocate services and meets the qualifications described in Standard 115.21 (d). The PREA Compliance Manager indicated that the agency has a contractual agreement

enforceable by the agency.

During an internet search, this Auditor confirmed that for the last 40 years, The Connecticut Alliance to End Sexual Violence, commonly called the Alliance, has nine member centers that have provided free and confidential services to children, adolescents, and adult victims of sexual violence throughout Connecticut. Survivors can access services 24/7/365 via phone or at their local center. Each center offers counseling, support groups, accompaniments in hospital, police, and court settings, case management and support while navigating complex systems post-disclosure, and a myriad of other trauma-informed services that support healing, connection, and justice. Further, the Alliance employs certified sexual assault crisis counselors, including any person who works for an Alliance sexual assault crisis member center and has been certified under Connecticut State Statute 52-146 k. Their certified sexual assault crisis counselors have successfully completed a minimum of 40 hours of training and receive at least 4 hours of advanced training annually. They are under the direct supervision of staff at the sexual assault crisis center they trained at, and their primary purpose is to provide advocacy, support, information, referrals, crisis counseling, and other types of assistance to victims of sexual violence.

According to Connecticut State Statute 52-146 k, Section 5, "Sexual Assault Counselor" means (A) any person engaged in a rape crisis center who (i) has undergone a minimum of twenty hours of training which shall include, but not be limited to, the dynamics of sexual assault and incest, crisis intervention, communication skills, working with diverse populations, an overview of the state criminal justice system, information about hospital and medical systems and information about state and community resources for sexual assault victims, (ii) is certified as a counselor by the sexual assault center which has provided such training, (iii) is under the control of a direct services supervisor of a rape crisis center, and (iv) whose primary purpose is the rendering of advice, counseling and assistance to, and the advocacy of the cause of, victims of sexual assault, or (B) any member of the armed forces of the state or the United States who is trained and certified as a victim advocate or a sexual assault prevention coordinator in accordance with the military's sexual assault prevention and response program.

115.21 (g): The requirements of paragraphs (a) through (f) of this section shall also apply to (1) Any State entity outside of the agency that is responsible for investigating allegations of sexual abuse in prisons or jails and (2) Any Department of Justice component that is responsible for investigating allegations of sexual abuse in prisons or jails.

The Auditor is not required to audit this provision.

115.21 (h): For the purposes of this section, a qualified agency staff member or a qualified community-based staff member shall be an individual who has been screened for appropriateness to serve in this role and has received education concerning sexual assault and forensic examination issues in general.

Moreover, as indicated in Substandard 115.21 (d), victim advocacy services are offered by mental health practitioners who have received specialized training when

an advocate is not available from Connecticut Sexual Assault Crisis Services, Inc. Interviews with a sample of medical and mental health practitioners each confirmed completion of specialized training. CDOC provided this Auditor with evidence of the participation in specialized training regarding sexual abuse and sexual harassment, including but not limited to how to detect and assess signs of sexual abuse and sexual harassment and how to respond effectively and professionally to juvenile victims of sexual abuse and sexual harassment.

According to Connecticut State Statute 52-146 k, Section 5, "Sexual Assault Counselor" means (A) any person engaged in a rape crisis center who (i) has undergone a minimum of twenty hours of training which shall include, but not be limited to, the dynamics of sexual assault and incest, crisis intervention, communication skills, working with diverse populations, an overview of the state criminal justice system, information about hospital and medical systems and information about state and community resources for sexual assault victims, (ii) is certified as a counselor by the sexual assault center which has provided such training, (iii) is under the control of a direct services supervisor of a rape crisis center, and (iv) whose primary purpose is the rendering of advice, counseling and assistance to, and the advocacy of the cause of, victims of sexual assault, or (B) any member of the armed forces of the state or the United States who is trained and certified as a victim advocate or a sexual assault prevention coordinator in accordance with the military's sexual assault prevention and response program.

**Evidence relied upon:**

1. PAQ
2. Review uniform evidence protocol for evidence
3. Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention (effective 07/20/2015) pages 1-17.
4. Memorandum to Major, Chief of Staff, Office of the Deputy Commissioner, Connecticut State Police (effective 09/02/2014) regarding adherence to PREA guideline 115.21 Evidence Protocol and Forensic Medical Examinations from CDOC agency PREA Coordinator.
5. Connecticut Department of Correction (CDOC), Administrative Directive 8.1 Scope of Health Care Services, Section F., Emergency Services (effective 11/02/2014) page 5.
6. Interview with a select sample of random staff (14)
7. Interview with the PREA Compliance Manager
8. Interview with the agency Captain of the PREA Unit
9. Internet search, Connecticut State Statute 52-146 k, Section 5

**Conclusion:**

The narrative above must include a comprehensive discussion of all the evidence relied upon in making the compliance after completing the corrective action period, the determination, the Auditor's analysis and reasoning, and the Auditor's conclusions.

115.22	<b>Policies to ensure referrals of allegations for investigations</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>115.22 (a): The agency shall ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment.</p> <p>115.22 (a)-1 The agency ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment (including inmate-on-inmate sexual abuse and staff sexual misconduct). Yes.</p> <p>Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 16, Investigation of Sexual Abuse/Sexual Harassment (effective 07/02/2015), pages 14-15.</p> <p>Connecticut Department of Correction (CDOC), Administrative Directive 1.10, Investigations (effective 09/27/2020) pages 1-5.</p> <p>115.22 (a)-2 In the past 12 months, the number of allegations of sexual abuse and sexual harassment that were received: 2.</p> <p>115.22 (a)-3 In the past 12 months, the number of allegations resulting in an administrative investigation: 1.</p> <p>115.22 (a)-4 In the past 12 months, the number of allegations referred for criminal investigation: 1.</p> <p>Select directives governing investigations of allegations of sexual abuse and sexual harassment were reviewed by the Auditor. According to the Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, administrative or criminal investigation shall be completed for all allegations of sexual abuse and sexual harassment. During his interview, the Captain of the PREA Unit, a trained investigator, confirmed that CDOC ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment (including inmate-on-inmate sexual abuse and staff sexual misconduct).</p> <p>Problematic, PAQ 115.22 (a) 4 asks. In the past 12 months, Manson referred to one allegation of abuse for criminal investigation, but records indicate two allegations of sexual abuse during this reporting period. Investigative records indicate that during this reporting period, Manson prematurely conducted and closed an investigation into an allegation of sexual abuse at the facility level after consulting with a facility Duty Officer. The Duty Officer had the discretion to decide whether to notify CPS about an allegation of sexual abuse occurring at the facility based on a CDOC PREA Checklist. A Manson facility Duty Officer bypassed the CSP, the criminal investigative entity, and proceeded with interviewing both the victim and the accused. Manson generated an incident report that included interviewing both parties, capturing video, monitoring</p>

phone conversations, reviewing video footage, compiling an investigative report, and submitting an unsubstantiated finding.

A review of an investigation referenced in 115.22 (a) 4 as criminal indicates that the CSP did not investigate the allegation of sexual abuse as required by the CDOC administrative directive. Administrative Directive 1.10, Investigations Section 5, page 2, which specifies that criminal investigations, including those concerning allegations of sexual abuse, fall under the authority of the Connecticut State Police. Department personnel are to secure the crime scene under Administrative Directive 6.9, Control of Contraband and Physical Evidence, whenever a crime is discovered. Although Department personnel may assist the Connecticut State Police upon request, they should not independently engage in investigative activities, such as conducting interviews. The Department may conduct an Administrative Investigation only with authorization from the Connecticut State Police. Additionally, both CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, and AD 1.10 Investigation stipulate that allegations of sexual abuse must be referred for investigation to an agency with the legal authority to conduct criminal investigations unless the allegation does not involve potentially criminal behavior. CDOC maintains an agreement with the Connecticut State Police to investigate allegations of sexual abuse. Administrative Directives 6.12 and 1.10 were not adhered to. The agency CDOC PREA Unit was not made aware of the decision until the start of this audit. This requires corrective action.

The missteps were compounded by the fact that the investigative narrative of both the victim and the accused declined to make a statement; it is not uncommon for law enforcement to return to both the victim and the accused to revisit the incident and request an interview with both parties. Also problematic was a review of the Initial Report or Allegations of Sexual Abuse, PREA Checklist, Connecticut Department of Corrections, form CN-61201, which has a reporting error. The checklist gives correctional managers discretion when contacting the Connecticut State Police. Directives 6.12 and 1.10 Investigations are clear. Facilities must contact CSP for all allegations of sexual abuse when criminal activity is discovered during a Department investigation; the matter shall be referred to the Connecticut State Police through the appropriate chain of command. Further, the incident was investigated by a correctional staff manager who had not taken the required specialized training, nor was that staff an investigator from the agency PREA Unit.

The second incident report reviewed by the Auditor involved an allegation by a youthful inmate that during a search, the youthful inmate was inappropriately touched on the buttock by an officer conducting a pat search. The facility notified the Connecticut State Police, and Manson was issued a case number by CSP Officer # 493. The facility Lieutenant collected witness statements, interviewed the victim and the accused, reviewed footage of the HET metal detector, and determined that the allegations at the facility level were unsubstantiated.

Administrative Directive 1.10, Investigations Section 5, page 2, states that criminal investigations, including allegations of sexual abuse, shall fall under the jurisdiction of the Connecticut State Police. When a crime is detected, Department personnel shall

secure the crime scene in accordance with Administrative Directive 6.9, Control of Contraband and Physical Evidence. Department personnel may assist the Connecticut State Police upon request but shall not independently conduct investigative activities, including interviews. The Department may conduct an administrative investigation upon authorization of the Connecticut State Police to do so. Further, both CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, and AD 1.10 Investigation mandates that allegations of sexual abuse be referred for investigation to an agency with the legal authority to conduct criminal investigations unless the allegation does not involve potentially criminal behavior. CDOC has an agreement with the Connecticut State Police to investigate allegations of sexual abuse. Administrative Directives 6.12 and 1.10 were not followed. A Manson facility Duty Officer decided to bypass CSP, the criminal investigative entity and moved forward in interviewing the victim and the accused. This requires corrective action.

115.22 (a)-5 Regarding the allegations received in the past 12 months, all facility administrative and possible criminal investigations have been completed, and Manson confirmed this. Yes.

During this audit, the Auditor interviewed the agency head (designee) and asked to describe how an administrative or criminal investigation is completed for allegations of sexual abuse or harassment. The agency head (designee) indicated that allegations of sexual abuse are referred to the PREA Unit and CSP. CSP will determine if an investigation is potentially criminal and if they will proceed.

The PREA Coordinator indicated that the point of contact for any allegations of sexual abuse or sexual harassment referred by another agency that occurred within one of your facilities would be the PREA Compliance Manager and the PREA Unit. If a facility within CDOC relates allegations of sexual abuse or sexual harassment that occurred within a CDOC facility, the designated point of contact will remain the same. The PCM and the PREA Unit would be responsible for following AD 1.10 Investigation, which mandates that allegations of sexual abuse be referred for investigation to an agency with the legal authority to conduct criminal investigations unless the allegation does not involve potentially criminal behavior.

115.22 (b): The agency shall have a policy 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. The agency publishes such a policy on its website or, if it does not have one, makes it available through other means. The agency documents all such referrals.

115.22 (b)-1 The agency has a policy that requires that allegations of sexual abuse or sexual harassment be referred for investigation to an agency with the legal authority to conduct criminal investigations, including the agency if it conducts its investigations unless the allegation does not involve potentially criminal behavior. Yes.

Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 16, Investigation of Sexual Abuse/Sexual Harassment (effective 07/02/2015), pages 14-15.

Connecticut Department of Correction (CDOC), Administrative Directive 1.10, Investigations (effective 09/27/2020) pages 1-5.

115.22 (b)-2 The agency's policy regarding the referral of allegations of sexual abuse or sexual harassment for criminal investigation is published on the agency website or made publicly available via other means. Yes.

115.22 (b)-3 The agency documents all referrals of allegations of sexual abuse or sexual harassment for criminal investigation. Yes.

In an interview, an investigator was asked if agency policy mandates referring allegations of sexual abuse or harassment for criminal investigation unless they do not involve potentially criminal behavior. He responded yes.

During an internet search, this Auditor confirmed that CDOC policy is readily available on the website. Also see 115.22 (a)-4.

Documentation of referrals of allegations of sexual abuse and/or sexual harassment.

The Auditor reviewed select directives governing investigations of allegations of sexual abuse and sexual harassment. According to the Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention; Connecticut Administrative Directive 1.10, Investigations; Criminal Investigations; and Administrative Directive 6.6, Reporting of Incidents, confirm that CDOC has directives 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. By examining the agency's formal website, the Auditor confirmed that the agency publishes these directives. The director of the PREA Unit confirmed that CDOC documents all such referrals.

115.22 (c): If a separate entity is responsible for conducting criminal investigations, such publication shall describe the responsibilities of both the agency and the investigating entity.

As confirmed by the director of the PREA Unit, there is a memorandum of Understanding between CDOC and the Connecticut State Police (CSP) to investigate allegations of sexual abuse.

115.22 (d): Any State entity responsible for conducting administrative or criminal investigations of sexual abuse or sexual harassment in prisons or jails shall have in place a policy governing the conduct of such investigations.

115.22 (d)-1 If another state entity is responsible for investigating alleged sexual abuse, it must have a policy on how these investigations are conducted. Yes.

Auditor is not required to audit this provision.

115.22 (e): Any Department of Justice component responsible for conducting administrative or criminal investigations of sexual abuse or sexual harassment in prisons or jails shall have in place a policy governing the conduct of such investigations. Yes.

Auditor is not required to audit this provision.

**Evidence relied upon:**

1. PAQ
2. Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 16, Investigation of Sexual Abuse/Sexual Harassment (effective 07/02/2015), pages 14-15.
3. Connecticut Department of Correction (CDOC), Administrative Directive 1.10, Investigations (effective 09/27/2020) pages 1-5.
4. Documentation of reports of sexual abuse and harassment (2)
5. Documentation of investigations and investigative reports with findings (2)
6. Interview with the Agency Head (designee)
7. Interview with investigative staff
8. Internet search CDOC webpage
9. Examination of referrals of allegations of sexual abuse and/or sexual harassment
10. Connecticut State Police MOU with CDOC (effective 04/03/14)

**Corrective Action:**

1. 115.22 (a) 4. Manson will re-examine the investigation completed at the facility level by an investigator who is trained and meets all requirements as outlined in PREA Standards. Manson will issue a new directive to align with Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 16, Investigation of Sexual Abuse/Sexual Harassment (effective 07/02/2015), pages 14-15 and Connecticut Department of Correction (CDOC), Administrative Directive 1.10, Investigations (effective 09/27/2020) pages 1-5. This Auditor will monitor for compliance during the corrective action period.
3. CDOC/Manson will revise the PREA Checklist to align with Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 16, Investigation of

	<p>Sexual Abuse/Sexual Harassment (effective 07/02/2015), pages 14-15 and Connecticut Department of Correction (CDOC), Administrative Directive 1.10, Investigations (effective 09/27/2020) pages 1-5. This Auditor will monitor for compliance during the corrective action period.</p> <p>4. 115.22 (a): The agency shall ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment.</p> <p>5. CDOC will revise the agency form CN-61201, Initial Report or Allegation of Sexual Abuse PREA Checklist, removing the Warden's/Duty Officer's discretion in reporting sexual abuse to the Connecticut State Police.</p> <p>6. CDOC/Manson will advise correctional managers in writing of the changes to CN-61201 Initial Report or Allegation of Sexual Abuse PREA Checklist, removing the Warden's/Duty Officer's discretion in reporting sexual abuse to the Connecticut State Police.</p> <p><b>Conclusion:</b></p> <p>The narrative above must include a comprehensive discussion of all the evidence relied upon in making the compliance after completing the corrective action period, the determination, the Auditor's analysis and reasoning, and the Auditor's conclusions.</p>
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<b>115.31</b>	<b>Employee training</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<p><b>Auditor Discussion</b></p> <p>115.31 (a): The agency shall train all employees who may have contact with inmates on: (1) Its zero-tolerance policy for sexual abuse and sexual harassment; (2) How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures; (3) Inmates' rights to be free from sexual abuse and sexual harassment; (4) The right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment; (5) The dynamics of sexual abuse and sexual harassment in confinement; (6) The common reactions of sexual abuse and sexual harassment victims; (7) How to detect and respond to signs of threatened and actual sexual abuse; (8) How to avoid inappropriate relationships with inmates; (9) How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates; and (10) How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.</p>
	<p>115.31 (a)-1 The agency trains all employees who may have contact with inmates on the agency's zero-tolerance policy for sexual abuse and sexual harassment. Yes.</p>

Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 9, (effective 07/07/20/2015) page 6.

115.31 (a)-2 The agency trains 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.

According to the PCM, CDOC trains all employees who may have contact with inmates on the agency's zero-tolerance policy for sexual abuse and sexual harassment. (See Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 9, (effective 07/07/20/2015) page 6. Problematic employee PREA Training Curriculum and Sign-in sheets were omitted as evidence to support this substandard was omitted. However, during a sample of interviews with random (14) and specialized staff, all confirmed completing PREA-related training at least annually. This substandard requires corrective action.

115.31 (a)-3 The agency trains all employees who may have contact with inmates on the right of inmates to be free from sexual abuse and sexual harassment. Yes.

Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 9, (effective 07/07/20/2015) page 6.

115.31 (a)-4 The agency trains all employees who may have contact with inmates on the rights of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment. Yes.

Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 9, (effective 07/07/20/2015) page 6.

115.31 (a)-5 The agency trains all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement. Yes.

Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 9, (effective 07/07/20/2015) page 6.

115.31 (a)-6 The agency trains all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims. Yes.

Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 9, (effective 07/07/20/2015) page 6.

115.31 (a)-7 The agency trains all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse. Yes.

Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 9, (effective 07/07/20/2015) page 6.

115.31 (a)-8 The agency trains all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates. Yes.

Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention

and Intervention, Section 9, (effective 07/07/2015) page 6.

115.31 (a)-9 The agency trains 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.

Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 9, (effective 07/07/2015) page 6.

115.31 (a)-10 The agency trains 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.

Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 9, (effective 07/07/2015) page 6.

115.31 (b): Such training shall be tailored to the gender of the inmates at the employee's facility. The employee shall receive additional training if reassigned from a facility that houses only female inmates or vice versa.

115.31 (b)-1 Training is tailored to the gender of the inmates at the facility. Yes.

Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 9, (effective 07/07/2015) page 6.

Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, indicates that training shall be tailored to the inmates' gender at the employee's facility. The employee shall receive additional training if reassigned from a facility that houses only female inmates or vice versa. Problematic, a random sample of training records identified by the Auditor was omitted as evidence of compliance. This substandard requires corrective action.

115.31 (b)-2

Employees who are reassigned from facilities housing the opposite gender are given additional training.

Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 9, (effective 07/07/2015) page 6.

115.31 (c): All current employees who have not received such training shall be trained within one year of the effective date of the PREA standards. The agency shall 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. In years when an employee does not receive refresher training, the agency shall provide information on current sexual abuse and sexual harassment policies.

115.31 (c)-2 Between trainings the agency provides employees who may have contact with inmates with refresher information about current policies regarding sexual abuse and sexual harassment. Yes. The training is described as online training.

Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 9, (effective 07/07/20/2015) page 6.

Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, indicates that all current employees who have not received such training shall be trained within one year of the effective date of the PREA standards. The agency shall 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. In years when an employee does not receive refresher training, the agency shall provide information on current sexual abuse and sexual harassment policies. During the onsite portion of this audit, the Auditor interviewed a random sample of staff (14). All staff interviewed confirmed receiving refresher PREA-related training at least annually. Problematic supporting evidence in the form of training records was omitted as evidence.

115.31 (c)-3 The frequency with which employees who may have contact with inmates receive refresher training on PREA requirements. Annually.

Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 9, (effective 07/07/20/2015) page 6.

115.31 (d): The agency shall document, through employee signature or electronic verification, that employees understand the training they have received.

115.31 (d)-1 The agency documents that employees who may have contact with inmates understand the training they have received through employee signature or electronic verification. Yes.

Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 9, (effective 07/07/20/2015) page 6.

Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, indicates that CDOC shall document, through employee signature or electronic verification, that employees understand their training. Problematic, Manson omitted evidence of compliance in the form of the select training curriculum page and section. This standard requires corrective action.

**Evidence relied upon:**

1. PAQ
2. CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention (effective 07/20/2015)
3. Interviews with random staff (14)
4. Review of documentation of employee signatures or verification process

**Corrective Action:**

1. CDOC will submit a select group of training records for review by the Auditor.

2. CDOC will submit the PREA-related training curriculum.
3. CDOC will submit evidence that training is tailored to the inmate's gender in the facility.
4. CDOC will submit documentation of employee signatures or electronic verification signifying comprehension of the training.

**Conclusion:**

The narrative above includes a comprehensive discussion of all the evidence relied upon in making the compliance after corrective action, the Auditor's analysis and reasoning, and the Auditor's conclusions.

<b>115.32</b>	<b>Volunteer and contractor training</b>
<b>Auditor Overall Determination:</b> Meets Standard	
<b>Auditor Discussion</b>	<p>Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse and Sexual Harassment Prevention and Intervention, Volunteer PREA Training Curriculum and VIP Sign-in sheet Acknowledgements, VIP Volunteer Handbook, VIP PREA Handbook, and VIP Safety and Security Training Orientation collectively address Standard 115.32.</p> <p>115.32 (a): The agency shall ensure 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.</p> <p>Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse and Sexual Harassment Prevention and Intervention, Section 9, Inservice Training, page 6, indicates all contractors and volunteers who have contact with inmates must be trained on their responsibilities under the agency's sexual abuse prevention and intervention policy. The level and type of training provided to volunteers, vendors, and contractors shall be based on the services they provide and their level of contact with inmates. Still, all volunteers, vendors, and contractors who have contact with inmates shall be notified of the agency's zero-tolerance policy for inmate sexual abuse and harassment and informed on how to report any incidents.</p> <p>The agency shall maintain documentation confirming that volunteers, vendors, and contractors. According to and confirmed by the PCM, Manson has zero contract staff. The Auditor examined the CDOC volunteer and contractor training curriculum, a sample of training records, and other relevant documentation, such as the signed acknowledgment understanding records of 4 volunteers.</p> <p>115.32 (b): The level and type of training provided to volunteers and contractors shall be based on the services they provide and the level of contact they have with</p>

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

Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse and Sexual Harassment Prevention and Intervention, Section 9, Inservice Training, page 6, indicates all contractors and volunteers who have contact with inmates must be trained on their responsibilities under the agency's sexual abuse prevention and intervention policy. The level and type of training provided to volunteers, vendors, and contractors shall be based on the services they provide and their level of contact with inmates. Still, all volunteers, vendors, and contractors who have contact with inmates shall be notified of the agency's zero-tolerance policy for inmate sexual abuse and harassment and informed on how to report any incidents.

The agency shall maintain documentation confirming that volunteers, vendors, and contractors. According to and confirmed by the PCM, Manson has zero contract staff. The Auditor examined the CDOC volunteer and contractor training curriculum, a sample of training records, and other relevant documentation, such as the signed acknowledgment understanding records of 4 volunteers. Manson indicates zero contract staff assigned to the facility with contact with juvenile inmates.

115.32 (c): The agency shall maintain documentation confirming that volunteers and contractors understand the training they have received.

Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse and Sexual Harassment Prevention and Intervention, Section 9, Inservice Training, page 6, indicates all contractors and volunteers who have contact with inmates must be trained on their responsibilities under the agency's sexual abuse prevention and intervention policy. The level and type of training provided to volunteers, vendors, and contractors shall be based on the services they provide and their level of contact with inmates. Still, all volunteers, vendors, and contractors who have contact with inmates shall be notified of the agency's zero-tolerance policy for inmate sexual abuse and harassment and informed on how to report any incidents. From a sample of training records, this Auditor determined that CDOC maintains documentation confirming that hat volunteers and contractors understand their training.

### **115.33 Inmate education**

**Auditor Overall Determination:** Meets Standard

#### **Auditor Discussion**

115.33 (a): During the intake process, inmates shall receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment.

115.33 (a)-1 Inmates receive information at the time of intake about the zero-

tolerance policy and how to report incidents or suspicions of sexual abuse or sexual harassment. Yes.

- CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Inmate Education, Section 10, (effective 07/20/2015), pg 7.
- CDOC Administrative Directive 10.12, Section 3, Initial Orientation (effective 09/15/2008) page 1.
- CDOC Administrative Directive 10.19 Americans with Disabilities Act, Section 7., Inmate Admission and Orientation (effective 09/24/2021) page 4.

115.33 (d)-2 Inmate PREA education is available in formats accessible to all inmates, including those who are deaf. Yes.

See 115.33 (a)-1. Department of Correction Administrative Directive 10.19 sets out procedures for making reasonable accommodations for inmates with disabilities. It covers assistance devices for deaf, hard of hearing, blind, and visually impaired inmates.

115.33 (d)-3 Inmate PREA education is available in formats accessible to all inmates, including the visually impaired. Yes.

See 115.33 (a)-1. Department of Correction Administrative Directive 10.19 sets out procedures for making reasonable accommodations for inmates with disabilities. It covers assistance devices for deaf, hard of hearing, blind, and visually impaired inmates.

115.33 (d)-4 Inmate PREA education is available in formats accessible to all inmates, including those who are otherwise disabled. Yes.

See 115.33 (a)-1. Department of Correction Administrative Directive 10.19 sets out procedures for making reasonable accommodations for inmates with disabilities. It covers assistance devices for deaf, hard of hearing, blind, and visually impaired inmates.

115.33 (d)-5 Inmate PREA education is available in formats accessible to all inmates, including those with limited reading skills. Yes.

See 115.33 (a)-1. Department of Correction Administrative Directive 10.19 sets out procedures for making reasonable accommodations for inmates with disabilities. It covers assistance devices for deaf, hard of hearing, blind, and visually impaired inmates.

CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Inmate Education, Section 10, page 7, states that during the intake process, each inmate shall receive an orientation that includes a presentation of the PREA video titled "PREA- What you need to know" following Administrative Directive 10.12, Inmate Orientation. Each inmate shall sign the designated form acknowledging receipt of such materials, which shall be maintained

in the inmate's Master File. Inmates assigned to a restrictive status or inmates whose status and behavior preclude them from attending group orientation sessions shall receive a "Sexual Abuse/ Sexual Harassment Prevention for Inmates" handout as well as the Inmate Handbook with information regarding the Prison Rape Elimination Act and personal safety.

According to intake staff interviewed during the onsite portion of this audit, during orientation, inmates are made aware of CDOC's zero-tolerance policy for sexual abuse and sexual harassment, as well as at least two internal methods of reporting sexual abuse/sexual harassment and one method of reporting sexual abuse to an external entity that is not part of the Department of Correction. Third-party and anonymous reporting must be allowed. Additionally, inmates shall be provided with contact information for victim advocacy groups that provide services to victims of sexual abuse.

Inmates with disabilities who are prevented from accessing the materials in the format(s) they are regularly offered shall be accommodated in a way appropriate to their disability by Administrative Directive 10.19, Americans with Disabilities Act. CDOC Administrative Directive 10.19 outlines procedures for making reasonable accommodations for inmates with disabilities. It covers assistive devices for deaf, hard-of-hearing, blind, and visually impaired inmates. Intake records of inmates entering the previous 12 months were identified for sampling from the facility inmate population across all living units. This Auditor interviewed eight Spanish-speaking youthful inmates. All were bilingual. All confirmed during intake that they were provided PREA-related information in a language they understood. Zero indicated any problem communicating with Manson staff. All detailed what PREA was and how to report sexual abuse or sexual harassment to a trusted staff person or use the hotline.

As part of the on-site portion of this audit, the intake staff walked the Auditor through the orientation and intake process. Intake staff verified that they are responsible for initiating the intake process by providing new intakes with PREA-related literature, which includes information regarding sexual safety, the agency's zero-tolerance directive, playing the PREA video, facility policies, procedures, and unit directives, and obtaining signed acknowledgments. New arrivals meet face-to-face with an intake staff person. Intake staff indicates that orientation and PREA-related information are read to all newly arriving inmates. Arrivals with limited English proficiency and Spanish as their primary language are issued PREA literature in Spanish. The intake officer notifies the shift supervisor if an interpreter is needed to communicate in Spanish. A bilingual Spanish-speaking officer reports to intake to assist the intake staff in communicating effectively with the new arrival. According to the director of the PREA Unit, on-demand interpretive services are currently limited to bilingual staff assigned to each shift, and the State Department of Administrative Services also holds various contracts with translation services accessible through the Agency ADA Coordinator. The agency has a contract with Language Line Services, Inc. for interpreting services for deaf inmates and those with limited English proficiency. See CDOC memorandum ( 04/11/2011) Accommodations for Inmates who are Hard of Hearing or Sight Impaired, OLR Research Report, 2011-R-0150.

Mental health practitioners sampled during the audit confirmed their responsibility for assisting juvenile inmates with cognitive challenges. Manson omitted submitting records to the Auditor for review to the Online Auditing System (OAS). This substandard requires corrective action. (See Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Inmate Education, Administrative Directive 9.3, Inmate Admissions, Transfers and Discharges, Section 5 J, page 5, PREA Screening of Newly Admitted Inmates, Administrative Directive 9.3, Inmate Admissions, Transfers and Discharges, Section 7, page 8, Transfers, Administrative Directive 10.12, Section 3, Initial Orientation).

115.33 (b): Within 30 days of intake, the agency shall provide comprehensive education to inmates, either in person or through video, regarding their rights to be free from sexual abuse and sexual harassment, to be free from retaliation for reporting such incidents, and regarding agency policies and procedures for responding to such incidents.

Staff who perform screening for risk of victimization confirmed that within 30 days of intake, the CDOC provides comprehensive education to inmates, either in person or through video, regarding their rights to be free from sexual abuse and sexual harassment, to be free from retaliation for reporting such incidents, and regarding agency policies and procedures for responding to such incidents. Problematic, Manson omitted evidence of compliance. The same staff walked this Auditor through the education process to demonstrate the onboarding process. During the onsite portion of this audit, this Auditor interviewed random and targeted juvenile inmates, all confirmed receiving PREA-related education in the form of a video, informational pamphlets, and a face-to-face verbal discussion with topics such as their right to be free from sexual abuse and sexual harassment, how and to whom they can report allegations of sexual abuse and sexual harassment and the agency's zero-tolerance policy. This substandard requires corrective action.

115.33 (c): Current inmates who have not received such education shall be educated within one year of the effective date of the PREA standards and shall 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.

The PCM confirmed during this audit that information contained in PAQ 115.33 (c)-1 Of those who were NOT educated (as stated in 115.33(b)-1) within 30 days of intake; all inmates have been educated subsequently as correct. Further, The PCM also confirmed that PAQ, 115.33 (c)-4 is correct and that CDOC requires that inmates who are transferred from one facility to another be educated regarding their rights to be free from both sexual abuse and sexual harassment and retaliation for reporting such incidents and on agency policies and procedures for responding to such incidents, to the extent that the policies and procedures of the new facility differ from those of the previous facility. Problematic, the log or other record corroborating that current inmates received comprehensive PREA education (e.g., inmate signatures) was omitted as evidence of compliance. This substandard requires corrective action.

115.33 (d): The agency shall provide inmate education in formats accessible to all

inmates, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to inmates who have limited reading skills.

Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Inmate Education, Section 10, page 7, states that during the intake process, each inmate shall receive an orientation that includes a presentation of the PREA video titled “PREA- What you need to know” following Administrative Directive 10.12, Inmate Orientation. The PCM confirmed the accuracy of PAQ 115.33 (d)-1-5. Inmate PREA education is available in formats accessible to all inmates, including those with limited English proficiency. By examination, this Auditor observed PREA-related literature in English and Spanish distributed during the intake process. According to Intake Staff, inmate education is delivered verbally, in a written pamphlet, on posters, stenciled on walls in the living units, in a PREA video, and in the inmate handbook. The various educational delivery platforms allow most inmates with disabilities to receive key information during intake.

### **INTAKE: PREA INFORMATION**

As part of the site review, the Auditor must ask to observe, if possible, the sexual safety information (PREA information/zero-tolerance information) provided at the point of intake or transfer during an actual intake process; if no one is being admitted during the on-site audit, the auditor may ask staff to walk through the process and do a mock intake for demonstration purposes.

During the facility tour and site review, the Auditor:

- Confirmed who is responsible for conducting the intake process.
- Verified how the facility provides the necessary PREA information to all inmates, regardless of ability and language, including a determination of the delivery method for providing inmate education;
  - In writing
    - inmate handbook (English/Spanish)
    - posters (English/Spanish)
      - Sexual Assault Prevention and Reporting Posters;
      - CDOC Zero Tolerance Posters,
      - End the Silence Posters. And Victim Advocacy Services. These posters were clear, concise, and consistent, including contact telephone numbers and mailing addresses.
      - Third-party reporting information
      - Notice of Audit was posted throughout the facility.
    - Stenciled PREA information on the walls of each living unit
  - Face-to-face interviews
    - With intake staff (read written information out loud)
    - With medical and mental health practitioners (cognitive or functional disabilities)

- PREA Video

## **INTERPRETATION SERVICES**

If an inmate does not speak English and a Spanish-speaking staff member is not available, the facility can utilize Language Line Services, Inc. Intake Staff report that if an inmate has a cognitive disability, a Unit Team leader or mental health practitioner will be contacted to assist with the intake process, ensuring that the inmate comprehends the PREA and reporting methods. The CDOC ADA Coordinator will be notified to assist inmates who require sign language due to hearing impairments. The State Department of Administrative Services also holds various contracts with translation services accessible through the Agency ADA Coordinator. The agency has a contract with Language Line Services, Inc. for interpreting services for deaf inmates and those with limited English proficiency. See CDOC memorandum ( 04/11/2011) Accommodations for Inmates who are Hard of Hearing or Sight Impaired, OLR Research Report, 2011-R-0150.

During the site review, the Auditor:

- Tested the facility's process for securing interpretation services on demand. Manson provided a staff person to assist this Auditor and serve as an interpreter for Spanish-speaking inmates identified as LEP. Suppose services were unavailable via a language line.
- Tested telephone access on each living unit; all samples were in good working order with a dial tone.
- PINs are required to access the language line from the living units; however, self-identification or a PIN is not required if the language line is contacted from locations other than the community inmate telephone system. Because access to the language services requires a facility code, access is limited and scheduled in a private room.
- Assess the availability of interpretation services (e.g., the ability to access immediate interpretation services).
- Assess the accessibility of interpretation services. Spanish-speaking staff are assigned to all shifts.

115.33 (e): The agency shall maintain documentation of inmate participation in these education sessions.

The PCM confirmed the accuracy of PAQ 115.33 (e)-1, which indicates that CDOC maintains documentation of inmate participation in PREA education sessions. Sample of documentation of inmate participation in education sessions. Problematic Manson omitted documented evidence of compliance. This substandard requires corrective action.

115.33 (f): Besides providing such education, the agency shall ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats.

The PCM confirmed the accuracy of PAQ115.33 (f)-1, which indicates that the agency ensures that key information about its PREA policies is continuously and readily available or visible through posters, inmate handbooks, or other written formats. During the facility tour, this Auditor observed PREA-related signage on all living units in areas familiar to staff and inmates, such as medical, education, visitation, and the front lobby. The language was clear and easy to read, and the text was printed in English and Spanish. Key information includes contact information for emotional support, multiple methods to report sexual abuse, and a toll-free number to the PREA hotline. The signage text size, formatting, and physical placement accommodate most readers, including those of average height, low vision/visually impaired, or physically disabled/in a wheelchair. Interviews with random and targeted juvenile inmates confirmed all were able to provide the Auditor with multiple methods of reporting sexual abuse.

**Evidence relied upon:**

1. CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention (effective 07/12/2015)
2. Facility tour and site review
3. CDOC John R. Manson Youth Institution, Inmate Handbook (effective 12/17/2015)
4. CDOC PREA Video Inmate Acknowledgement Form
5. CDOC Administrative Directive 9.3, Inmate Admissions, Transfers and Discharges
6. CDOC Administrative Directive 10.12, Section 3, Initial Orientation (effective 09/15/2008)
7. CDOC Administrative Directive 10.19, Americans with Disabilities Act (effective 09/24/2021)
8. CDOC memorandum ( 04/11/2011) Accommodations for Inmates who are Hard of Hearing or Sight Impaired, OLR Research Report, 2011-R-0150
9. Interviews with Spanish-speaking inmates who were bilingual (8)
10. Interview with Intake Staff

**Corrective Action:**

1. 115.33 (a) During the intake process, inmates shall receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment.
  - CDOC will provide a sample of intake records of inmates entering the facility in the last 12 months.
  - CDOC will provide a log or other record that corroborates that the inmates sampled received information at intake (e.g., inmate signatures).
  - CDOC will provide relevant education materials (e.g., inmate handbook) to ensure that relevant information is covered.

2. 115.33 (b) Intake records of inmates entering the facility in the past 12 months.

- CDOC will provide a log or other record (e.g., inmate signatures) indicating that newly arriving inmates received comprehensive PREA education within 30 days of intake.
- CDOC will provide relevant education materials (e.g., inmate handbook) to ensure that relevant information is covered.

3. 115.33 (e): The agency shall maintain documentation of inmate participation in these education sessions.

- CDOC will provide the Auditor with documented evidence of inmate participation in PREA education sessions.

**Recommendation:**

1. This Auditor recommends that CDOC familiarize all facilities with its efforts to provide on-demand interpretive language services to assist inmates with LEP 24/7. The State Department of Administrative Services also holds various contracts with translation services accessible through the Agency ADA Coordinator. The facility also has a contract with Language Line Services, Inc. for interpreting services for deaf inmates and those with limited English proficiency.

**Conclusion:**

The narrative above includes a comprehensive discussion of all the evidence relied upon in making the compliance after corrective action, the Auditor's analysis and reasoning, and the Auditor's conclusions.

**115.34 Specialized training: Investigations**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

115.34 (a): In addition to the general training provided to all employees under § 115.31, the agency shall ensure that, to the extent the agency conducts sexual abuse investigations, its investigators have received training in conducting such investigations in confinement settings.

115.34 (a)-1 Agency policy requires that investigators are trained in conducting

sexual abuse investigations in confinement settings. Yes.

Administrative Directive 1.10, Investigations, Section 4, Training, page 2.

Administrative Directives 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 16 A, Staff Training, page 6 .

Administrative Directive 1.10, Investigations, Section 4, Training, page 2, indicates that each investigator shall complete an approved training program before conducting an investigation; b. Investigators assigned to the Affirmative Action Unit shall receive specialized training provided by the Commission on Human Rights and Opportunities concerning state and federal discrimination laws and techniques for conducting investigations of discrimination complaints.

Administrative Directives 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section A, Staff Training, page 6 indicates that staff shall be trained regarding subjects such as (1)Its zero-tolerance policy for inmate sexual abuse and sexual harassment; (2) How to fulfill their responsibilities under agency inmate sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures; (3) Inmates' right to be free from sexual abuse and sexual harassment; (4) The right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment; (5) The dynamics of sexual abuse and sexual harassment in a confinement setting; (6) The common reactions to sexual abuse and sexual harassment victims; (7) How to detect and respond to signs of threatened and actual sexual abuse; (8) How to avoid inappropriate relationships with inmates; (9) How to communicate effectively and professionally with all inmates, including lesbian, gay, bisexual, transgender, intersex or gender non-conforming inmates; (10) How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities; and (11) Any concerns specific to the gender of the inmates at the employee's assigned facility.

Administrative Directives 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section B, Inservice Training, page 6, indicates that Investigators and Health Practitioners shall receive additional training specific to their areas of responsibility.

Administrative Directive 2.7, Training and Staff Development, Section 8, Inservice Training, All Employees, page 8, indicates that Investigators and Health Practitioners shall receive additional PREA-related training specific to their areas of responsibility.

By examining the National Institute of Corrections (NIC) website, this Auditor examined the training curriculum for investigators to determine compliance with this substandard. The purpose of the NIC course is to assist agencies in meeting the requirements of Prison Rape Elimination Act (PREA) Section 115.34 Specialized Training for Investigators. At the end of this course, investigators are able to explain the knowledge, components, and considerations that an investigator must use to perform a successful sexual abuse or sexual harassment investigation consistent with PREA standards.

Estimated duration: 3 hours. (NIC ID: 21ECCS2941).

During his interview, the director of the PREA Unit confirmed that in addition to the general training provided to all employees under § 115.31, the agency shall ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators have received training in conducting such investigations in confinement settings. (See Connecticut Department of Connecticut (CDOC) Administrative Directives 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Administrative Directive 1.10, Investigations).

115.34 (b): Specialized training shall include techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral.

During an interview with the Captain of the agency PREA Unit, a trained investigator confirmed that his NIC training included but was not limited to topics such as techniques for interviewing juvenile sexual abuse victims, proper use of Miranda and Garrity warnings, Sexual Abuse evidence collections and the criteria and evidence required to substantiate a case for administrative or prosecutorial referral. (See certificates (3) of completion 115.34 (c) attachment).

115.34 (c): The agency shall maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations.

115.34 (c)-1 The agency maintains documentation showing that investigators have completed the required training. Yes.

115.34 (c)-2 The number of investigators currently employed who have completed the required training: 3.

During an interview with the Captain of the agency PREA Unit, a trained investigator confirmed that his NIC training included but was not limited to topics such as techniques for interviewing juvenile sexual abuse victims, proper use of Miranda and Garrity warnings, Sexual Abuse evidence collections and the criteria and evidence required to substantiate a case for administrative or prosecutorial referral. By examination, this Auditor confirmed that CDOC maintains documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations. (See certificates (3) of completion 115.34 (c) attachment).

115.34 (d): Any State entity or Department of Justice component that investigates sexual abuse in confinement settings shall provide such training to its agents and investigators who conduct such investigations.

The Auditor is not required to audit this provision.

**Evidence relied upon:**

1. PAQ

<p>2. CDOC Administrative Directives 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention,</p> <p>3. CDOC Administrative Directive 1.10, Investigations, Administrative Directive 2.7, Training and Staff Development, Section 8, Inservice Training</p> <p>4. National Institute of Corrections Training Curriculum</p>
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**Conclusion:**

The narrative above includes a comprehensive discussion of all the evidence relied upon in making the compliance after corrective action, the Auditor's analysis and reasoning, and the Auditor's conclusions.

<b>115.35</b>	<b>Specialized training: Medical and mental health care</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.35 (a): The agency ensures that all full-and part-time medical and mental health care practitioners who regularly work in its facilities have been trained in: (1) How to detect and assess signs of sexual abuse and sexual harassment; (2) How to preserve physical evidence of sexual abuse; (3) How to respond effectively and professionally to victims of sexual abuse and sexual harassment; and (4) How and to whom to report allegations or suspicions of sexual abuse and sexual harassment.</p> <p>115.35 (a)-1 The agency has a policy related to the training of medical and mental health practitioners who work regularly in its facilities. Yes.</p> <p>CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, In-Service Training, Section 9B, page 6.</p> <p>CDOC Administrative Directive 2.7, Training and Staff Development, Section 6, Pre-service Training Program, (effective 08/01/2014) pages 4-7.</p> <p>CDOC Administrative Directive 8.6, Credentials for Health Services Staff, Section 6, Training of Health Services Staff</p> <p>Administrative Directive 2.7, Training and Staff Development, Section 8., In-service Training (effective 08/01/2014) pages 4- 7. All Employees, page 7, indicates that Investigators and Health Practitioners shall receive additional PREA-related training specific to their areas of responsibility. By examination of AD 2.7, this Auditor determined that all CDOC employees, including all medical and mental health practitioners, are required to complete training that includes (1) How to detect and assess signs of sexual abuse and sexual harassment, (2) How to preserve physical evidence of sexual abuse; (3) How to respond effectively and professionally to victims of sexual abuse and sexual harassment; and (4) How and to whom to report</p>

allegations or suspicions of sexual abuse and sexual harassment. During this audit the Auditor interviewed a sample of medical and mental health practitioners. Each practitioner interviewed confirmed completion of general and specialized PREA-related training specific to their discipline.

CDOC Administrative Directive 8.6, Credentials for Health Services Staff, Section 6, Training of Health Services Staff, states all full and part-time medical and mental health care practitioners who regularly work in CDOC-operated facilities shall be trained in: a. How to detect and assess signs of sexual abuse and sexual harassment; b. How to preserve physical evidence of sexual abuse; c. How to respond effectively and professionally to victims of sexual abuse and sexual harassment; and d. How and to whom to report allegations or suspicions of sexual abuse and sexual harassment.

Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, In-Service Training, Section 9B, page 6, Inservice Training indicates that Staff with direct inmate contact shall receive refresher training on sexual abuse/sexual harassment prevention, intervention, and follow-up procedures annually. Such training shall be tailored to the gender of the inmates at the employee's

facility so that the employee receives training specific to the gender he or she supervises, even if the employee has previously worked in a facility with inmates of a different gender. The Department of Correction shall document, through employee signature or electronic verification, that employees understand the training they have received. Investigators and Health Practitioners shall receive additional training specific to their areas of responsibility.

During the Manson facility audit, this Auditor interviewed a sample of medical and mental health practitioners who all confirmed completion of general and specialized PREA-related training. By examining Manson's training records, this Auditor determined that Manson's medical and mental health practitioners regularly participated in PREA training as stipulated in this standard.

115.35 (b): If medical staff employed by the agency conduct forensic examinations, such medical staff shall receive the appropriate training to conduct such examinations.

115.35 (b)-1 Agency medical staff at this facility conducts forensic medical exams. No.

CDOC/Manson staff do not conduct forensic examinations. According to PAQ 115.35 (b)-1, Agency medical staff at this facility conducts forensic medical exams. was no, and interviews with a sample of medical practitioners. Manson does not conduct forensic examinations. A review of investigative records found zero incidents that required a forensic examination.

115.35 (c): The agency shall maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere.

115.35 (c)-1 The agency maintains documentation showing that medical and mental health practitioners have completed the required training. Yes.

By examination of training records for medical and mental health practitioners for this reporting period, this Auditor determined that CDOC/Manson maintains documentation referenced in this standard either from the agency or elsewhere.

115.35 (d): Medical and mental health care practitioners shall also receive the training mandated for employees under § 115.31 or for contractors and volunteers under § 115.32, depending on their status at the agency.

By examination of training records for medical and mental health practitioners for this reporting period, this Auditor determined that CDOC/Manson maintains documentation referenced in this standard either from the agency or elsewhere under § 115.31 or for contractors and volunteers under § 115.32, depending on their status at the agency.

**Evidence relied upon:**

1. PAQ
2. CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, In-Service Training, Section 9B, page 6.
3. CDOC Administrative Directive 2.7, Training and Staff Development, Section 6, Pre-service Training Program, (effective 08/01/2014) pages 4-7.
4. CDOC Administrative Directive 8.6, Credentials for Health Services Staff, Section 6, Training of Health Services Staff

**Corrective Action:**

1. CDOC Francis H. Maloney Center Training and Staff Development Attendance Record, Multiple DOC and Non-DOC Employees submitted for review. 09/11/23-09/29/23 (14)
2. CDOC Francis H. Maloney Center Training and Staff Development Attendance Record, Multiple DOC and Non-DOC Employees submitted for review. 08/14/23-09/01/23 (16)
3. CDOC Francis H. Maloney Center Training and Staff Development Attendance Record, Multiple DOC and Non-DOC Employees submitted for review. 10/09/23-10/30/23 (11)
4. CDOC Francis H. Maloney Center Training and Staff Development Attendance Record, Multiple DOC and Non-DOC Employees submitted for review. 11/06/23-11/28/23 (13)
5. CDOC Francis H. Maloney Center Training and Staff Development Attendance Record, Multiple DOC and Non-DOC Employees submitted for review. 11/06/23-11/13/23 (1)
6. CDOC Francis H. Maloney Center Training and Staff Development Attendance Record, Multiple DOC and Non-DOC Employees submitted for review. 12/04/23-12/22/23 (13)

	<p><b>Conclusion:</b></p> <p>The narrative above includes a comprehensive discussion of all the evidence relied upon in making the compliance after corrective action, the Auditor's analysis and reasoning, and the Auditor's conclusions.</p>
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<b>115.41</b>	<b>Screening for risk of victimization and abusiveness</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.41 (a): All inmates shall be assessed during an intake screening and upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates.</p> <p>CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 7C, Use of Screening Information (effective 11/02/2014), page 10.</p> <p>CDOC Administrative Directive 9.3, Inmate Admissions, Transfers and Discharges, Section 7 A-3, page 8, PREA Screening of Inmates Transferred Between Facilities</p> <p>115.41 (b): Intake screening shall ordinarily occur within 72 hours of arrival at the facility.</p> <p>115.41 (b)-1 The policy requires that inmates be screened for risk of sexual victimization or risk of sexually abusing other inmates within 72 hours of their intake. Yes.</p> <p>CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 7C, Use of Screening Information (effective 11/02/2014), page 10.</p> <p>115.41 (b)-2 The number of inmates entering the facility (either through intake or transfer) within the past 12 months whose length of stay in the facility was for 72 hours or more and who were screened for risk of sexual victimization or risk of sexually abusing other inmates within 72 hours of their entry into the facility: 378.</p> <p>Staff Responsible for Risk Screening were asked if inmates are screened upon admission to the facility for risk of victimization or sexual abuse toward others. the staff person responded yes.</p> <p>From a population of 297 inmates on the first day of the onsite portion of this audit, a select sample of inmates (26) were asked,</p> <p>"When you first came here, do you remember whether you were asked any questions like this?" Whether you have ever been sexually abused, (16) responded yes, (3)</p>

responded no, (3) responded I don't remember, (4) entered the facility outside of the 12-month period (e.g., the year 2018, 2021, and 2022).

Whether you identify as gay, bisexual, or transgender, (16) responded yes, (3) responded no, (3) responded I don't remember, (4) entered the facility outside of the 12-months (e.g., the year 2018, 2021, and 2022).

Whether you have any disabilities, (16) responded yes, (3) responded no, (3) responded I don't remember, (4) entered the facility outside of the 12-months (e.g., the year 2018, 2021, and 2022).

Whether you think you might be in danger of sexual abuse here (16) responded yes, (3) responded I don't remember, (4) entered the facility outside of the 12-months (e.g., the year 2018, 2021, and 2022).

115.41 (c): Such assessments shall be conducted using an objective screening instrument.

115.41 (c)-1 Risk assessment is conducted using an objective screening instrument.  
Yes.

When asked what the initial risk screening considers, the staff responded that it includes age, criminal history, history of victimization or abusiveness, and gender identity. Further, during a mock audit, the same staff outlined the intake process using a checklist, which involves orientation, PREA education, interviews by intake staff, and medical and mental health staff when appropriate. The staff person confirmed for the Auditor that CDOC does not detain inmates solely for immigration purposes. This standard is problematic as it omits evidence of compliance and requires corrective action.

115.41 (d): The intake screening shall 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; (2) The age of the inmate; (3) The physical build of the inmate; (4) Whether the inmate has previously been incarcerated; (5) Whether the inmate's criminal history is exclusively nonviolent; (6) Whether the inmate has prior convictions for sex offenses against an adult or child; (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming; (8) Whether the inmate has previously experienced sexual victimization; (9) The inmate's own perception of vulnerability; and (10) Whether the inmate is detained solely for civil immigration purposes. This standard is problematic as it omits evidence of compliance and requires corrective action.

115.41 (e): The initial screening shall consider prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known to the agency, in assessing inmates for risk of being sexually abusive.

115.41 (f): Within a set time period, not to exceed 30 days from the inmate's arrival

at the facility, the facility will reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening.

115.41 (f)-1 The policy requires that the facility reassess each inmate's risk of victimization or abusiveness within a set time period, not to exceed 30 days after the inmate's arrival at the facility, based upon any additional, relevant information received by the facility since the intake screening. Yes.

CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 11. Screening for Risk of Victimization and Abusiveness (effective 08/01/2023) pages 8-9.

CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 7C, Use of Screening Information (effective 11/02/2014), page 10.

115.41 (f)-2 The number of inmates entering the facility (either through intake or transfer) within the past 12 months whose length of stay in the facility was for 30 days or more and who were reassessed for their risk of sexual victimization or of being sexually abusive within 30 days after their arrival at the facility based upon any additional, relevant information received since intake: 328.

Staff Responsible for Risk Screening indicated that reassessments occur as needed but within 30 days of arrival. Problematic CDOC omitted evidence of compliance with this standard. This substandard requires corrective action.

This Auditor interviewed a select group of inmates (26). All were asked if staff asked questions regarding their sexual safety, fear of abusiveness, and gender identity. Sixteen inmates responded yes (3) and no (4) and said they did not remember. Four of the 26 inmates interviewed were assigned to the facility and entered the facility outside of the 12 months (e.g., 2018, 2021, and 2022).

115.41 (g): An inmate's risk level shall be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness.

115.41 (g)-1 The policy requires that an inmate's risk level be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness. Yes.

CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 11. Screening for Risk of Victimization and Abusiveness (effective 08/01/2023) pages 8-9.

CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 7C, Use of Screening Information (effective 11/02/2014), page 10.

115.41 (h): Inmates may not be 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.

115.41 (h)-1 The policy prohibits disciplining inmates for refusing to answer (or for not disclosing complete information related to) questions regarding (a) whether or not the inmate has a mental, physical, or developmental disability; (b) whether or not the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender non-conforming; (c) whether or not the inmate has previously experienced sexual victimization; and (d) the inmate's own perception of vulnerability. Yes.

CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 11. Screening for Risk of Victimization and Abusiveness (effective 08/01/2023) pages 8-9.

CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 7C, Use of Screening Information (effective 11/02/2014), page 10.

See 115.41 (f)-2

115.41 (i): The agency shall implement 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.

**Evidence relied upon:**

1. PAQ
2. Facility Tour, Site Review and Record Storage
3. CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 11. Screening for Risk of Victimization and Abusiveness (effective 08/01/2023) pages 8-9.
4. CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 7C, Use of Screening Information (effective 11/02/2014), page 10.
5. CDOC Administrative Directive 9.3, Inmate Admissions, Transfers and Discharges, Section 7 A-3, page 8, PREA Screening of Inmates Transferred Between Facilities
6. CDOC Health Services Unit, Policies and Procedure Manual E-2.01 Intake Health Screening (effective 01/01/2000) (revised 07/27/2023)
7. CDOC HR001 Intake Screening Form (26)
8. Interview with the PREA Coordinator
9. Interview with the PREA Compliance Manager
10. Interview with Staff Responsible for Risk Screening
11. Interviews with inmates

**Corrective Action:**

1. CDOC will submit a select sample of risk screening within 72 hours of arrival (26)
2. The Auditor will examine a risk screening instrument for criteria (1-10) to assess the risk as outlined in this standard.
3. The Auditor will examine a select sample of initial assessments and reassessments for risk of victimization as outlined in this standard.
4. Upload CDOC Administrative Directive 9.3, Inmate Admissions, Transfers and Discharges, PREA Screening of Inmates Transferred Between Facilities
5. CDOC Health Services Unit, Policies and Procedure Manual E-2.01 Intake Health Screening (effective 01/01/2000) (revised 07/27/2023)
6. CDOC HR001 Intake Screening Form (26)
7. CDOC CN 9306 PREA Screening Form, Inmate Intake Form (26)
8. The Auditor reviewed the intake screening instrument. It included the following items:
  1. • The age of the inmate
  2. • The physical build of the inmate
  3. • Whether the inmate's criminal history is exclusively nonviolent
  4. • Whether the inmate has prior convictions for sex offenses against an adult or child
  5. • What is the inmate's sexual orientation
  6. • What is the inmate's gender identity
9. • Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender non-conforming.
10. • The inmate's own perception of vulnerability
11. • Whether the inmate has been a victim of sexual abuse while incarcerated, as an adult or juvenile
12. • Whether the inmate has been a perpetrator of sexual abuse while incarcerated, as an adult or juvenile

**Conclusion:**

The narrative above provides a thorough overview of the evidence considered in the compliance determination following corrective action, the Auditor's analysis and rationale, as well as their conclusions.

<b>115.42</b>	<b>Use of screening information</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	115.42 (a): The agency shall use information from the risk screening required by § 115.41 to inform housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive.

115.42 (a)-1 The agency/facility uses information from the risk screening required by §115.41 to inform housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive. Yes.

CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention (effective 11/02/2014) pages 1-19.

CDOC Administrative Directive 9.3, Inmate Admissions, Transfers and Discharges, Section 7 A-3, page 8, PREA Screening of Inmates Transferred Between Facilities

CDOC Health Services Unit, Policies and Procedures Manual, E 2.01, Intake Health Screening (effective 02/01/2000) pages 1-4.

CDOC Intake Form (CN 93-6/1) (effective 07/20/15) pages 1-2.

During an interview with staff responsible for risk screening, the Auditor asked, "Do you screen inmates upon admission to your facility for risk of sexual abuse victimization or sexual abuse toward other inmates." The staff responded yes.

During an interview with the PREA Compliance Manager (PCM), the Auditor inquired whether the facility is subject to a consent decree, legal settlement, or legal judgment mandating the establishment of a dedicated facility, unit, or wing for lesbian, gay, bisexual, transgender, or intersex inmates. The PREA Compliance Manager confirmed that it is not. The PCM explained that CDOC Manson utilizes multiple screening instruments during the intake process to assess an inmate's health and risk of sexual victimization and abuse, in conjunction with criminal history and other court documents, in order to ensure the safety of inmates.

During the onsite portion of this audit, a select sample of inmates (26) was asked, when you first came here, do you remember whether you were asked any questions like whether you had been in jail or prison before, whether you have ever been sexually abused, whether you identify with being gay, lesbian, or bisexual, and whether you think you might be in danger of sexual abuse here?

This Auditor examined a select sample of CDOC Offender Classification Forms (26) to confirm that Manson assessed and reassessed inmates for risk of victimization. CDOC form CN 9306/01, the CDOC Inmate Intake Form, and the CDOC Intake Health Screening confirm that CDOC screens all inmates upon admission for risk of victimization and sexual abuse toward other inmates. Also, see 115.41(a)-1 attachments/assessments for more information.

115.42 (b): The agency shall make individualized determinations about how to ensure the safety of each inmate.

115.42 (b)-1 The agency/facility makes individualized determinations about how to ensure the safety of each inmate. Yes.

CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 11D Transgender and Intersex Inmates (effective

11/02/2014) page 10.

CDOC Health Services Unit, Policies and Procedures Manual, E 2.01, Intake Health Screening (effective 02/01/2000) pages 1-4.

CDOC Administrative Directive 9.3, Inmate Admissions, Transfers and Discharges, Section 7 A-3, PREA Screening of Inmates Transferred Between Facilities, page 8.

CDOC Intake Form (CN 93-6/1) (effective 07/20/15) pages 1-2.

During an interview with the staff responsible for risk screening, the Auditor asked how Manson utilized information from risk screening instruments obtained during the intake process to ensure the safety of inmates from sexual victimization or abusive behavior towards others. The staff indicated the information obtained during screening is used to inform program placement, housing, and safety considerations.

115.42 (c): In deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates and in making other housing and programming assignments, the agency shall consider on a case-by-case basis whether a placement would ensure the inmate's health and safety and whether the placement would present management or security problems

115.42 (c)-1 In deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, the agency shall consider on a case-by-case basis whether a placement would ensure the inmate's health and safety. Yes.

CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 11D Transgender and Intersex Inmates (effective 11/02/2014) pages 10.

CDOC Administrative Directive 9.3, Inmate Admissions, Transfers and Discharges, Section 7 A-3, PREA Screening of Inmates Transferred Between Facilities, page 8.

CDOC Health Services Unit, Policies and Procedures Manual, E 2.01, Intake Health Screening (effective 02/01/2000) pages 1-4.

CDOC Intake Form (CN 93-6/1) (effective 07/20/15) pages 1-2.

The Auditor interviewed no transgender or intersex inmates. According to informal conversations with a medical and mental health practitioner, there were no inmates identified as such during the onsite portion of this audit.

115.42 (c)-2 In making housing and programming assignments, the facility shall consider on a case-by-case basis whether placement of a transgender or intersex inmate would present management or security problems. Yes.

During an interview with the PREA Compliance Manager (PCM), the Auditor inquired about the process by which CDOC/Manson determines housing and program assignments for transgender or intersex inmates. The PCM explained that placement and classification decisions are made on a case-by-case basis, considering factors such as the inmate's health and safety, age, potential management or security

issues, and the inmate's views.

The Auditor interviewed no transgender or intersex inmates. According to informal conversations with a medical and mental health practitioner, there were no inmates identified as such during the onsite portion of this audit.

115.42 (d): Placement and programming assignments for each transgender or intersex inmate shall be reassessed at least twice each year to review any threats to safety experienced by the inmate.

CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention Section 11D Transgender and Intersex Inmates (effective 11/02/2014) pages 10.

During an interview with the PREA Compliance Manager (PCM), the Auditor inquired about the placement and programming assignments for transgender or intersex inmates. The PCM confirmed that such inmates are reassessed at least twice a year to review any threats to their safety. Furthermore, staff responsible for risk screening were also interviewed, and they indicated that transgender or intersex inmates would be reassessed by their respective unit counselors.

The Auditor did not interview any transgender or intersex inmates. According to discussions with medical and mental health practitioners, there were no inmates identified as transgender or intersex during the onsite portion of this audit. The Auditor reviewed no documentation regarding the reassessment of programming assignments for transgender or intersex inmates in compliance with the standard.

115.42 (e): A transgender or intersex inmate's own views concerning his or her own safety shall be given serious consideration.

CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention Section 11D Transgender and Intersex Inmates (effective 11/02/2014) pages 10.

The Auditor did not interview any transgender or intersex inmates. According to discussions with medical and mental health practitioners, there were no inmates identified as transgender or intersex during the onsite portion of this audit.

According to the PCM, transgender and intersex inmates will have the opportunity to shower separately, their views and safety considerations will be taken into account, and they will not be placed in dedicated housing based on gender identity.

115.42 (f): Transgender and intersex inmates shall be given the opportunity to shower separately from other inmates.

CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention Section 11D Transgender and Intersex Inmates (effective 11/02/2014) pages 10.

The Auditor did not interview any transgender or intersex inmates. Medical and

mental health practitioners reported that no inmates were identified as transgender or intersex during the onsite portion of this audit.

115.42 (g): The agency shall not place lesbian, gay, bisexual, transgender, or intersex inmates in dedicated facilities, units, or wings solely based on such identification or status unless such 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 such inmates.

CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention Section 11D Transgender and Intersex Inmates (effective 11/02/2014) pages 10.

The Auditor did not interview any transgender or intersex inmates. According to discussions with medical and mental health practitioners, there were no inmates identified as transgender or intersex during the onsite portion of this audit. The Auditor reviewed no documentation regarding the reassessment of programming assignments for transgender or intersex inmates in compliance with the standard.

**Evidence relied upon:**

1. PAQ
2. CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention Section 11D Transgender and Intersex Inmates (effective 11/02/2014) pages 10.
3. CDOC Administrative Directive 9.3, Inmate Admissions, Transfers and Discharges, Section 7 A-3, PREA Screening of Inmates Transferred Between Facilities, page 8.
4. CDOC Health Services Unit, Policies and Procedure Manual E-2.01 Intake Health Screening (effective 01/01/2000) (revised 07/27/2023)
5. CDOC HR001 Intake Screening Form (26)
6. CDOC CN 9306 PREA Screening Form (26)
7. Interview with the PREA Coordinator
8. Interview with the PREA Compliance Manager
9. Interview with Staff Responsible for Risk Screening
10. Interviews with inmates (26)

**Correction Action:**

1. Manson will submit reassessment evidence to meet the requirements of 115.41 and the corrective action plan. The Auditor will review all submissions to determine if the evidence satisfies the standard requirements as outlined in 115.41 and 115.42.

**Conclusion:**

The narrative above provides a thorough overview of the evidence considered in the compliance determination following corrective action, the Auditor's analysis, and rationale, as well as their conclusions.

115.43	<b>Protective Custody</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	Connecticut Department of Connecticut, Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Administrative Directive 9.4, Restrictive Status address this standard.
	<p>115.43 (a): Inmates at high risk for sexual victimization shall not be placed in involuntary segregated housing unless an assessment of all available alternatives has been made and a determination has been made that there is no available alternative means of separation from likely abusers. If a facility cannot conduct such an assessment immediately, the facility may hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment.</p>
	<p>By examination, this Auditor determined that CDOC has a policy/directive prohibiting inmates at high risk for sexual victimization from being placed in involuntary segregated housing unless an assessment of all available alternatives has been made and a determination has been made that there is no available alternative means of separation from likely abusers. If a facility cannot conduct such an assessment immediately, the facility may hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment.</p>
	<p>Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 11, Screening for Risk of Victimization, A 1, page 8, indicates that inmates placed in restrictive housing for this purpose shall have access to programs, privileges, education, or work opportunities to the extent possible. If the facility restricts access to programs, privileges, education, or work opportunities, the facility shall document (1) the opportunities that have been limited, (2) the duration of the limitation, and (3) the reasons for such limitations.</p>
	<p>Moreover, as confirmed by the PCM and as indicated in PAQ 115.43 (a)-1, The agency has a policy prohibiting the placement of inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made. A determination has been made that there is no available alternative means of separation from likely abusers.</p>
	<p>Administrative Directive 9.4, Restrictive Status, Special Needs Management, Section 9, pages 1-19, in summary, indicates that any inmate placed in segregated housing will be afforded an initial placement review, Hearing Notice, Hearing, and recommendations from a facility Hearing officer utilizing form CN 9404, Special Management Report of Hearing Placement or Removal form.</p>
	<p>As confirmed by the Warden during his interview, PAQ 115.43 (a)-2 indicates the number of inmates at risk of sexual victimization who were held in involuntary segregated housing in the past 12 months for one to 24 hours awaiting completion of</p>

assessment was zero during this reporting period. Investigative reports for this reporting period indicate zero juvenile inmates were placed in segregation due to the risk of sexual victimization.

115.43 (b): Inmates placed in segregated housing for this purpose shall have access to programs, privileges, education, and work opportunities to the extent possible. If the facility restricts access to programs, privileges, education, or work opportunities, the facility shall document (1) The opportunities that have been limited, (2) The duration of the limitation, and (3) The reasons for such limitations.

Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 11A1-3, Screening for Risk of Victimization and Abusiveness, On Intake to the Facility, pages 7-8 indicate that 1). Inmates at high risk for sexual victimization shall not be placed involuntarily in restrictive housing unless an assessment of all available housing alternatives has been made and a determination has been made that there are no available alternative housing means of separation from likely abusers. If the facility cannot perform such an alternative housing assessment immediately, the facility may hold the inmate involuntarily in restrictive housing on Administrative Detention status per A.D. 9.4 Restrictive Status for less than 24 hours while completing the alternative housing assessment.

2) Inmates placed in restrictive housing shall have access to programs, privileges, education, or work opportunities to the extent possible. If the facility restricts access to programs, privileges, education, or work opportunities, the facility shall document (1) the opportunities that have been limited, (2) the duration of the limitation, and

(3) the reasons for such limitations. 3) The facility shall assign such inmates to involuntary restrictive housing on Administrative Detention status only until an alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed 30 days. If an involuntary restrictive housing assignment is made, the facility shall document (1) the basis for the facility's concern for the inmate's safety and (2) why no alternative means of separation can be arranged. Every 30 days, the facility shall review the circumstances to determine whether there is a continuing need for separation from the general population.

During this audit, the Auditor interviewed a correctional officer supervising inmates in segregated housing. He confirmed that inmates in restrictive housing should have access to programs but will be limited in privileges and education, but work opportunities were not possible. This Auditor also conducted a facility tour that included restricted housing. During an informal conversation and a visual review of the unit logbook, it was determined that zero juvenile inmates were being housed in segregation for PREA-related reasons, such as the threat of victimization or suffered sexual abuse.

115.43 (c): The facility shall assign such inmates to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed 30 days.

Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 11A1-3, Screening for Risk of Victimization and Abusiveness, On Intake to the Facility, pages 7-8 indicate that 1). Inmates at high risk for sexual victimization shall not be placed involuntarily in restrictive housing unless an assessment of all available housing alternatives has been made and a determination has been made that there are no available alternative housing means of separation from likely abusers. If the facility cannot perform such an alternative housing assessment immediately, the facility may hold the inmate involuntarily in restrictive housing on Administrative Detention status per A.D. 9.4 Restrictive Status for less than 24 hours while completing the alternative housing assessment.

Administrative Directive 9.4, Restrictive Status, Special Needs Management, Section 9, pages 1-19, in summary, indicates that any inmate placed in segregated housing will be afforded an initial placement review, Hearing Notice, Hearing, and recommendations from a facility Hearing officer utilizing form CN 9404, Special Management Report of Hearing Placement or Removal form.

115.43 (d): If an involuntary segregated housing assignment is made under paragraph (a) of this section, the facility shall clearly document (1) The basis for the facility's concern for the inmate's safety and (2) The reason why no alternative means of separation can be arranged.

Administrative Directive 9.4, Restrictive Status, Special Needs Management, Section 9, pages 1-19, in summary, indicates that any inmate placed in segregated housing will be afforded an initial placement review, Hearing Notice, Hearing, and recommendations from a facility Hearing officer utilizing form CN 9404, Special Management Report of Hearing Placement or Removal form.

Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention Section 11, page 7, Screening for Risk and Abusiveness and Section B, After Intake to the Facility, indicates that juvenile inmates at high risk for sexual victimization shall not be placed in Restrictive Housing Unit (RHU)/segregation unless an assessment of all available alternatives has been made. There are no available means of separating the inmate from the abuser. Staff supervising segregation confirmed that inmates are reassessed at least weekly after placement in segregation.

Further, Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention Section 11, page 7, Screening for Risk and Abusiveness and subsection B, After Intake to the Facility, mandates if a protective safekeeping housing assignment is made under Section III.C.3, the unit shall clearly document: a. The basis of the concern for the offender's safety; and b. Because no alternative means of separation could be arranged.

As confirmed by the Warden and according to the PAQ 115.43 (d)-1, A review of investigative documents was unavailable relative to inmates at risk of sexual victimization who were held in involuntary segregated housing in the past 12 months was zero. Therefore, zero juvenile inmates were interviewed for this standard. D

115.43 (e): Every 30 days, the facility shall afford each such inmate a review to determine whether there is a continuing need for separation from the general population.

As confirmed by the Warden during his interview with this Auditor, and in compliance with Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention Section 11, pages 7-8, Screening for Risk of Victimization and Abusiveness Section B, After Intake to the Facility indicates that Within 30 days from the inmate's arrival at the facility, qualified staff must reassess the inmate's risk of victimization or abusiveness with documentation on the inmate classification history form based on any additional relevant information received by the facility since the initial intake screening. An inmate's risk of victimization or abusiveness shall also be reassessed when warranted due to a referral, request, incident of sexual abuse/harassment, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness.

<b>115.51 Inmate reporting</b>	
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.51 (a): The agency shall provide multiple internal ways for inmates to privately report sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents.</p> <p>115.51 (a)-1 The agency has established procedures allowing for multiple internal ways for inmates to report privately to agency officials about (a) sexual abuse or sexual harassment, (b) retaliation by other inmates or staff for reporting sexual abuse and sexual harassment; and (c) staff neglect or violation of responsibilities that may have contributed to such incidents answered yes.</p> <p>Manson Youth Institution Handbook, Section C.</p> <p>CDOC Administrative Directive, 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Section 12, Inmate and Third-Party Reporting of Sexual Abuse and Sexual Harassment, Subsection A., Inmate Reporting, (effective 08/01/2023) page 11.</p> <p>CDOC Administrative Directive 10.12, Inmate Orientation, Section 3., Initial Orientation (effective 09/14/2014) pages 1.</p> <p>CDOC Administrative Directive 10.12, Inmate Orientation, Section 6., Orientation Procedures (effective 09/14/2014) page 2.</p> <p>CDOC Administrative Directive 10.19, Americans with Disabilities Act, (effective 09/</p>

24/2021), pages 1-8.

CDOC Administrative Directive 9.5, Code of Penal Discipline, (effective 10/01/2019), pages 1-20.

CDOC, Administrative Directive, 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Section 12, Inmate and Third Party Reporting of Sexual Abuse and Sexual Harassment, Subsection A., Inmate Reporting, (effective 08/01/2023) page 11, indicates during intake processing, each inmate shall receive an orientation that includes a presentation of the PREA video titled "PREA What you need to know" under Administrative Directive 10.12, Inmate Orientation. Each inmate shall sign the designated form acknowledging receipt of such materials, which shall be maintained in the inmate's Master File. Inmates assigned to a restrictive status or inmates whose status and behavior preclude them from attending group orientation sessions shall receive a "Sexual Abuse/ Sexual Harassment Prevention for Inmates" handout as well as the Inmate Handbook with information regarding the Prison Rape Elimination Act and personal safety.

An audit of a random sample of 26 inmates indicated that during orientation, they are informed about CDOC's zero-tolerance policy on sexual abuse and harassment by the unit counselor and intake officer. They are taught at least two internal and one external method for reporting such incidents. Inmates have the option to report anonymously or through third parties. Contact information for victim advocacy groups is also provided during the intake process. Inmates with disabilities will receive accommodations according to Administrative Directive 10.19 Americans with Disabilities Act. Additionally, this sample of inmates was able to provide at least two methods for reporting sexual abuse and sexual harassment that occurred to themselves or others and confirmed having someone outside the facility to whom they could report such incidents.

Moreover, CDOC Administrative Directive, 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Section 12, Inmate and Third-Party Reporting of Sexual Abuse and Sexual Harassment, Subsection A., Inmate Reporting, (effective 08/01/2023) page 11, CDOC has multiple methods for inmates to privately report sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse or harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents. Inmates may report incidents in the following ways such as:

1. Reporting to any staff member either verbally or in writing (verbal reports must be documented promptly);
2. Calling the PREA hotline;
3. Writing an inmate request;
4. Writing an anonymous note;
5. Calling the Connecticut State Police;

6. If CDOC detains inmates solely for civil immigration purposes, they may also contact any relevant consular officials and relevant officials at the United States Department of Homeland Security. Staff shall provide contact information to such inmates upon request.

Interviews with random staff (14) revealed various ways inmates can report sexual abuse or harassment.

Manson Youth Institution Handbook, Section C, Prison Rape Elimination Act, Section C, Reporting, pages 39-40, provides inmates with multiple internal ways for inmates to report sexual abuse and sexual harassment, and retaliation privately, such as verbally telling a trusted staff person, submitting a note to a staff person, or anonymously notification.

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

115.51 (b)-1 The agency provides at least one way for inmates to report abuse or harassment to a public or private entity or office that is not part of the agency. Yes.

As confirmed by PCM and according to PAQ 115.51 (b)-1, CDOC provides at least one way for inmates to report abuse or harassment to a public or private entity or office that is not part of the agency, the Connecticut State Police. By examination from the living units or using tablets, inmates can contact the CSP hotline by dialing \*9333#. By examination, this Auditor also confirmed that CDOC has an MOU with the Connecticut State Police to accept reports of sexual abuse or sexual harassment. Interviews with random and targeted inmates during the onsite portion of this audit confirmed that all inmates' samples were aware of how to contact the CSP by phone, in writing, or through a third party. (See Manson Youth Institution Handbook, Section C, Prison Rape Elimination Act, CSP address).

115.51 (b)-2 The agency has a policy requiring inmates detained solely for civil immigration purposes be provided information on how to contact relevant consular officials and relevant officials of the Department of Homeland Security. Yes.

CDOC Administrative Directive, 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Section 12, Inmate and Third-Party Reporting of Sexual Abuse and Sexual Harassment, Subsection A., Inmate Reporting, (effective 08/01/2023) page 11.

During this audit, the Auditor interviewed the PREA Compliance Manager, and the PCM was asked:

- How does the facility provide at least one way for inmates to report abuse or

harassment to a public or private entity or office that is not part of the agency? The PCM responded by telling a trusted staff member, the Ombudsman Office, or the PREA Hotline or notifying the PREA Unit.

- Do these procedures enable the receipt and immediate transmission of inmate reports of sexual abuse and sexual harassment to agency officials, allowing the inmate to remain anonymous upon request? The PCM responded yes.

Inmate Interview Questionnaire - Q: 9, 10

PREA Audit Site Review

During this audit, the Auditor conducted a facility tour and site review.

- See 115.33 Inmate Education

The tour covered all living units, education, food service, recreation, and common areas to check signage. PREA-related signs were bright, colorful, and in bold font for easy reading by staff and inmates. These signs were posted on bulletin boards and walls near telephones in each unit. Posted information included unit rules, reporting sexual abuse and harassment, inmate rights, the PREA hotline number, and contact details for victim advocacy and the Connecticut State Police. The Auditor found no graffiti or vandalism obscuring this information, which was accurate and consistent throughout the facility. Further, the Auditor tested access to telephone systems. All were working. This Auditor, with the assistance of an inmate, tested phone access to determine if inmates had access to report abuse and sexual harassment by phone or tablet. Mailbox receptacles are located throughout the facility. However, during interviews, inmates indicated a preference for using their individual issued tablets to communicate with administration, family, and friends or to report sexual abuse or harassment, to prevent messages from being overheard by other inmates near the telephones. Interviews with specialized staff confirm that medical mail is secured in receptacles accessible only to medical or mental health practitioners. Writing instruments were observed in the living units used by inmates. According to a select group of inmates sampled during the audit (both random and targeted), there is a preference for using tablets instead of writing letters. All inmates sampled confirmed that using their tablets in their rooms provides a secure method of written communication, and they also verified that mail is picked up from locked receptacles, with only mailroom staff having access to the closed system.

During the on-site portion of this audit, the Auditor interviewed random staff (14). All random staff selected provided the Auditor with multiple examples of internal methods for inmates to report sexual abuse, sexual harassment, or retaliation. Likewise, this Auditor interviewed random and targeted inmates (26). All inmates selected for interviews provided the Auditor with examples of ways to make a PREA report, such as using the PREA hotline, alerting the family, and telling a trusted staff person.

115.51 (c): Staff shall accept reports made verbally, in writing, anonymously, and from third parties and shall promptly document any verbal reports.

115.51 (c)-1 The agency has a policy mandating that staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties. Yes.

As confirmed by the PCM and according to PAQ 115.51 (c)-1, CDOC has a policy mandating that staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties. Manson Youth Institution Handbook, Section C, Prison Rape Elimination Act.

CDOC Administrative Directive, 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Section 12, Inmate and Third-Party Reporting of Sexual Abuse and Sexual Harassment, Subsection A., Inmate Reporting, (effective 08/01/2023) page 11 indicates that staff, volunteers, vendors, and contractors shall treat any observation of sexual activity as potential sexual abuse. All staff, vendors, volunteers, and contractors shall report any instance of suspected, alleged, or actual sexual abuse, retaliation against staff or inmates for reporting sexual abuse, or staff neglect or violation of responsibilities contributing to sexual abuse to a shift supervisor as soon as practical and provide documentation under Administrative Directive 6.6, Reporting of Incidents. Supervisory staff on all shifts shall conduct random, unannounced tours throughout their area(s) of responsibility under Administrative Directive 6.1, Tours and Inspections. Staff shall not alert other staff to these tours unless doing so is related to legitimate operational concerns. Video surveillance cameras shall be used to augment staff tours for increased observation. Each facility shall identify blind spots where sexual abuse is at higher risk of occurring and develop a strategy to compensate for such areas.

115.51 (c)-2 Staff are required to document verbal reports. Yes.

Interviews with random, specialized staff and first responders all confirmed their duty under CDOC Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Section 13, Staff Monitoring and Intervention (Sexual Abuse) page 10, indicates staff, volunteers, vendors, and contractors shall treat any observation of sexual activity as potential sexual abuse. All staff, vendors, volunteers, and contractors shall report any instance of suspected, alleged, or actual sexual abuse, retaliation against staff or inmates for reporting sexual abuse, or staff neglect or violation of responsibilities contributing to sexual abuse to a shift supervisor as soon as practical and provide documentation under Administrative Directive 6.6, Reporting of Incidents.

115.51 (d): The agency shall provide a method for staff to report sexual abuse and sexual harassment of inmates privately.

115.51 (d)-1 The agency has established procedures for staff to privately report sexual abuse and sexual harassment of inmates. Yes.

Interviews with random, specialized staff and first responders all confirmed their duty under Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Section 13, Staff Monitoring and Intervention (effective 08/01/2023), page 10. After interviewing various staff, each described private

methods for reporting sexual abuse and harassment of inmates. These methods include requesting a face-to-face meeting with a supervisor (unless they are implicated), calling the PREA hotline, contacting the CSP, or completing an incident report.

According to the PCM and as confirmed in the PAQ 115.51 (d)-2, Staff are informed of these procedures through Employee onboarding, annual PREA-related training, and the facility Manson Unit Directive in which they are provided copies of policies and procedures related to this standard.

**Evidence relied upon:**

1. PAQ
2. Facility tour and site review
3. Interview with the PREA Compliance Manager
4. Interview interviews
5. Interview with random staff
6. CDOC Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Section 13, Staff Monitoring and Intervention (effective 08/01/2023), page 10.
7. CDOC Administrative Directive, 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Section 12, Inmate and Third-Party Reporting of Sexual Abuse and Sexual Harassment, Subsection A., Inmate Reporting, (effective 08/01/2023) page 11.
8. CDOC Administrative Directive 10.12, Inmate Orientation, Section 3., Initial Orientation (effective 09/14/2014) pages 1.
9. CDOC Administrative Directive 10.12, Inmate Orientation, Section 6., Orientation Procedures (effective 09/14/2014) page 2.
10. CDOC Administrative Directive 10.19, Americans with Disabilities Act, (effective 09/24/2021), pages 1-8.
11. CDOC Administrative Directive 9.5, Code of Penal Discipline, (effective 10/01/2019), pages 1-20.

**Conclusion:**

The narrative above provides a thorough overview of the evidence considered in the compliance determination following corrective action, the Auditor's analysis and rationale, as well as their conclusions.

<b>115.52</b>	<b>Exhaustion of administrative remedies</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	115.52 (a): An agency shall be exempt from this standard if it does not have

administrative procedures to address inmate grievances regarding sexual abuse.

CDOC Administrative Directive, 9.6 Inmate Administrative Remedies, (effective 08/15/2013), pages 1-12.

According to the director of the PREA Unit and agency head designee, the PCM, CDOC does not have an administrative procedure for dealing with inmate grievances regarding sexual abuse. Moreover, PAQ

115.52 (a)-1 Indicates that CDOC does not have an administrative procedure for dealing with inmates' grievances relating to sexual abuse. No.

115.52 (b): (1) The agency shall not impose a time limit on when an inmate may submit a grievance regarding an allegation of sexual abuse. (2) The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse. (3) The agency shall not require an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse. (4) Nothing in this section shall restrict the agency's ability to defend against an inmate lawsuit on the ground that the applicable statute of limitations has expired.

115.52 (b)-1 Agency policy or procedure allows an inmate to submit a grievance regarding an allegation of sexual abuse at any time, regardless of when the incident is alleged to have occurred. If "No", please provide time limit for an inmate to submit a grievance regarding an allegation of sexual abuse in the comments.

According to the director of the PREA Unit and agency head designee, the PCM, CDOC does not have an administrative procedure for dealing with inmate grievances regarding sexual abuse. Moreover, PAQ 115.52 (a)-1 Indicates that CDOC does not have an administrative procedure for dealing with inmates' grievances relating to sexual abuse. No.

Complaints alleging sexual abuse or sexual harassment do not follow the Administrative Remedies Procedure outlined in CDOC Administrative Directive, Inmates Administrative Remedies, Section 8.7 (effective 04/30/2021), page 11, states complaints alleging sexual abuse or sexual harassment do not follow the Administrative Remedies Procedure outlined in this Directive.

a. Complaints alleging retaliation or misconduct other than sexual abuse or sexual harassment must follow the Administrative Remedies Procedure outlined in this Directive. The Unit Administrative Director of OCPM shall respond within 15 business days of the receipt of the appeal.

115.52 (c): The agency shall ensure that— (1) An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint, and (2) Such grievance is not referred to a staff member who is the subject of the complaint. Not applicable.

115.52 (d): (1) The agency issues 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. (2) Computation of the 90-day time period does not include inmates' time to prepare any administrative appeal. (3) The agency may claim an extension of time to respond of up to 70 days if the normal period for response is insufficient to make an appropriate decision. The agency shall notify the inmate in writing of any such extension and provide a date by which a decision will be made. (4) At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for a reply, including any properly noticed extension, the inmate may consider the absence of a response to be a denial at that level. Not applicable.

115.52 (e): (1) Third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, shall be permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse and shall also be permitted to file such requests on behalf of inmates. (2) If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agrees to have the request filed on their behalf and may also require the alleged victim to pursue any subsequent steps in the administrative remedy process personally. (3) If the inmate declines to have the request processed on his or her behalf, the agency shall document the inmate's decision. Not applicable

115.52 (f): (1) The agency shall establish procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse. (2) After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, the agency shall 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, shall provide an initial response within 48 hours, and shall issue a final agency decision within five calendar days. The initial response and final agency decision document the agency's determination of whether the inmate is at substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance. Not applicable

115.52 (g): The agency may discipline an inmate for filing a grievance related to alleged sexual abuse only where the agency demonstrates that the inmate filed the grievance in bad faith.

Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Section 21., Disciplinary Sanctions (effective 08/01/2023) page 18.

Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Section 12. Inmate Sexual Abuse and Sexual Harassment, (effective 08/01/2023) page 11, states that inmates who file reports of sexual abuse and/or sexual harassment that are deemed to be false and unfounded after proper investigation may be subject to disciplinary action under Administrative/Unit Directive 9.5, Code of Penal Discipline and/or criminal charges according to applicable State laws.

The Auditor found no evidence of CDOC disciplining individuals for filing allegations in bad faith based on the review of sexual abuse and harassment investigations.

**Evidence relied upon:**

1. PAQ
2. Interview with the agency head (designee)
3. CDOC Administrative Remedies Procedure, 9.6 Inmates Administrative Remedies, (effective 04/30/2021), pages 1-12.
4. CDOC Administrative Remedies, 9.6 Inmates Administrative Remedies, Section 8.7, PREA Investigation Decision (effective 04/30/2021), page 11.
5. Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Section 21., Disciplinary Sanctions (effective 08/01/2023) page 18.
6. Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Section 12, Inmate Sexual Abuse and Sexual Harassment, (effective 08/01/2023) page 11.
7. CDOC Code of Penal Discipline (effective 10/01/2019) pages 1-20.
8. Examination of investigations from this reporting period.

**Conclusion:**

The narrative above provides a thorough overview of the evidence considered in the compliance determination, the Auditor's analysis and rationale, as well as their conclusions.

<b>115.53 Inmate access to outside confidential support services</b>	
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.53 (a): The facility shall 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, and, for persons detained solely for civil immigration purposes, immigrant services agencies. The facility shall enable reasonable communication between inmates and these organizations and agencies as confidential as possible.</p> <p>115.53 (a)-1 The facility provides inmates with access to outside victim advocates for emotional support services related to sexual abuse. Yes.</p>

CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section B., Supervisory Action (effective 08/01/2023) page 13.

CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, indicates attempts shall be made to make a victim advocate from a rape crisis center available to the offender victim first. If a rape crisis center is not able to provide the inmates with victim advocate services, the unit shall make available a qualified staff member from a community-based organization.

According to PAQ 115.53 (a), Manson provides inmates with access to outside victim advocates for emotional support services related to sexual abuse. During the facility tour, this Auditor observed victim advocacy posters posted throughout each living unit. The posters provide inmates with toll-free telephone contact information for the Connecticut Alliance to End Sexual Violence (CAESV). Dial \*9444# to reach the free, confidential statewide hotline 24/7, 365 days. The services include communication with a certified sexual assault victim advocate in (English/Spanish), short-term, counseling, information, referrals to other social and legal services, and accompaniment and support in hospitals, police departments, and courts.

115.53 (a)-2 The facility provides inmates with access to such services by giving inmates mailing addresses and telephone numbers (including toll-free hotline numbers where available) for local, state, or national victim advocacy or rape crisis organizations. Yes.

Telephones in each living unit were checked by calling the Connecticut Alliance to End Sexual Violence to ensure they were working. Inmates also used these phones to make personal calls. Calls to the Connecticut Alliance to End Sexual Violence are toll-free, with the correct number listed and verified. A live representative in Milford, CT, answered the call and explained the routing system, which directs calls based on the inmate's county. For instance, the nearest advocacy organization, The Women and Family Center in Meriden, CT, serves the facility. Their numbers are (203) 235-9297 and toll-free hotline (203) 235-4444.

The Connecticut Alliance to End Sexual Violence confirmed that it is prepared and willing to offer victim advocacy services, including accompaniment and support in hospitals (SANE examinations), police departments, and courts, by a certified victim advocate to CDOC inmates throughout Connecticut. During this reporting period, two incidents involved allegations of sexual abuse; the inmates involved were no longer assigned to Manson.

115.53 (a)-3 The facility provides inmates with access to such services by giving inmates mailing addresses and telephone numbers (including toll-free hotline numbers where available) for immigrant services agencies for persons detained solely for civil immigration purposes. Yes.

The Auditor examines the facility inmate handbook, John R. Manson Youth Institution (effective 12/27/2019), pages 1-41, for inmates between ages 15 through 21.

115.53 (a)-4 The facility provides inmates with access to such services by enabling reasonable communication between inmates and these organizations in as confidential a manner as possible. Yes.

PREA Audit Site Review - Also see 115.33 Inmate Education

The facility tour included segregation. During the tour, this Auditor noted advocacy contact information displayed on each living unit and in public areas, administration, medical, mental health, recreation, and food service. During discussions with certain segregated inmates about their access to external emotional support services via phone, access phones including those in restricted housing, reasonable accommodations for those needing it, and limits to confidentiality), it was indicated that calls could be scheduled with a unit counselor if there were telephone restrictions.

It should be noted that during intake, inmates are provided with the mailing address for the Connecticut Alliance to End Sexual Violence, making it possible for inmates in restricted housing to communicate in writing. The unit counselor makes rounds daily and will accept confidential mail from inmates in segregation. Additionally, the same victim advocacy organization offers the ability to chat via text.

During the Manson audit, the Auditor interviewed twenty-six inmates. While all were generally aware of emotional support services, none provided specific details or information on services for abuse victims. However, all knew how to access contact information or call from their respective living units, the Connecticut Alliance to End Sexual Violence. The PREA Unit Captain reported one sexual abuse incident during this period. Inmates who reported abuse were not interviewed. Manson mistakenly closed a sexual abuse allegation without following protocol, delaying notification to the PREA Unit. After correction, the number of allegations is now two.

115.53 (b): Before giving them access, the facility shall inform inmates of the extent to which such communications will be monitored and how reports of abuse will be forwarded to authorities under mandatory reporting laws.

115.53 (b)-1 The facility informs inmates, before giving them access to outside support services, the extent to which such communications will be monitored.

Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, (effective 08/01/2023) pages 1-21.

During the facility tour, the Auditor tested the telephone system, which informs callers that calls may be monitored. Administrative Directive 10.7 outlines telephone access and policies for inmates in Special Management, while Directive 6.12 ensures inmates know how communications will be monitored and reported under mandatory laws. According to PAQ 115.53 (b)-1 Manson, inmates are informed about monitoring before accessing outside support services. Inmates confirmed that phones are monitored, and they are notified before calls. CDOC Notification and Acknowledgement for Inmates states the Commissioner of Corrections' regulations on mail and phone use. Inmates must acknowledge and sign an understanding of these

guidelines.

115.53 (b)-2 The facility informs inmates, prior to giving them access to outside support services, of the mandatory reporting rules governing privacy, confidentiality, and/or privilege that apply to disclosures of sexual abuse made to outside victim advocates, including any limits to confidentiality under relevant federal, state, or local law. Yes.

CDOC Notification and Acknowledgement for Inmates states the Commissioner of Corrections' regulations on mail and phone use. Inmates must acknowledge and sign an understanding of these guidelines.

Refer to the CDOC PREA Acknowledgement Form for definitions of sexually abusive contact, nonconsensual sexual acts, third-party reporting details, and a toll-free number for a local victim advocacy organization.

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

115.53 (c)- 1 The agency PREA Coordinator confirmed during an interview that CDOC maintains a memorandum of understanding (MOU) with victim advocacy community service providers that will provide inmates with emotional support services related to sexual abuse. Further, CDOC provided evidence of the agreement in the form of a MOU with the Connecticut Alliance to End Sexual Violence. During this audit, the Auditor contacted the Connecticut Alliance to End Sexual Violence. A live representative confirmed that the Connecticut Alliance to End Sexual Violence provided information about the routing system and services provided by the organization. The Connecticut Alliance to End Sexual Violence (Milford, CT) routes calls to other victim advocacy organizations in the alliance relative to the county the inmate is calling from. For example, the Manson victim advocacy organization closest to Manson is the Women's Family Center. The Connecticut Alliance to End Sexual Violence, the alliance, confirmed that the organization is prepared and willing to offer victim advocacy services, including accompaniment and support in hospitals (SANE examinations), police departments, and courts, by a certified victim advocate to CDOC inmates and throughout Connecticut.

A sample of inmates were asked the following question: Are you aware if conversations with service personnel remain private? All inmates sampled were aware that calls could be recorded.

According to 115.53 (b)-1 Manson, inmates are informed about monitoring before accessing outside support services. Inmates confirmed that phones are monitored, and they are notified before calls. CDOC Notification and Acknowledgement for Inmates states the Commissioner of Corrections' regulations on mail and phone use. Inmates must acknowledge and sign an understanding of these guidelines.

115.53 (c)-1 also confirms that CDOC maintains a memorandum of understanding (MOU) with community service providers that can provide inmates with emotional support services related to sexual abuse. By examination, CDOC maintains a MOU with the victim advocacy organization for incarcerated individuals. Yes.

115.53 (c)-2 The agency or facility maintains copies of those agreements. Yes. Skip to 115.54.

By examination, this Auditor confirmed CDOC maintains an agreement with a community service organization.

**Evidence relied upon:**

1. PAQ
2. Facility tour and site review
3. CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section B., Supervisory Action (effective 08/01/2023) page 13.
4. CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, (effective 08/01/2023) pages 1-21.
5. CDOC PREA Acknowledge Form (sample)
6. CDOC telephone monitoring notification and acknowledgement form
7. CDOC Advocate Poster (female)
8. CDOC Advocate Poster (male)
9. Interview with inmates

**Conclusion:**

The narrative above provides a thorough overview of the evidence considered in the compliance determination following corrective action, the Auditor's analysis and rationale, as well as their conclusions.

<b>115.54</b>	<b>Third-party reporting</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	115.54 (a): The agency shall establish a method to receive third-party reports of sexual abuse and sexual harassment and shall distribute public information on how to report sexual abuse and sexual harassment on behalf of an inmate.  115.54 (a)-1 The agency or facility provides a method to receive third-party reports of inmate sexual abuse or sexual harassment. Yes.  Manson describes the method as verbally, phone, mail or writing.

Connecticut Department of Correction, Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 12, Inmate and Third-Party Reporting of Sexual Abuse and Sexual Harassment, Subsection A., Inmate Reporting, (effective 08/01/2023) page 9.

Connecticut Department of Correction, Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 12, Inmate and Third-Party Reporting of Sexual Abuse and Sexual Harassment, Subsection A., Inmate Reporting, (effective 08/01/2023) page 9, indicates inmates may report incidents of sexual abuse or sexual harassment in multiple ways such as calling the Connecticut State Police, an external reporting entity, from a living unit, calling the PREA hotline, or writing an anonymous note telling a trusted staff person. Staff shall also accept such reports from individuals outside the correctional facility.

115.54 (a)-2 The agency or facility publicly distributes information on how to report inmate sexual abuse or sexual harassment on behalf of inmates.

During the on-site portion of this audit, this Auditor interviewed a select sample of inmates (random and Targeted (26), all of whom provided this Auditor with a third party who could report allegations of sexual abuse or sexual harassment. Further, interviews with a select sample of random staff (14) all affirmed a duty to accept allegations of sexual abuse or sexual harassment from third parties, notify the Shift Supervisor, and document the incident.

The Auditor confirmed through an internet search that CDOC provides information on its webpage about reporting inmate sexual abuse or harassment.

Connecticut Department of Correction, Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 12, Inmate and Third-Party Reporting of Sexual Abuse and Sexual Harassment, Inmate Reporting, Subsection B. Third Party Reporting, (effective 08/01/2023) page 9, states staff shall accept reports of sexual abuse, sexual harassment, retaliation for reporting sexual abuse and harassment or staff neglect or violation of responsibilities from inmates not directly involved in the incident in question.

The PCM confirmed, as indicated in PAQ 115.54 (a)-1 that CDOC provides a method to receive third-party reports of inmate sexual abuse or sexual harassment from family, friends, and concerned persons by calling the Connecticut State Police.

The Connecticut State Police PREA (Prison Rape Elimination Act) Unit is responsible for overseeing PREA investigations by working with the assigned investigator(s) and the Internal Affairs Unit following the report of an alleged or actual sexual assault under agency Administrative Directives and Department of Justice National Standards to prevent, detect and respond to prison rape. The Connecticut State Police shall maintain a zero-tolerance policy on sexual assault in support of the requirements and standards within Public Act 108-79, The Prison Rape Elimination Act of 2003.

Further, reports of sexual abuse and sexual harassment can come from the inmate needing protection, other inmates, the inmates' families, CDOC staff, or others.

Reports of abuse or harassment can also be made by 1) writing to or calling the CDOC Commissioner, CDOC Deputy Commissioner, CDOC District Administrator, or Manson Unit Administrator of the facility where the incident allegedly occurred or 2) contacting the PREA Coordinator, director of the PREA Unit. These complaints, reports, or allegations of sexual abuse or sexual harassment can be submitted via the CDOC website or from inside a correctional facility by calling the Connecticut State Police (\*9333#) or calling the CDOC toll-free hotline number (\*9222#).

### **Facility tour and Site Review**

During the facility tour, this Auditor observed that PREA-related signage (English/ Spanish), including contact information for emotional services in the community, was located throughout the facility and was easily readable and accessible to all inmates, including those with disabilities. The signage text size, formatting, and physical placement would accommodate most readers, including those of average height, low vision/visually impaired, or physically disabled/in a wheelchair. The PREA-related signage observed by this Auditor was understandable, clear, and free of graffiti or signs of vandalism. Signage specific to emotional support indicated the services provided and how a victim could contact the organization. This Auditor also observed that signage was co-located on the bulletin board of each living unit near the row of telephones in each living unit. The Auditor observed all signage to be accurate and consistent throughout the facility (e.g., audit notices are relevant to the current audit; the contact information for the Auditor was consistent; contact information for emotional services was consistent for the service organization and included pertinent information).

In areas common to staff and inmates, this Auditor observed PREA-related information, including signage information on third-party reporting: Third-party reporting posters were brightly colored with large black fonts and posted in public areas of the facility that can be accessed by family members, friends, advocates, and attorneys (e.g., family visitation areas, attorney visiting areas, public-facing websites) as well as any areas frequented by inmates at Manson. The inmates interviewed (random and targeted)(26) indicated they were aware of third-party reporting methods.

### **Evidence relied upon:**

1. PAQ
2. CDOC PREA Unit Contact Information
3. CDOC internet search
4. Facility tour and Site Review
5. CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 12, Inmate and Third-Party Reporting of Sexual Abuse and Sexual Harassment, Inmate Reporting, Subsection B. Third Party Reporting, (effective 08/01/2023) page 9.

	<p><b>Conclusion:</b></p> <p>The narrative above provides a thorough overview of the evidence considered in the compliance determination following corrective action, the Auditor's analysis and rationale, as well as their conclusions.</p>
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<b>115.61</b>	<b>Staff and agency reporting duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.61 (a): The agency shall require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency; retaliation against inmates or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.</p> <p>115.61 (a)-1 The agency requires all staff to report immediately and according to agency policy any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency. Yes.</p> <p>CDOC, Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Staff Monitoring and Intervention (Sexual Abuse), Section 13A, Staff Actions, (effective 07/20/15) page 12.</p> <p>CDOC, Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Staff Monitoring and Intervention (Sexual Abuse), Section 13A, Staff Actions, page 12, requires all CDOC 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; retaliation against inmates or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.</p> <p>115.61 (a)-2 The agency requires all staff to report any retaliation against inmates or staff who reported such an incident immediately and according to agency policy. Yes</p> <p>CDOC, Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Staff Monitoring and Intervention (Sexual Abuse), Section 13A, Staff Actions, (effective 07/20/15) page 12.</p> <p>During his interview, the PCM confirmed PAQ 115.61 (a)-2 that the agency requires all staff to report any retaliation against inmates or staff who reported such an</p>

incident immediately and according to agency policy.

115.61 (a)-3 The agency requires all staff to report immediately and according to agency policy any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. Yes.

CDOC, Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Staff Monitoring and Intervention (Sexual Abuse), Section 13A, Staff Actions, (effective 07/20/15) page 12.

Interviews with a random and specialized sample of staff confirmed their obligation to report any knowledge, suspicion, or information regarding incidents of sexual abuse or harassment occurring in a facility. This responsibility includes reporting incidents within or outside the agency, any retaliation against individuals who reported such incidents, and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.

#### TESTING STAFF REPORTING

Interviews with 14 random staff members confirmed they are not required to report sexual abuse or harassment incidents directly to the staff member involved.

Reporting methods include:

- Email
- Telephone
- Face-to-face communication
- Contacting the PREA Unit
- Submitting an incident report
- Informing a shift supervisor
- Connecticut State Police

115.61 (b): Apart from reporting to designated supervisors or officials, staff shall not reveal 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.

115.61 (b)-1 Apart from reporting to designated supervisors or officials and designated state or local services agencies, agency policy prohibits staff from revealing any information related to a sexual abuse report to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions. Yes.

CDOC, Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment

Prevention and Intervention, Staff Monitoring and Intervention (Sexual Abuse), Section 13A, Staff Actions, (effective 07/20/15) page 13.

Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Staff Monitoring and Intervention (Sexual Abuse), Section 13A, Staff Actions, page 13, and as indicated in PAQ 115.61 (b)-1 apart from reporting to designated supervisors or officials and designated state or local services agencies, agency policy prohibits staff from revealing any information related to a sexual abuse report to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions.

Interviews with a sample of 14 random and specialized staff confirmed the agency requirement to report all allegations or suspicions of sexual abuse or harassment to designated supervisors or officials and state or local services agencies. The agency policy prohibits staff from disclosing any information related to a sexual abuse report except as necessary for treatment, investigation, and security or management decisions.

115.61 (c): Unless otherwise precluded by Federal, State, or local law, medical and mental health practitioners shall be required to report sexual abuse under paragraph (a) of this section and to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services.

Medical and mental health practitioners confirm their duty to report sexual abuse and inform inmates of this duty and confidentiality limits at the start of services.

Practitioners stated that inmates are advised of these obligations during the medical intake process. Inmates sign an acknowledgment form, which is added to their medical record.

115.61 (d): If the alleged victim is under 18 or considered a vulnerable adult under a State or local vulnerable persons statute, the agency shall report the allegation to the designated State or local services agency under applicable mandatory reporting laws.

Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Staff Monitoring and Intervention (Sexual Abuse), Section 13A, Staff Actions, Subsection C, Medical Staff Actions, page 13 indicates If the alleged victim is under 18 or considered a vulnerable adult under a State or local vulnerable persons statute, the agency shall report the allegation to the designated State or local services agency under applicable mandatory reporting laws.

Interviews with a select group of medical and mental health practitioners confirm their professional and agency duty to report sexual abuse under paragraph (a) of this section. Practitioners are required to inform inmates of their duty to report and the limitations of confidentiality at the beginning of services. All interviewed practitioners indicated that during the medical portion of the intake process, inmates are advised

of these duties and limitations. Inmates are then required to sign an acknowledgment form, which is subsequently included in their medical records.

During this audit, the Auditor interviewed the Warden regarding the procedures followed when an individual under the age of 18 or a person classified as a vulnerable adult under state or local law reports an allegation of sexual abuse or sexual harassment.

During the audit, the Auditor interviewed the PREA Coordinator, who explained that any allegations of sexual abuse or harassment involving minors or vulnerable adults are investigated by the agency.

115.61 (e): The facility shall report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators.

Interviews with a sample of fourteen staff confirm that all allegations of sexual abuse and harassment, including third-party and anonymous reports, must be reported to the facility's designated investigators. The Auditor reviewed reports to verify if Manson had reported all the allegations. Over the past year, two incidents were reported. However, one incident of sexual abuse was not reported to the CSP as required by policy, necessitating corrective action.

**Evidence relied upon:**

1. PAQ
2. Interview with random staff
3. Interview with the PREA Coordinator
4. CDOC, Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Staff Monitoring and Intervention (Sexual Abuse), Section 13A, Staff Actions, (effective 07/20/15) page 13.
5. CDOC, Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Staff Monitoring and Intervention (Sexual Abuse), Section 13A, Staff Actions, (effective 07/20/15) page 12.
6. Examination of sample reports to investigators

**Corrective Action:**

1. CDOC will reinvestigate the allegation of sexual abuse following established reporting Administrative Directive 6.12 16—Investigation of Sexual Abuse/Sexual Harassment. The Connecticut State Police shall serve as the primary investigating authority in all incidents of sexual abuse within the Department of Correction.
2. All such referrals to the police shall be documented. The Department's PREA Investigation Unit shall assist the appropriate law enforcement agency as needed and conduct a separate internal investigation into the incident by Administrative/Unit Directive 1.10, Investigations.
3. The PREA Investigation Unit or designee shall serve as the primary

investigating authority for all incidents of sexual harassment.

4. All PREA investigators shall complete specialized training by Administrative/Unit Directive 1.10. If the appropriate law enforcement agency refuses to investigate a the refusal shall be documented on Incident Report Form CN 6601, and the Unit Administrator shall be immediately notified.
5. The Auditor will be given evidence of compliance with the corrective action as outlined. CDOC (PREA Unit) will retrain Manson's correctional supervisor and provide the Auditor with written evidence of acknowledgment of the said training regarding Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention.
6. CDOC will revise the PREA Checklist to remove discretion in reporting sexual abuse incidents to the Connecticut State Police for facilities.
7. CDOC will notify all correctional facilities about the changes to the PREA Checklist.

**Conclusion:**

The narrative discusses all evidence for the compliance or non-compliance decision and the Auditor's analysis, reasoning, and conclusions.

<b>115.62 Agency protection duties</b>	
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>CDOC Administrative Directive 6.12, Section 16 C., Investigation of Sexual Abuse/Sexual Harassment (effective 07/20/15) pages 14-15.115.62 (a): When an agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, it shall take immediate action to protect the inmate.</p> <p>115.62 (a)-1 When the agency or facility learns that an inmate is subject to a substantial risk of imminent sexual abuse, it takes immediate action to protect the inmate (i.e., it takes some action to assess and implement appropriate protective measures without unreasonable delay). Yes.</p> <p>Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Section 13c, Staff Monitoring and Intervention (Sexual Abuse), page 8.</p> <p>Per Administrative Directive 6.12, staff, volunteers, vendors, and contractors must treat any observed sexual activity as potential sexual abuse. All staff, vendors, volunteers, and contractors shall report any instance of suspected, alleged, or actual sexual abuse, retaliation against staff or inmates for reporting sexual abuse, or staff</p>

neglect or violation of responsibilities contributing to sexual abuse to a shift supervisor as soon as practical and provide documentation under the Administrative Directive/Unit 6.6, Reporting of Incidents.

115.62 (a)-2 In the past 12 months, the number of times the agency or facility determined that an inmate was subject to a substantial risk of imminent sexual abuse: 0.

Interviews with fourteen random and specialized staff during the audit confirmed their duty to protect inmates at substantial risk of imminent sexual abuse. Immediate actions included moving the victim closer to the officer station and notifying the supervisor. All staff stated they would act immediately and document the incident as per Administrative Directive/Unit 6.6, Reporting of Incidents.

115.62 (a)-3 If the agency or facility made such determinations in the past 12 months, the average amount of time (in hours) passed before taking action: 0.

115.62 (a)-4 The longest time passed (in hours or days) before taking action (please note if response is in hours or days). 0.

Administrative Directive 9.9 Protective Management, Determination of Substantial Risk Section 5. Subsection, Initial Action and Assessment, page 2.

During an interview with the Warden and the director of the PREA Unit, it was confirmed that when the agency learns an inmate is at substantial risk of imminent sexual abuse, immediate action is taken to protect them. Administrative Directive 9.9 states that the Manson Unit Administrator must ensure prompt protective measures upon notification of such a risk. An assessment will determine the threat's validity and necessary protection. A supervisor will interview the threatened inmate and others involved, completing the relevant sections of CN 9901. In the past 12 months, there were no instances where the agency determined an inmate was at substantial risk of imminent sexual abuse.

**Evidence relied upon:**

1. PAQ
2. Interview with the Agency Head (designee)
3. Interview with the Warden or Designee
4. Interview with a Random Sample of Staff (14)
5. CDOC Administrative Directive 9.9 Protective Management, Determination of Substantial Risk Section 5. Subsection, Initial Action and Assessment, page 2
6. CDOC Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Section 13, Staff Monitoring and Intervention (Sexual Abuse), page 8.

**Conclusion:**

The narrative discusses all evidence for the compliance or non-compliance decision and the Auditor's analysis, reasoning, and conclusions.

115.63	<b>Reporting to other confinement facilities</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.63 (a): Upon receiving an allegation that an inmate was sexually abused while confined at another facility, the head of the facility that received the allegation shall notify the head of the facility or the appropriate office of the agency where the alleged abuse occurred.</p>
	<p>115.63 (a)-1 The agency has a policy requiring that, upon receiving an allegation that an inmate was sexually abused while confined at another facility, the head of the facility must notify the head of the facility or appropriate office of the agency or facility where sexual abuse is alleged to have occurred. Yes.</p>
	<p>115.63 (a)-2 In the past 12 months, the number of allegations the facility received that an inmate was abused while confined at another facility: 0.</p>
	<p>115.63 (a)-3 Please describe your facility's response to these allegations: Not applicable.</p>
	<p>CDOC Administrative Directive 6.12, Section 16 C., Investigation of Sexual Abuse/Sexual Harassment (effective 07/20/15) pages 14-15.</p>
	<p>CDOC Administrative Directive, 6.12 Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention states upon receiving an allegation that an inmate was sexually abused while confined at another facility, the head of the facility that received the allegation shall notify the head of the facility or the appropriate office of the agency where the alleged abuse occurred.</p>
	<p>During an interview with the Warden, he confirmed that upon receiving an allegation that an inmate was sexually abused while confined at another facility, the head of the facility that received the allegation shall notify the head of the facility or the appropriate office of the agency where the alleged abuse occurred. The PCM confirmed during their interview that PAQ115.63 (a)-2; in the past 12 months, the number of allegations the facility received that an inmate was abused while confined at another facility remained zero, as previously stated. Documentation of notifications to verify that they occurred within 72 hours of receiving the allegation was unavailable; zero notifications happened in the past 12 months. By examination of investigative reports for the past 12-month period, this Auditor determined that zero investigations were initiated as a result of an allegation that an inmate was sexually abused while confined at another facility.</p>
	<p>115.63 (b): Such notification shall be provided as soon as possible but no later than 72 hours after receiving the allegation.</p>
	<p>115.63 (b)-1 Agency policy requires that the facility head provide such notification as soon as possible, but no later than 72 hours after receiving the allegation. Yes.</p>

During an interview with the Warden, he confirmed that when applicable, upon receiving an allegation that an inmate was sexually abused while confined at another facility, the notification shall be provided as soon as possible but no later than 72 hours after receiving the allegation. The Warden confirmed that, as stated in 115.63 (a), in the past 12 months, the number of allegations Manson received that an inmate was sexually abused while confined at another facility was zero. Administrative Directive, 6.12 Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention states such notification shall be provided as soon as possible but no later than 72 hours after receiving the allegation

115.63 (c): The agency shall document that it has provided such notification.

115.63 (c)-1 The agency or facility documents that it has provided such notification within 72 hours of receiving the allegation. Yes.

During an interview with the Warden, he confirmed that when applicable, upon receiving an allegation that an inmate was sexually abused while confined at another facility, the notification shall be provided as soon as possible but no later than 72 hours after receiving the allegation, and the facility/agency shall document that it has provided notification. Administrative Directive 6.12 Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention states that the agency shall document that it has provided such notification.

115.63 (d): The facility head or agency office receiving such notification shall ensure that the allegation is investigated per these standards.

115.63 (d)-1 The agency or facility policy requires that allegations received from other facilities and agencies are investigated in accordance with the PREA standards. Yes.

115.63 (d)-2 In the past 12 months, the number of allegations of sexual abuse the facility received from other facilities: 0.

CDOC Administrative Directive 6.12, Section 16 C., Investigation of Sexual Abuse/Sexual Harassment (effective 07/20/15) pages 14-15.

During an interview with the Warden, he confirmed that when applicable, the facility head or agency office receiving such notification shall ensure that the allegation is investigated per these standards. Further, the Warden indicated that if the incident reported allegedly occurred in any facility or agency or at a facility/site under the jurisdiction of the Department of Correction other than where it is reported, the Unit Administrator or designee shall notify the Warden, who will notify the administrator of the other facility of the allegation within 72 hours of the reporting of the incident. This substandard requires corrective action.

FAQ states the notification must, at a minimum, be: (1) Made at the direction of the facility head and (2) Appear to a third party to have originated with the facility head. For example, the facility head could instruct his or her administrative assistant to send the notification on the facility head's letterhead with the facility head's

signature or to send the notification from the facility head's email address. By contrast, the facility's PREA Compliance Manager could not send the notification from his or her email address and merely copy the facility head.

**Evidence relied upon:**

1. PAQ
2. Interview with the Agency Head
3. Interview with the Warden or Designee
4. Interview with a Random Sample of Staff (14)
5. CDOC Administrative Directive 6.12, Section 16 C., Investigation of Sexual Abuse/Sexual Harassment (effective 07/20/15) pages 14-15.

**Recommendation:**

115.63 (d): Requires the agency head to make notifications or, at a minimum, be (1) Made at the direction of the facility head and (2) Appear to a third party to have originated with the facility head. For example, the facility head could instruct his or her administrative assistant to send the notification on the facility head's letterhead with the facility head's signature or to send the notification from the facility head's email address. By contrast, the facility's PREA Compliance Manager could not send the notification from his or her email address and merely copy the facility head.

Manson will correct the information in AD 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention Supervisory Action, Section 13, 9B, page 13. Manson will provide this Auditor with evidence of corrective action.

**Conclusion:**

The narrative discusses all evidence for the compliance or non-compliance decision and the Auditor's analysis, reasoning, and conclusions.

**115.64 Staff first responder duties**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

115.64 (a): Upon learning of an allegation that an inmate was sexually abused, the first security staff member to respond to the report shall be required to (1) Separate the alleged victim and abuser; (2) Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence; (3) If the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating,

defecating, smoking, drinking, or eating; and (4) If the abuse occurred within a time period that still allows for the collection of physical evidence, ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.

115.64 (a)-1, The agency has a first responder policy for allegations of sexual abuse. Yes.

The CDOC has a first responder policy for allegations of sexual abuse. Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 13, Staff Monitoring and Intervention (Sexual Abuse), Section A, Staff Actions, pages 12- 13.

Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 13, Staff Monitoring and Intervention (Sexual Abuse), Section A, Staff Actions, pages 12- 13., states if a staff member, including medical staff, suspects that an inmate or third party alleges that he/she or another inmate may have suffered from sexual abuse, the following actions shall be implemented: 1. Identify, separate, and secure involved inmates, if necessary. 2. Identify the crime scene and maintain its integrity for evidence gathering. 3. Notify a shift supervisor of the incident as soon as practical. 4. Do not allow any involved inmates to shower, wash, drink, brush teeth, eat, defecate, urinate, or change clothes until examined if doing so could be reasonably expected to destroy biological, forensic, or physical evidence related to such sexual abuse. 5. Promptly document the incident on CN 6601, Incident Report, and forward it to a shift supervisor under Administrative/Unit Directive 6.6, Reporting of Incidents—inmate Sexual Abuse/Sexual Harassment Prevention and Intervention. 6. Apart from reporting to designated supervisors or officials, staff shall not reveal any information related to sexual abuse reports to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions.

115.64 (a)-2 The policy requires that, upon learning of an allegation that an inmate was sexually abused, the first security staff member to respond to the report to separate the alleged victim and abuser. Yes.

See 115.64 (a)-1.

115.64 (a)-3 The policy requires that, upon learning of an allegation that an inmate was sexually abused, the first security staff member to respond to the report to preserve and protect any crime scene until appropriate steps can be taken to collect any evidence.

Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 13, Staff Monitoring and Intervention (Sexual Abuse), Section A, Staff Actions, pages 12- 13.

115.64 (a)-4 The policy requires that, if the abuse occurred within a time period that still allows for the collection of physical evidence, the first security staff member to

respond to the report 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. Yes.

Administrative Directive 6.12 also requires that, upon learning of an allegation that an inmate was sexually abused,

1) The first security staff member to respond to the report to separate the alleged victim and abuser upon learning of an allegation that an inmate was sexually abused, the first security staff member to respond to the report to preserve and protect any crime scene until appropriate steps can be taken to collect any evidence.

2). If the abuse occurred within a period that still allows for the collection of physical evidence, the first security staff member to respond to the report 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.

3). If the abuse occurred within a period that still allows for the collection of physical evidence, the first security staff member to respond to the report ensures 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.

During the on-site portion of this audit, the Auditor interviewed security and non-security first responders separately. Each first responder confirmed a duty to act as 1. Identify, separate, and secure inmates involved, if necessary. 2. Identify the crime scene and maintain the scene's integrity for evidence gathering. 3. Notify a shift supervisor of the incident as soon as practical. 4. Do not allow any inmates involved to shower, wash, drink, brush teeth, eat, defecate, urinate, or change clothes until examined if doing so could be reasonably expected to destroy biological, forensic, or physical evidence related to such sexual abuse and document the incident on form CN 6601.

115.64 (a)-5 The policy requires that, if the abuse occurred within a time period that still allows for the collection of physical evidence, the first security staff member to respond to the report 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. Yes.

Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 13, Staff Monitoring and Intervention (Sexual Abuse), Section A, Staff Actions, pages 12- 13.

115.64 (a)-6 In the past 12 months, the number of allegations that an inmate was sexually abused: 2.

115.64 (a)-7 Of these allegations of sexual abuse in the past 12 months, the number of times the first security staff member to respond to the report separated the alleged

victim and abuser: 1.

115.64 (a)-8 In the past 12 months, the number of allegations where staff were notified within a time period that still allowed for the collection of physical evidence: 2.

115.64 (a)-9 Of these allegations in the past 12 months where staff were notified within a time period that still allowed for the collection of physical evidence, the number of times the first security staff member to respond to the report preserved and protected any crime scene until appropriate steps could be taken to collect any evidence: 0.

115.64 (a)-10 Of these allegations in the past 12 months where staff were notified within a time period that still allowed for the collection of physical evidence, the number of times the first security staff member to respond to the report requested 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: 0.

115.64 (a)-11 Of these allegations in the past 12 months where staff were notified within a time period that still allowed for the collection of physical evidence, the number of times the first security staff member to respond to the report ensured that the alleged abuser not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating: 0.

All random staff (20) selected for an interview during this audit separately confirmed a duty to take actions, such as: 1. Identify, separate, and secure inmates involved, if necessary. 2. Identify the crime scene and maintain the scene's integrity for evidence gathering. 3. Notify a shift supervisor of the incident as soon as practical. 4. Do not allow any inmates involved to shower, wash, drink, brush teeth, eat, defecate, urinate, or change clothes until examined if doing so could be reasonably expected to destroy biological, forensic, or physical evidence related to such sexual abuse and document the incident on form CN 6601.

By examination of investigative reports (2) initiated in the prior 12-month period, this Auditor determined that Manson documented its response to allegations of sexual abuse and that the first responders acted appropriately.

A security staff member and a non-security staff first responder were interviewed during the audit. Each responder was asked can you describe the actions you take as a first responder to an allegation of sexual abuse? The security first responder responded:

1. Safeguard the victim from the abuser;
2. Notify a supervisor
3. Document the incident
4. Protect the crime scene

5. Requesting that the alleged victim not destroy physical evidence (such as washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating)

**Non-Security Staff First Responder responded:**

1. Safeguard the victim from the abuser;
2. Notify a supervisor
3. Requesting that the alleged victim not destroy physical evidence

115.64 (b): If the first staff responder is not a security staff member, the responder shall be required to request that the alleged victim refrain from taking any actions that could destroy physical evidence and then notify security staff.

Agency policy requires that if the first staff responder is not a security staff member, that responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence. Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 13, Staff Monitoring and Intervention (Sexual Abuse), page 12, states that staff, volunteers, vendors and contractors shall treat any observation of sexual activity as potential sexual abuse. All staff, vendors, volunteers, and contractors shall report any instance of suspected, alleged, or actual sexual abuse, retaliation against staff or inmates for reporting sexual abuse, or staff neglect or violation of responsibilities contributing to sexual abuse to a shift supervisor as soon as practical and provide documentation under Administrative Directive/Unit 6.6, Reporting of Incidents.

Agency policy requires that if the first staff responder is not a security staff member, that responder shall be required to notify security staff. Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 13, Staff Monitoring and Intervention (Sexual Abuse), page 12, states that staff, volunteers, vendors and contractors shall treat any observation of sexual activity as potential sexual abuse. All staff, vendors, volunteers, and contractors shall report any instance of suspected, alleged, or actual sexual abuse, retaliation against staff or inmates for reporting sexual abuse, or staff neglect or violation of responsibilities contributing to sexual abuse to a shift supervisor as soon as practical and provide documentation under Administrative Directive/Unit 6.6, Reporting of Incidents.

Administrative Directive/Unit Directive 6.6, Section 5, Notification General Provisions and Procedures, Subsection I, General Provisions, page 1. indicates reporting of incidents shall conform to the following requirements: a. General Provisions: states, all Unit Administrators, Directors, or their designees shall be responsible for reporting each class of incident by this Directive to their immediate supervisor. 1. Any event that a staff member reports to a supervisor shall be documented appropriately.

The Auditor interviewed a random sample of select staff (20). All random staff interviewed confirmed a duty as a first responder (security and non-security), a requirement to ensure that the alleged victim refrains from taking any actions that could destroy physical evidence, and then notify security staff, the shift supervisor.

As confirmed by the Captain of the PREA Unit and according to PAQ 115.64 (b)-3-5, Of the allegations that an inmate was sexually abused made in the past 12 months, the number of times a non-security staff member was the first responder was zero. Investigative reports (2) examined from the prior 12-month period confirmed this PAQ.

**Evidence relied upon:**

1. PAQ
2. CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention
3. CDOC Administrative Directive 6.6, Reporting of Incidents
4. Security Staff and Non-Security Staff First Responders (2)
5. Inmates who Reported a Sexual Abuse (2)  
Examination of investigative reports with responses
6. Interviews with random staff (14)

**Corrective Action:**

1. 115.64 (a)-9 Of these allegations in the past 12 months where staff were notified within a period that still allowed for the collection of physical evidence, the number of times the first security staff member to respond to the report preserved and protected any crime scene until appropriate steps could be taken to collect any evidence: was zero. Clarification requested. There were two allegations in the prior 12-month period.
2. 115.64 (b)-3 Of the allegations that an inmate was sexually abused made in the past 12 months, the number of times a non-security staff member was the first responder was zero.
3. 115.64 (b)-4 Of those allegations a non-security staff member responded to, the number of times that staff member requested that the alleged victim not take any actions that could destroy physical evidence was zero.
4. 115.64 (b)-5 Of those allegations first responded to by a non-security staff member, the number of times that staff member notified security staff was zero.

**Conclusion:**

The narrative discusses all evidence for the compliance or non-compliance decision after corrective action and the Auditor's analysis, reasoning, and conclusions.

<b>115.65</b>	<b>Coordinated response</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>115.66 (a): Neither the agency nor any other governmental entity responsible for collective bargaining on the agency's behalf shall enter into or renew 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.</p>
	<p>According to the PREA Coordinator and director of the PREA Unit (designated agency head), CDOC policy indicates that collective bargaining agreements are limited to contractual contracts approved at the agency level. CDOC, by administrative directive, has no agreements in place that restrict the agency's authority to remove alleged abusers from contact with inmates. The last time there were any collective bargaining agreements was in August 2012.</p>
	<p>115.66 (b): Nothing in this standard shall restrict the entering into or renewal of agreements that govern: (1) The conduct of the disciplinary process, as long as such agreements are not inconsistent with the provisions of §§ 115.72 and 115.76; or (2) Whether a no-contact assignment that is imposed pending the outcome of an investigation shall be expunged from or retained in the staff member's personnel file following a determination that the allegation of sexual abuse is not substantiated.</p>
	<p>This Auditor is not required to audit this provision.</p>
	<p><b>Evidence relied upon:</b></p>
	<ol style="list-style-type: none"> <li>1. PAQ</li> <li>2. CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, addresses this standard.</li> <li>3. Agency Head (designee)</li> </ol>
	<p><b>Conclusion:</b></p>
	<p>The narrative discusses all evidence for the compliance or non-compliance decision after corrective action and the Auditor's analysis, reasoning, and conclusions.</p>

<b>115.66</b>	<b>Preservation of ability to protect inmates from contact with abusers</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>

115.66 (a): Neither the agency nor any other governmental entity responsible for collective bargaining on the agency's behalf shall enter into or renew 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.

According to the PREA Coordinator and director of the PREA Unit (designated agency head), CDOC policy indicates that collective bargaining agreements are limited to contractual contracts approved at the agency level. CDOC, by administrative directive, has no agreements in place that restrict the agency's authority to remove alleged abusers from contact with inmates. The last time there were any collective bargaining agreements was in August 2012.

115.66 (b): Nothing in this standard shall restrict the entering into or renewal of agreements that govern: (1) The conduct of the disciplinary process, as long as such agreements are not inconsistent with the provisions of §§ 115.72 and 115.76; or (2) Whether a no-contact assignment that is imposed pending the outcome of an investigation shall be expunged from or retained in the staff member's personnel file following a determination that the allegation of sexual abuse is not substantiated.

This Auditor is not required to audit this provision.

**Evidence relied upon:**

1. PAQ
2. Agency Head (designee)

**Conclusion:**

The narrative discusses all evidence for the compliance or non-compliance decision after corrective action and the Auditor's analysis, reasoning, and conclusions.

<b>115.67 Agency protection against retaliation</b>	
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	115.67 (a): The agency shall establish 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 and shall designate which staff members or departments are charged with monitoring retaliation.
	115.67 (a)-1 The agency has 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.

115.67 (a)-2 The agency designates staff member(s) or charges department(s) with monitoring for possible retaliation. If YES, provide staff name(s), title(s), and department(s) in the comments section. Yes. PREA Coordinator, director of the CDOC PREA Unit.

Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, addresses this standard.

According to the PCM and PREA Coordinator, director of the PREA Unit, during separate interviews, the agency has 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. Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 18, Post Allegation Protection of Inmates and Staff from Retaliation, page 18, states, No inmate or staff should be retaliated against for reporting inmate sexual abuse or inmate sexual harassment. For at least 90 days following a report of sexual abuse, the PREA Unit shall monitor the conduct and treatment of inmates or staff who reported the alleged sexual abuse and 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 and shall act promptly to remedy any such retaliation. Items the PREA Unit should monitor include any inmate disciplinary reports, housing or program changes, negative performance reviews, or staff reassessments. The PREA Unit should also include periodic status checks of any alleged inmate victims. The facility shall continue the monitoring beyond 90 days if the initial monitoring indicates a continuing need for monitoring. If any other individual who cooperates with the investigation expresses a fear of retaliation, the PREA Unit shall recommend appropriate actions (if any) to protect the individual against retaliation. The agency's PREA Director Unit's obligation to monitor shall terminate if an investigation determines the allegation is unfounded.

115.67 (b): The agency shall 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.

During an interview with the Auditor, the retaliation monitor detailed protective measures Manson would employ to monitor an inmate for signs of retaliation, including a face-to-face meeting, a review of discipline, and negative housing moves. Removal from programs linked to a sexual abuse or sexual harassment investigation. (See Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 18, Post Allegation Protection of Inmates and Staff from Retaliation, page 18).

115.67 (c): For at least 90 days following a report of sexual abuse, the agency shall monitor the conduct and treatment of inmates or staff who reported the sexual abuse

and 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, and shall act promptly to remedy any such retaliation. Items the agency should monitor include any inmate disciplinary reports, housing, or program changes, or negative performance reviews or reassignments of staff. The agency shall continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need.

115.67 (c)-1 The agency/facility monitors the conduct or treatment of inmates or staff who reported sexual abuse and of inmates who were reported to have suffered sexual abuse to see if any changes may suggest possible retaliation by inmates or staff.

CDOC Administrative Directive 6.12 Sexual Abuse Sexual Harassment Prevention and Intervention, Section 18., Post Allegation Protection of Inmates and Staff from Retaliation (effective 08/01/2023) page 17.

115.67 (c)-2 If YES, the length of time that the agency/facility monitors the conduct or treatment: 90 days.

115.67 (c)-3 The agency/facility acts promptly to remedy any such retaliation. yes.

115.67 (c)-4 The agency/facility continues such monitoring beyond 90 days if the initial monitoring indicates a continuing need.

CDOC Administrative Directive 6.12 Sexual Abuse Sexual Harassment Prevention and Intervention, Section 18., Post Allegation Protection of Inmates and Staff from Retaliation (effective 08/01/2023) page 17.

115.67 (c)-5 The number of times an incident of retaliation occurred in the past 12 months: 0.

Manson reports that there were no instances of retaliation during this reporting period.

115.67 (e): If any other individual who cooperates with an investigation expresses a fear of retaliation, the agency shall take appropriate measures to protect that individual against retaliation.

The retaliation monitor, the Captain of the PREA Unit, ensures protection for individuals fearing retaliation after cooperating with investigations. In the past 12 months, two sexual abuse investigations were initiated, and both were unsubstantiated. No inmates were placed in segregated housing during the tour. The inmate who reported sexual abuse was no longer at the facility. Compliance evidence is missing and requires corrective action.

115.67 (c): For at least 90 days following a report of sexual abuse, the agency shall monitor the conduct and treatment of inmates or staff who reported the sexual abuse and 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 and shall act promptly to remedy any such retaliation. The agency should monitor inmate

disciplinary reports, housing or program changes, negative performance reviews, or staff reassignments. The agency shall continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need.

Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 18, Post Allegation Protection of Inmates and Staff from Retaliation, page 17, states, No inmate or staff should be retaliated against for reporting inmate sexual abuse or inmate sexual harassment. For at least 90 days following a report of sexual abuse, the PREA Unit shall monitor the conduct and treatment of inmates or staff who reported the alleged sexual abuse and 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 and shall act promptly to remedy any such retaliation. The PREA Unit should monitor inmate disciplinary reports, housing or program changes, negative performance reviews, or staff reassignments. The PREA Unit should also include periodic status checks of any alleged inmate victims. The facility shall continue the monitoring beyond 90 days if the initial monitoring indicates a continuing need for monitoring. If any other individual who cooperates with the investigation expresses a fear of retaliation, the PREA Unit shall recommend appropriate actions (if any) to protect the individual against retaliation. The agency's PREA Director Unit's obligation to monitor shall terminate if an investigation determines the allegation is unfounded. Investigative documents of sexual abuse initiated in the prior 12-month period were 2. According to the PREA Unit, both were unsubstantiated. Problematic, Manson omits evidence of compliance with this substandard. This substandard requires corrective action.

During an interview, the Warden explained the measures his facility would take if he suspected retaliation. He indicated Manson would protect the victim or witness, notify the PREA Unit, start an investigation, separate the victim from the abuser, or transfer the abuser.

115.67 (d): In the case of inmates, such monitoring shall also include periodic status checks.

Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 18, Post Allegation Protection of Inmates and Staff from Retaliation, page 17, states that the PREA Unit should include periodic status checks of alleged inmate victims. The facility shall continue the monitoring beyond 90 days if the initial monitoring indicates a continuing need for monitoring. If any other individual who cooperates with the investigation expresses a fear of retaliation, the PREA Unit shall recommend appropriate actions (if any) to protect the individual against retaliation. The agency's PREA Director Unit's obligation to monitor shall terminate if an investigation determines the allegation is unfounded. (f): An agency's obligation to monitor shall terminate if the agency determines that the allegation is unfounded. During an interview with the director of the PREA Unit, he confirmed that the PREA Unit is responsible for retaliation monitoring. A review of investigative records found no evidence of reports of retaliation and agency response.

Investigative documents of sexual abuse initiated in the prior 12-month period were 2. According to the PREA Unit, both were unsubstantiated. Problematic, Manson

omits evidence of compliance with this substandard. This substandard requires corrective action.

**Evidence relied upon:**

1. PAQ
2. CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 18, Post Allegation Protection of Inmates and Staff from Retaliation, (effective 08/01/2023) page 17
3. Agency Head (designee)
4. Warden
5. Designated Staff Member Charged with Monitoring Retaliation

**Corrective Action:**

115.64 (a)-9 Of these allegations in the past 12 months where staff were notified within a period that still allowed for the collection of physical evidence, the number of times the first security staff member to respond to the report preserved and protected any crime scene until appropriate steps could be taken to collect any evidence: was zero. Clarification requested. There were three allegations in the prior 12-month period. Two of the three were allegations of sexual abuse.

115.64 (b)-3 Of the allegations that an inmate was sexually abused made in the past 12 months, the number of times a non-security staff member was the first responder was zero

115.64 (b)-4 Of those allegations responded to first by a non-security staff member, the number of times that staff member requested that the alleged victim not take any actions that could destroy physical evidence was zero.

115.64 (b)-5 Of those allegations first responded to by a non-security staff member, the number of times that staff member notified security staff was zero.

**Conclusion:**

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, including the corrective action, the Auditor's analysis and reasoning, and the Auditor's conclusions.

<b>115.68</b>	<b>Post-allegation protective custody</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	115.68 (a): Any use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse shall be subject to the requirements of § 115.43.

115.68 (a)-1 The agency has a policy prohibiting the placement of inmates who allege to have suffered sexual abuse 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.

Administrative Directive 6.12 Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Section 11, Screening for Risk of Victimization and Abusiveness. Subsection B. After Intake to the Facility. (effective 08/01/2023) page 10.

115.68 (a)-2 The number of inmates who allege to have suffered sexual abuse who were held in involuntary segregated housing in the past 12 months for one to 24 hours awaiting completion of assessment: 0.

115.68 (a)-3 The number of inmates who allege to have suffered sexual abuse who were assigned to involuntary segregated housing in the past 12 months for longer than 30 days while awaiting alternative placement: 0.

115.68 (a)-4 From a review of case files of inmates who allege to have suffered sexual abuse who were held in involuntary segregated housing in the past 12 months, the number of case files that include BOTH (a) a statement of the basis for facility's concern for the inmate's safety, and (b) the reason or reasons why alternative means of separation could not be arranged: 0.

115.68 (a)-5 If an involuntary segregated housing assignment is made, the facility affords each such inmate a review every 30 days to determine whether there is a continuing need for separation from the general population. Not applicable.

Administrative Directive 6.12 Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Section 11, Screening for Risk of Victimization and Abusiveness. Subsection B. After Intake to the Facility., page 10, indicates that within 30 days of the inmate's arrival at the facility, qualified staff must reassess the inmate's risk of victimization or abusiveness, documenting on the inmate classification history form based on any additional relevant information received by the facility since the initial intake screening. An inmate's risk of victimization or abusiveness shall also be reassessed when warranted due to a referral, request, incident of sexual abuse/ harassment, or receipt of additional information that impacts the inmate's risk of sexual victimization or abusiveness. The PREA Counselor assigned to Manson Youth Institution shall conduct this reassessment review on the 21st day of the assignment. This reassessment shall be documented on the PREA Tracking Log and Section 5 of the Inmate's Master File. If the PREA Counselor has concerns during the reassessment, a PREA Review meeting consisting of the Classification Counselor Supervisor, the PREA Counselor, the Mental Health, and the appropriate Unit Manager will be conducted.

The Captain of the PREA Unit confirmed all information contained in PAQ 115.68 (a)-2. The number of inmates who allege to have suffered sexual abuse who were held in involuntary segregated housing in the past 12 months for one to 24 hours awaiting completion of assessment remains zero.

The Captain of the PREA Unit confirmed all information contained in PAQ 115.68 (a)-3. The number of inmates who allege to have suffered sexual abuse who were assigned to involuntary segregated housing in the past 12 months for longer than 30 days while awaiting alternative placement remains zero.

The Captain of the PREA Unit confirmed all information contained in PAQ 115.68 (a)-4. The number of inmates who allege to have suffered sexual abuse who were assigned to involuntary segregated housing in the past 12 months for longer than 30 days while awaiting alternative placement remains zero. From investigative documents, this Auditor found no evidence to suggest any instances when segregated housing was used to protect an inmate who is alleged to have suffered sexual abuse. Zero case files of inmates who alleged to have suffered sexual abuse held in involuntary segregated housing in the past 12 months were reviewed by the Auditor.

During an interview with the Warden, he confirmed that any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse is subject to the requirements of § 115.43.

**Evidence relied upon:**

1. PAQ
2. Facility tour and Site Visit
3. CDOC Policy 6.12 Inmate Sexual Abuse Sexual Harassment Prevention and Intervention (effective)
4. Interview with the Warden
5. Interview with the Captain of the PREA Unit
6. Interview with staff who supervise segregation.

**Conclusion:**

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, including the corrective action, the Auditor's analysis and reasoning, and the Auditor's conclusions.

<b>115.71</b>	<b>Criminal and administrative agency investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	115.71 (a): When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, it shall do so promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports.

115.71 (a)-1 The agency/facility has a policy related to criminal and administrative agency investigations. Yes.

CDOC AD 6.12 Sexual Assault Prevention Policy (effective 11/02/2014) pages 1-19.

CDOC AD 1.10 Investigations (effective 05/28/2014) pages 1-5.

During this audit, the Auditor interviewed an investigator. The Auditor inquired about the time it takes to start an investigation after receiving an allegation of sexual abuse. The investigator replied that it begins immediately upon notification.

Additionally, the Auditor asked how third-party reports of sexual abuse or harassment are managed. The investigator indicated that there is no difference in handling such reports.

This Auditor examines samples (2) of investigative reports for allegations of sexual abuse or sexual harassment and determines that investigations begin immediately upon notification.

115.71 (b): Where sexual abuse is alleged, the agency shall use investigators who have received special training in sexual abuse investigations pursuant to § 115.34.

During this audit, the Auditor interviewed one of three investigators identified in 115.34. The Auditor inquired about the investigator's completion of specialized training. The investigator confirms completion of specialized training as required in PREA standard 115.34. Found in Standard 115.34 was the training certificate of the investigator interviewed. The certificate from the National Institute of Corrections was issued on 12/08/2021. Moreover, the same investigator confirmed that his specialized investigative training was specific to conducting sexual abuse investigations in confinement settings and included the following training topics:

- Techniques for interviewing sexual abuse victims.
- Proper use of Miranda and Garrity warnings.
- Sexual abuse evidence collection in confinement settings.
- The criteria and evidence required to substantiate a case for administrative or prosecution referral.

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

In this audit, the Auditor interviewed one of the three investigators mentioned in 115.34. The Auditor inquired about the initial steps in launching an investigation and the expected duration. The investigator replied that he would gather evidence, examine all relevant case details, interview the victim, witnesses, and the accused,

and review video evidence, DNA, medical reports, and any previous complaints against the accused.

This Auditor examines samples(2) of investigative reports for allegations of sexual abuse or sexual harassment and determines that investigations begin immediately upon notification.

115.71 (d): When the quality of evidence appears to support a criminal prosecution, the agency shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle to subsequent criminal prosecution.

This Auditor asked an investigator when you discover evidence that a prosecutable crime may have occurred, do you consult with prosecutors before conducting compelled interviews. The investigator responded yes if the case is potentially criminal.

115.71 (e): The credibility of an alleged victim, suspect, or witness shall be assessed on an individual basis and shall not be determined by the person's status as inmate or staff. No agency shall require an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such an allegation.

The Auditor interviewed one of the three investigators and inquired how he assesses the credibility of an alleged victim, suspect, or witness. The investigator replied that his judgment was based on the evidence. He also stated that there are no circumstances under which he would require a victim of alleged sexual abuse to undergo a polygraph test or a truth-telling device to continue with an investigation.

Inmates who participated in interviews, whether randomly or targeted, denied being forced to take polygraph tests during sexual abuse investigations, and investigative documents confirm their statements.

115.71 (f): Administrative investigations: (1) Shall include an effort to determine whether staff actions or failures to act contributed to the abuse; and (2) Shall be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings.

During an interview, an investigator was asked about the steps taken during an administrative investigation to evaluate whether staff actions or inactions played a role in the sexual abuse incident. The investigator confirmed that he would document all findings in a written report and follow up with an incident review on incidents categorized as substantiated or unsubstantiated. We examine potential gaps in communication, policies, staff actions, and the need to improve video monitoring. We use the incident review as a method for assessing sexual abuse incidents and identifying areas for the enhancement of sexual safety. This review considers shift

assignments, video technology, staff placement, blind spots, and existing policies.

#### RECORD STORAGE

During the site review, the Auditor:

Observe the physical storage area of any information/documentation collected and maintained in hard copy according to the PREA Standards. PII, such as medical records, if hard files were stored under lock and key. Electronic medical records were password protected.

Observe electronic safeguards of any information/documentation collected and maintained electronically according to the PREA Standards.

The observation confirmed that physical files were restricted based on role and responsibility.

Observed where physical investigative files were stored at the PREA Unit outside the correctional facility in a secure building under lock and key. Digitized files were stored on a cloud and password protected.

115.71 (g): Criminal investigations shall be documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible.

During his interview, an investigator confirmed that criminal investigations are documented. According to the investigator, a criminal investigation would include:

Victim statement

Witness statement

A statement from the accused

Medical reports

Video Footage

Physical evidence

Incident report

115.71 (h): Substantiated allegations of conduct that appears to be criminal shall be referred for prosecution.

115.71 (h)-1 Substantiated allegations of conduct that appear to be criminal are referred for prosecution. Yes.

115.71 (h)-2 The number of substantiated allegations of conduct that appear to be criminal that were referred for prosecution since August 20, 2012, or since the last PREA audit, whichever is later: 0.

During an interview with one of three investigators, this Auditor asked when you refer cases for prosecution. The investigator responded all substantiated allegations of criminal conduct. Zero sample criminal cases were reviewed. See 115.71 (h)-2.

115.71 (i): The agency shall retain all written reports referenced in paragraphs (f) and (g) of this section for as long as the alleged abuser is incarcerated or employed by the agency, plus five years.

115.71 (i)-1 The agency retains all written reports pertaining to the administrative or criminal investigation of alleged sexual abuse or sexual harassment for as long as the alleged abuser is incarcerated or employed by the agency, plus five years.

CDOC Administrative Directive 1.10 Investigations, Section 10, PREA Investigations (effective 05/28/2014) page 4.

115.71 (j): The departure of the alleged abuser or victim from the facility or agency's employment or control shall not provide a basis for terminating an investigation.

Investigative staff were asked how to proceed when a staff member alleged to have committed sexual abuse terminates employment before a completed investigation into his/her conduct. The investigated replied to continue with the investigation.

115.71 (k): Any State entity or Department of Justice component that conducts such investigations shall do so pursuant to the above requirements.

Auditor is not required to audit this provision.

115.71 (l): When outside agencies investigate sexual abuse, the facility shall cooperate with outside investigators and shall endeavor to remain informed about the progress of the investigation.

During his interview, the Auditor asked the Warden, if an outside agency investigates allegations of sexual abuse, how does the facility remain informed of the progress of a sexual abuse investigation? The Warden responded through the PREA Unit/PREA Coordinator. The PREA Coordinator was asked a similar question. The PC indicated he would be the point of contact for the agency if an outside agency were involved in an investigation. Communication would be by email, telephone, or in person. Further, the PC indicated it would be his responsibility to inform the Warden and PCM of the progress of a sexual abuse investigation. Investigative staff are assigned to the PREA Unit and report to the Captain of the PREA Unit and the PREA Coordinator. During an interview with an investigator, the Captain of the PREA Unit confirmed that investigators would assist outside agencies in collecting evidence as needed.

**Evidence Relied upon:**

1. PAQ
2. Facility tour and site review

3. CDOC Administrative Directive 6.12 Sexual Assault Prevention Policy (effective 11/02/2014) pages 1-19.
4. CDOC Administrative 1.10 Investigations (effective 05/28/2014) pages 1-5
5. CDOC Directive 6.9, Collection and Retention of Contraband and Physical Evidence (effective 01/03/2017) pages 1-10.
6. Interview with an investigator
7. Interview with the Warden
8. Interview with the PREA Coordinator
9. Interview with the Captain of the PREA Unit
10. Interview with the PREA Compliance Manager
11. Review of investigative reports - sexual abuse (2)

**Conclusion:**

The narrative above provides a thorough overview of the evidence used to determine compliance or non-compliance and the Auditor's analysis, reasoning, and conclusions.

<b>115.72 Evidentiary standard for administrative investigations</b>	
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.72 (a): The agency shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.</p> <p>115.72 (a)-1 The agency imposes a standard of a preponderance of the evidence or a lower standard of proof when determining whether allegations of sexual abuse or sexual harassment are substantiated. Yes.</p> <p>CDOC AD 6.12 Sexual Assault Prevention Policy (effective 11/02/2014) pages 1-19.</p> <p>CDOC AD 1.10 Investigations (effective 05/28/2014) pages 1-5.</p> <p>According to Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Administrative Directive 1.10 Investigations, Section 3, Definitions and Acronyms, page 1, CDOC shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.</p> <p>Likewise, Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Administrative Directive 1.10 Investigations, Section 10, PREA Unit Investigations, page 5, states</p>

1. PREA Unit Investigations.

a. Authorization. PREA Unit investigations shall require written authorization from the appropriate District Administrator. A Deputy Commissioner or designee may request the initiation of a PREA Unit Investigation.

b. Involvement of Facility Personnel. Facility-based personnel shall not conduct investigative activities when a PREA Unit Investigation has been authorized or is ongoing, including conducting interviews of any type, unless requested by the PREA Unit.

c. PREA Investigations. PREA Investigations shall, at a minimum, review direct and circumstantial evidence, interview all alleged victims, suspected perpetrators, and any relevant witnesses, and review prior complaints and reports of sexual abuse involving the suspected perpetrator.

PREA Unit investigations shall also: (1) include an effort to determine whether staff actions or failures to act contributed to sexual abuse; (2) be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings.

When the evidence appears to support a criminal prosecution, the Connecticut State Police shall be notified. If the Connecticut State Police determine that no criminal aspect exists, the PREA Investigation Unit may conduct compelled interviews only after consulting with the Office of the State's Attorney regarding whether compelled interviews would be an obstacle to subsequent criminal prosecution.

During this audit, the Auditor interviewed an investigator from the agency's PREA Unit. The investigator confirmed during his interview that he imposes no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.

A review of a select sample of investigations suggests that CDOC imposes no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. Documentation of administrative findings for the proper standard of proof indicates that during a review of investigative reports from this reporting period, this Auditor determined that CDOC did not forward an allegation of sexual abuse to the Connecticut State Police, identified by the agency as the legal authority to investigate allegations of sexual abuse, for action. Instead, Manson allowed non-trained facility investigators with no legal authority to investigate sexual abuse to complete a sexual abuse investigation. Therefore, this standard requires corrective action.

**Corrective Action:**

1. The PREA Unit will investigate the sexual abuse allegation from Manson and take the appropriate action.
2. The investigation findings will be documented in writing following PREA standards.
3. All findings from the investigations in question will be reported to the inmate if

they remain in the custody of CDOC

4. CDOC will provide the Auditor with evidence of full compliance with this corrective action.
5. CDOC will retrain correctional management at Manson regarding Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Administrative Directive 1.10 Investigations, Section 10, PREA Unit Investigations and applicable PREA standards.
6. CDOC will provide the Auditor with documented evidence of full compliance with item #7.

**Conclusion:**

The narrative above provides a thorough overview of the evidence used to determine compliance or non-compliance and the Auditor's analysis, reasoning, and conclusions.

<b>115.73</b>	<b>Reporting to inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.73 (a): Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, the agency shall inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded.</p> <p>115.73 (a)-1 The agency has a policy requiring that any inmate who makes an allegation that he or she suffered sexual abuse in an agency facility is informed, verbally or in writing, as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation by the agency. Yes.</p> <p>CDOC AD 6.12 Sexual Assault Prevention Policy (effective 11/02/2014) pages 1-19.</p> <p>CDOC AD 1.10 Investigations (effective 05/28/2014) pages 1-5.</p> <p>According to Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Administrative Directive 1.10 Investigations, Section 3, Definitions and Acronyms, page 1, CDOC shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.</p>

This Auditor examined a sample of alleged sexual abuse investigation completed by the agency. The notification, 08/19/2024.

115.73 (a)-2 The number of criminal and/or administrative investigations of alleged inmate sexual abuse that were completed by the agency/facility in the past 12 months: 1.

CDOC Manson provided two samples, MYI 2023-04-049 and 2023-09-045.

115.73 (a)-3 Of the alleged sexual abuse investigations that were completed in the past 12 months, the number of inmates who were notified, verbally or in writing, of the results of the investigation: 3. Manson also notified one inmate in the investigation who was identified as the accused.

During his interview, the Warden, the Auditor, asked, does your facility notify an inmate who makes an allegation of sexual abuse when the allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation? The Warden responded yes.

During an interview with an investigator, the investigator was asked, "Does your agency procedures require that an inmate who makes an allegation of sexual abuse be informed as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation?" The investigator replied that after an investigation, we are required by policy to notify the inmate of the outcome of the investigation.

115.73 (b): If the agency did not conduct the investigation, the inmate shall be informed by requesting the relevant information from the investigative agency.

115.73 (b)-1 If an outside entity conducts such investigations, the agency requests the relevant information from the investigative entity to inform the inmate of the outcome of the investigation. Manson indicated that it was not applicable. Not applicable, says the facility. Mason is required to make the notification.

This Auditor interviewed an investigator from the agency's PREA Unit; the trained investigator confirmed that if the agency did not conduct the investigation, it shall request the relevant information from the investigative agency to inform the inmate. Evidence examined in the form of letters (3) of notification confirms notification of the inmate. One of the three letters was sent to the accused in an investigation, and a similar notification was sent to the victim in the same incident. The third notification letter was sent to a victim who alleged a PREA violation during a facility search. The investigation was unfound.

115.73 (b)-2 The number of investigations of alleged inmate sexual abuse in the facility that were completed by an outside agency in the past 12 months: 2.

115.73 (b)-3 Of the outside agency investigations of alleged sexual abuse that were completed in the past 12 months, the number of inmates alleging sexual abuse in the facility who were notified verbally or in writing of the results of the investigation: 2.

See 115.73(b)-2.

115.73 (c): Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, the agency shall subsequently inform the inmate (unless the agency has determined that the allegation is unfounded) whenever: (1) The staff member is no longer posted within the inmate's unit; (2) The staff member is no longer employed at the facility; (3) The agency learns that the staff member has been indicted related to sexual abuse within the facility, or (4) The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility.

115.73 (c)-1 Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, the agency/facility subsequently informs the inmate (unless the agency has determined that the allegation is unfounded) whenever: Yes.

- The staff member is no longer posted within the inmate's unit;
- The staff member is no longer employed at the facility;
- The agency learns that the staff member has been indicted on a charge related to sexual abuse within the facility; or
- The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility.

CDOC Administrative Directive 6.12 Sexual Assault Prevention Policy, Section 15 Evidence Protocol/Securing the Area (effective 11/02/2014) pages 15-16.

By examination of notification documents, this Auditor confirmed that each inmate making an allegation of sexual abuse was notified of the findings.

115.73 (c)-2 There has been a substantiated or unsubstantiated complaint (i.e., not unfounded) of sexual abuse committed by a staff member against an inmate in an agency facility in the past 12 months. No.

This Auditor interviewed an investigator from the agency's PREA Unit; the trained investigator confirmed that if the agency did not conduct the investigation, it shall request the relevant information from the investigative agency to inform the inmate. Evidence examined in the form of letters (3) of notification confirms notification of the inmate.

115.73 (c)-3 In each case, the agency subsequently informed the inmate whenever: no. Not applicable.

115.73 (d): Following an inmate's allegation that another inmate has sexually abused him or her, the agency shall subsequently inform the alleged victim whenever: (1) The agency learns that the alleged abuser has been indicted related to sexual abuse within the facility, or (2) The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.

115.73 (d)-1 Following an inmate's allegation that he or she has been sexually

abused by another inmate in an agency facility, the agency subsequently informs the alleged victim whenever: Yes.

This Auditor interviewed an investigator from the agency's PREA Unit; the trained investigator confirmed that if the agency did not conduct the investigation, it should request the relevant information from the investigative agency to inform the inmate. Evidence examined in the form of letters (3) of notification confirms notification of the inmate. One of the three notifications was sent to the accused in one investigation.

115.73 (e): All such or attempted notifications shall be documented.

115.73 (e)-1 The agency has a policy to document all notifications to inmates described under this standard. Yes.

CDOC Administrative Directive 6.12 Sexual Assault Prevention Policy, Section 15 Evidence Protocol/Securing the Area (effective 11/02/2014) pages 15-16.

By examination, this Auditor determined that Manson notified all inmates of the outcome of investigations into allegations of sexual abuse or sexual harassment.

115.73 (e)-2 In the past 12 months, the number of notifications to inmates that were provided pursuant to this standard: 3.

115.73 (e)-3 Of those notifications made in the past 12 months, the number that were documented: 3

115.73 (f): An agency's obligation to report under this standard shall terminate if the inmate is released from the agency's custody.

Auditor is not required to audit this provision.

During his interview, the Captain of the PREA Unit confirmed his understanding that the agency's obligation to report under this standard shall terminate if the inmate is released from the agency's custody.

#### **Evidence relied upon:**

1. PAQ
2. CDOC Administrative Directive 6.12 Sexual Assault Sexual Harassment Prevention and Intervention Prevention Policy (effective 11/02/2014) pages 1-19.
3. CDOC Administrative Directive 1.10 Investigations (effective 05/28/2014) pages 1-5.
4. Interview with the Warden
5. Interview with the PREA Coordinator
6. Interview with an investigator, PREA Unit Captain
7. Examination of investigative reports of inmates who reported sexual abuse (2)
8. Examination of inmate notifications

	<p><b>Conclusion:</b></p> <p>The narrative above provides a thorough overview of the evidence used to determine compliance or non-compliance and the Auditor's analysis, reasoning, and conclusions.</p>
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<b>115.76</b>	<b>Disciplinary sanctions for staff</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.76 (a): Staff shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies.</p> <p>115.76 (a)-1 Staff is subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies. Yes.</p> <p>Interviews with the Warden and the director of the PREA Unit each confirmed separately that staff shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies.</p> <p>115.76 (b): Termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual abuse.</p> <p>115.76 (b)-1 In the past 12 months, the number of staff from the facility who have violated agency sexual abuse or sexual harassment policies: 0.</p> <p>115.76 (b)-2 In the past 12 months, the number of those staff from the facility who have been terminated (or resigned prior to termination) for violating agency sexual abuse or sexual harassment policies: 0.</p> <p>Interviews with the Warden and the director of the PREA Unit each separately confirmed that staff shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies.</p> <p>115.76 (c): Disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) shall be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories.</p> <p>115.76 (c)-1 The disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) are 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.</p>
	CDOC Administrative Directive 6.12 Section 21., Disciplinary Sanctions, Subsection A.,

(effective 08/01/2023) page 18.

Interviews with the Warden and the director of the PREA Unit each separately confirmed that disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) shall be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories.

115.76 (c)-2 In the past 12 months, the number of staff from the facility who have been disciplined, short of termination, for violation of agency sexual abuse or sexual harassment policies (other than actually engaging in sexual abuse): 0.

115.76 (d): All terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies.

115.76 (d)-1 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, are reported to law enforcement agencies (unless the activity was clearly not criminal) and to any relevant licensing bodies. Yes.

CDOC Administrative Directive 6.12 Section 21., Disciplinary Sanctions, Subsection A., (effective 08/01/2023) page 18.

115.76 (d)-2 In the past 12 months, the number of staff from the facility that have been reported to law enforcement or licensing boards following their termination (or resignation prior to termination) for violating agency sexual abuse or sexual harassment policies: 0.

Interviews with the Warden and the director of the PREA Unit each separately confirmed that all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies. According to PAQ 115.76, Reports to law enforcement for violations of agency sexual abuse or sexual harassment policies were zero in the prior 12-month period, as confirmed by the PREA Unit.

**Evidence relied upon:**

1. PAQ
2. CDOC Administrative Directive 2.17 Employee Conduct, Section 6, Staff Discipline (effective 01/01/2008)
3. CDOC Administrative Directive 6.12 Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 21, Disciplinary Sanctions (effective 08/01/2023)
4. Interview with the Warden

5. Interview with the PREA Coordinator

**Conclusion:**

The narrative above provides a thorough overview of the evidence used to determine compliance or non-compliance and the Auditor's analysis, reasoning, and conclusions.

115.77	<p><b>Corrective action for contractors and volunteers</b></p>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>115.77 (a): Any contractor or volunteer who engages in sexual abuse is prohibited from contact with inmates and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies.</p> <p>By examination of investigative documents for the prior 12-month period this Auditor determined that zero contractors or volunteers engaged in sexual abuse. The act of sexual abuse is prohibited by the agency and the director of the PREA Unit indicated that if abuse occurred the contractor or volunteer contact with inmates and would be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies</p>
	<p>115.77 (b): The facility takes appropriate remedial measures, and considers whether to prohibit further contact with inmates, in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer.</p> <p>The act of sexual abuse is prohibited by the agency and the director of the PREA Unit indicated that the agency would take appropriate remedial measures, and considers whether to prohibit further contact with inmates, in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer.</p>
	<p><b>Evidence relied upon:</b></p> <ol style="list-style-type: none"> <li>1. PAQ</li> <li>2. CDOC Administrative Directive 6.12 Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Section 21, Disciplinary Sanctions (08/01/2023)</li> <li>3. CDOC Administrative Directive 10.4 – Volunteer and Recreation Services (effective 09/14/2014)</li> </ol> <p><b>Conclusion:</b></p>

	The narrative above provides a thorough overview of the evidence used to determine compliance or non-compliance and the Auditor's analysis, reasoning, and conclusions.
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<b>115.78</b>	<b>Disciplinary sanctions for inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.78 (a): Inmates shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse.</p> <p>115.78 (a)-1 Inmates are subject to disciplinary sanctions only pursuant to a formal disciplinary process following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse. Yes.</p> <p>115.78 (a)-2 Inmates are subject to disciplinary sanctions only pursuant to a formal disciplinary process following a criminal finding of guilt for inmate-on-inmate sexual abuse. Yes.</p> <p>115.78 (a)-3 In the past 12 months, the number of administrative findings of inmate-on-inmate sexual abuse that have occurred at the facility: 1.</p> <p>Investigative documents suggest two incidents of administrative findings occurred at Manson during this reporting period.</p> <p>115.78 (a)-4 In the past 12 months, the number of criminal findings of guilt for inmate-on-inmate sexual abuse that have occurred at the facility: 0.</p> <p>According to CDOC Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Section 21, Disciplinary Sanctions, Subsection C, page 16, and as confirmed by the Warden, inmates shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse. An examination of investigative documents (2) confirmed compliance with this standard. (Also see Inmate Discipline, and Administrative Directive 9.5, Code of Penal Discipline)</p> <p>115.78 (b): Sanctions shall be 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.</p> <p>The Auditor interviewed the Warden and asked what disciplinary sanctions inmates are subject to following an administrative or criminal finding that the inmate engaged in inmate-on-inmate sexual abuse. The Warden referred to the CDOC Penal</p>

Disciplinary Dode. He confirmed that disciplinary sanctions would be proportionate to the nature and circumstances of the abuses committed, the inmates' disciplinary histories, and the sanctions imposed for similar offenses by other inmates with similar histories, considering factors such as mental disability or mental illness.

115.78 (c): The disciplinary process shall consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed.

According to CDOC Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Section 21, Disciplinary Sanctions, Subsection C, page 16, and as confirmed by the Warden, inmates shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse. An examination of investigative documents (3) confirmed compliance with this standard. (Also see Inmate Discipline, and Administrative Directive 9.5, Code of Penal Discipline).

A review of investigative reports found no evidence of disciplinary actions taken against inmates are a result of PREA-related incidents.

115.78 (d): If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, the facility shall consider whether to require the offending inmate to participate in such interventions as a condition of access to programming or other benefits.

115.78 (d)-1 The facility offers therapy, counseling, or other interventions designed to address and correct the underlying reasons or motivations for abuse. Yes.

115.78 (d)-2 If the facility offers therapy, counseling, or other interventions designed to address and correct the underlying reasons or motivations for abuse, the facility considers whether to require the offending inmate to participate in such interventions as a condition of access to programming or other benefits. Yes.

According to CDOC Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Section 21, Disciplinary Sanctions, Subsection C, page 16, and as confirmed by the Warden, inmates shall be subject to disciplinary sanctions under a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse. An examination of investigative documents (3) confirmed compliance with this standard. Further, the same investigative documents support that CDOC/Manson offers therapy and counseling by mental health practitioners designed to address and correct underlying reasons or motivations for the abuse.

Manson confirms that the facility offers treatment to both the abuser and the abused. Both are referred to mental health practitioners or the sex offender program.

Interviews during the audit with a medical and mental health practitioner (2) each confirmed that Manson treatment programs for victims of sexual abuse and the accused.

115.78 (e): The agency may discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact.

115.78 (e)-1 The agency disciplines inmates for sexual conduct with staff only upon finding that the staff member did not consent to such contact. Yes.

According to CDOC Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Section 21, Disciplinary Sanctions, Subsection C, page 16, and as confirmed by the Warden, inmates shall be subject to disciplinary sanctions under a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-staff sexual abuse. The Warden also confirmed during his interview that CDOC may discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact.

Manson confirmed that zero inmates or staff were sanctioned during this reporting period.

115.78 (f): For the purpose of disciplinary action, a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.

115.78 (f)-1 The agency prohibits disciplinary action for a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred, even if an investigation does not establish evidence sufficient to substantiate the allegation. Yes.

CDOC Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Section 21, Disciplinary Sanctions, Subsection C, Inmate Discipline(effective 08/01/2023) page 18.

According to CDOC Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Section 21, Disciplinary Sanctions, Subsection C, page 18, for the purpose of disciplinary action, a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.

115.78 (g): An agency may, in its discretion, prohibit all sexual activity between inmates and may discipline inmates for such activity. An agency may not, however, deem such activity to constitute sexual abuse if it determines that the activity is not coerced.

115.78 (g)-1 The agency prohibits all sexual activity between inmates. Yes.

CDOC Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Section 21, Disciplinary Sanctions, Subsection C, Inmate Discipline(effective 08/01/2023) page 18.

115.78 (g)-2 If the agency prohibits all sexual activity between inmates and disciplines inmates for such activity, the agency deems such activity to constitute sexual abuse only if it determines that the activity is coerced. Yes.

CDOC Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Section 21, Disciplinary Sanctions, Subsection C, Inmate Discipline(effective 08/01/2023) page 18.

According to CDOC Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Section 21, Disciplinary Sanctions, Subsection C, page 18, CDOC may, in its discretion, prohibit all sexual activity between inmates and may discipline inmates for such activity. An agency may not, however, deem such activity to constitute sexual abuse if it determines that the activity is not coerced.

**Evidence relied upon:**

1. PAQ
2. CDOC Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Section 21, Disciplinary Sanctions, Subsection C, Inmate Discipline (effective 08/01/2023) page 18.
3. Interview with the Warden
4. Interview with a medical practitioner
5. Interview with a mental health practitioner
6. Examination of investigative reports (2)

**Conclusion:**

The narrative above provides a thorough overview of the evidence used to determine compliance or non-compliance and the Auditor's analysis, reasoning, and conclusions.

**115.81 Medical and mental health screenings; history of sexual abuse**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

115.81 (a): If the screening under § 115.41 indicates that a prison/jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or the community, staff shall ensure that the inmate is offered a follow-up meeting

with a medical or mental health practitioner within 14 days of the intake screening.

115.81 (a)-1 All inmates at this facility who have disclosed any prior sexual victimization during a screening under §115.41 are offered a follow-up meeting with a medical or mental health practitioner. Yes.

CDOC Administrative Directive 6.12 Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Section 11A, Screening for Risk of Victimization and Abusiveness, (effective 08/01/2023) page 10.

CDOC Administrative Directive 6.12 Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Section 11A, Screening for Risk of Victimization and Abusiveness, page 10, indicates if the screening under § 115.41 indicates that a prison/jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or the community, staff shall ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening.

PAQ 115.81 (a)-1 Manson affirmatively answered "yes" that all inmates at this facility who have disclosed any prior sexual victimization during a screening under §115.41 are offered a follow-up meeting with a medical or mental health practitioner.

Likewise, in an interview with a mental health practitioner, they confirmed that all inmates at Manson who have disclosed any prior sexual victimization during a screening under §115.41 are offered a follow-up meeting with a medical or mental health practitioner. Investigative documents examined during this audit support Manson's compliance with this substandard.

115.81 (a)-2 If YES, the follow-up meeting was offered within 14 days of the intake screening. Yes.

115.81 (a)-3 In the past 12 months, the percentage of inmates who disclosed prior victimization during screening who were offered a follow-up meeting with a medical or mental health practitioner: 100.

115.81 (a)-4 Medical and mental health staff maintain secondary materials (e.g., form, log) documenting compliance with the above-required services. Yes.

115.81 (b): If the screening under § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or the community, staff shall ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening.

115.81 (b)-1 If the facility is a prison, all prison inmates who have previously perpetrated sexual abuse, as indicated during the screening pursuant to § 115.41, are offered a follow-up meeting with a mental health practitioner. Yes.

CDOC Administrative Directive 6.12 Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Section 11A, Screening for Risk of Victimization and Abusiveness, (effective 08/01/2023) page 10.

Connecticut Department of Correction, Administrative Directive 6.12 Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Section 11A, Screening for Risk of Victimization and Abusiveness, page 10, indicates if the screening under § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or the community, staff shall ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening.

PAQ 115.81 (b)-1 Manson affirmatively answered "yes," that if the facility is a prison, all prison inmates who have previously perpetrated sexual abuse, as indicated during the screening under § 115.41, that a prison inmate who has previously perpetrated sexual abuse, whether it occurred in an institutional setting or the community, staff shall ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening. Investigative documents (2) examined during this audit support Manson's compliance with this substandard.

CDOC Administrative Directive 6.12 Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Section 11A, Screening for Risk of Victimization and Abusiveness, (effective 08/01/2023) page 10.

Intake staff responsible for initiating the risk screening process confirmed that inmates who have previously perpetrated sexual abuse, as indicated during the screening under § 115.41, that a prison inmate who has previously perpetrated sexual abuse, whether it occurred in an institutional setting or the community, are offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening.

115.81 (b)-2 If YES, the follow-up meeting was offered within 14 days of the intake screening. Yes.

115.81 (b)-3 In the past 12 months, the percent of inmates who have previously perpetrated sexual abuse, as indicated during the screening, who were offered a follow-up meeting with a mental health practitioner. 100.

115.81 (b)-4 Mental health staff maintain secondary materials (e.g., form, log) documenting compliance with the above required services. Yes.

115.81 (c): See 115.81(a)

115.81 (d): Any information related to sexual victimization or abusiveness that occurred in an institutional setting is strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law.

115.81 (d)-1 Information related to sexual victimization or abusiveness that occurred in an institutional setting is strictly limited to medical and mental health practitioners. Yes.

Connecticut Department of Correction, Administrative Directive 6.12 Inmate Sexual

Abuse Sexual Harassment Prevention and Intervention, Section 11A, Screening for Risk of Victimization and Abusiveness, page 8, any information related to sexual victimization or abusiveness that occurred in an institutional setting is strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law.

During the facility tour, this Auditor observed physical storage secured in a file room with limited access and locks on the door to protect sensitive PII. Further, PII held in electronic platforms safeguards were observed to be secured with restricted password protection and role-based, according to the medical practitioner interviewed during this audit.

115.81 (d)-2 If NO, the information shared with other staff is strictly limited to informing security and management decisions, including treatment plans, housing, bed, work, education, and program assignments, or as otherwise required by federal, state, or local law. Yes.

## **RECORD STORAGE**

During the site review, the Auditor observed the following storage solutions:

- Observe the physical storage area of any information/documentation collected and maintained in hard copy under the PREA Standards and determine that files were secured with locks and locking doors with limited access.
- Observe electronic safeguards of any information/documentation collected and maintained electronically under the PREA Standards (e.g., risk screening information) is protected using password and limited electronic access based on role and responsibility.

115.81 (e): Medical and mental health practitioners shall 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.

15.81 (e)-1 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.

Connecticut Department of Correction, Administrative Directive 6.12 Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Section 11A, Screening for Risk of Victimization and Abusiveness, page 8, Medical and mental health practitioners shall 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.

In PAQ 115.81 (e)-1, Manson affirmatively answered "yes" that medical and mental health practitioners interviewed 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. Further, interviews with a medical and mental health practitioner during this audit confirmed that 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.

Moreover, medical and mental health practitioners (2) confirmed that inmates completed CDOC CN4401, Authorization to Obtain Disclosed Protected Health Information, during the intake process. The form is available in both Spanish and English. The form states the following:

"I understand that this authorization is voluntary and that I may withdraw my consent, in writing, at any time, except to the extent that it has already been acted upon. If not withdrawn, my consent will continue throughout my term of supervision by the CTDOC, regardless of my placement, including any time spent on parole or community supervision. If this form is used to obtain or disclose records for a person not under CTDOC supervision, consent shall be valid for one (1) year from the date the person signs, unless withdrawn."

**Evidence relied upon:**

1. PAQ
2. Facility tour and site review
3. CDOC CN4401, Authorization to Obtain Disclosed Protected Health Information
4. Connecticut Department of Correction, Administrative Directive 6.12 Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Section 11A, Screening for Risk of Victimization and Abusiveness, page 8.
5. Interview with a medical and mental practitioner (2)

**Conclusion:**

The narrative above provides a thorough overview of the evidence used to determine compliance or non-compliance and the Auditor's analysis, reasoning, and conclusions.

<b>115.82</b>	<b>Access to emergency medical and mental health services</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	115.82 (a): Inmate victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment.  In PAQ 115.82 (a)-1 Manson answered in the affirmative "yes," Inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and

crisis intervention services. During this reporting period, zero inmates were transported to a local hospital for a forensic examination as a result of a sexual abuse allegation.

Connecticut Department of Correction, Administrative Directive 6.12 Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section C13, Medical Staff Action (effective 08/01/2023) page 13.

Connecticut Department of Correction, Administrative Directive 8.1 Scope of Health Services Care, (effective 8/15/2009) pages 1-8, indicates that inmate victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment.

115.82 (a)-2 The nature and scope of such services are determined by medical and mental health practitioners according to their professional judgment. Yes.

115.82 (a)-3 Medical and mental health staff maintain secondary materials (e.g., form, log) documenting the timeliness of emergency medical treatment and crisis intervention services that were provided; the appropriate response by non-health staff in the event health staff are not present at the time the incident is reported; and the provision of appropriate and timely information and services concerning contraception and sexually transmitted infection prophylaxis. Yes.

During the audit, the Auditor interviewed a medical and a mental health practitioner separately. Both confirmed that inmate victims of sexual abuse receive timely access to emergency medical treatment and crisis intervention services. They noted that emergency medical care begins as soon as medical staff are informed of an emergency. Each practitioner's services are determined by professional judgment. Additionally, the medical practitioner confirmed that victims are given timely information about emergency contraception and sexually transmitted infection prophylaxis.

115.82 (b): If no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, security staff first responders shall take preliminary steps to protect the victim pursuant to § 115.62 and shall immediately notify the appropriate medical and mental health practitioners.

Connecticut Department of Correction, Administrative Directive 6.12 Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 13, Medical Staff Action and Administrative Directive 8.1 Scope of Health Services Care, page 12, indicates that if no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, security staff first responders shall take preliminary steps to protect the victim pursuant to § 115.62 and shall immediately notify the appropriate medical and mental health practitioners.

Security staff and non-security staff first responders (2) were asked to describe the actions you take as a first responder to an allegation of sexual abuse. The responders

responded in the following way,

Separating the alleged victim and abuser all responded, safeguarding the crime scene requesting that the alleged victim not take any actions that could destroy physical evidence (such as washing, brushing teeth, changing clothes, urinating, drinking, or eating) if the abuse occurred within a period that still allows for the collection of physical evidence; notify the shift supervisor and document the incident.

115.82 (c): Inmate victims of sexual abuse while incarcerated shall be 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.

115.82 (c)-1 Inmate victims of sexual abuse while incarcerated are 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.

The medical practitioner interviewed by the Auditor confirmed that victims are given timely information about emergency contraception and sexually transmitted infection prophylaxis.

115.82 (d): Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

115.82 (d)-1 Treatment services are provided to every victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. Yes.

Connecticut Department of Correction, Administrative Directive 6.12 Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section C13, Medical Staff Action (effective 08/01/2023) page 13.

Connecticut Department of Correction, Administrative Directive 8.1 Scope of Health Services Care, (effective 8/15/2009) pages 1-8, indicates inmate treatment services shall be provided to the victim without financial cost, regardless of whether the victim names the abuser or cooperates with any investigation arising from the incident.

**Evidence relied upon:**

1. PAQ
2. Connecticut Department of Correction, Administrative Directive 8.1 Scope of Health Services Care, (effective 8/15/2009) pages 1-8
3. Connecticut Department of Correction, Administrative Directive 6.12 Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section C13, Medical Staff Action (effective 08/01/2023) page 13.
4. Interview with a medical and mental practitioner (2)
5. Examination of investigative reports (2)

6. Interviews with a security and non-security first responder (2)

**Conclusion:**

The narrative above provides a thorough overview of the evidence used to determine compliance or non-compliance and the Auditor's analysis, reasoning, and conclusions.

<b>115.83</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<p><b>Auditor Discussion</b></p> <p>115.83 (a): The facility shall 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.</p> <p>Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 11. Screening for Risk of Victimization and Abusiveness (effective 08/01/2023), pages 8-9.</p> <p>Connecticut Department of Correction (CDOC), Administrative Directive 8.1, Scope of Health Services, Section 11, (effective 11/02/2014) page 14, indicates that CDOC facilities shall 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.</p> <p>In PAQ 115.83 (a)-1, Manson answers in the affirmative that the facility offers 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. During an interview with a medical practitioner, the practitioner confirmed that Manson offers 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. Additionally, through the examination of risk assessments and referrals, this Auditor confirmed that Manson provides appropriate follow-up clinical services and treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility.</p> <p>115.83 (b): The evaluation and treatment of such victims shall 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.</p> <p>During interviews with a medical and mental health practitioner, each confirmed that the evaluation and treatment of such victims include, as appropriate, follow-up</p>

services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody. Further, by examination of risk assessment and referrals, this Auditor confirmed that Manson offers 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.

115.83 (c): The facility shall provide such victims with medical and mental health services consistent with the community level of care.

Manson shall provide such victims with medical and mental health services consistent with the community level of care.

During interviews with medical and mental health practitioners, each confirmed that the health services were consistent with the community level of care.

115.83 (d): Inmate victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests.

115.83 (d)-1 Female victims of sexually abusive vaginal penetration while incarcerated are offered pregnancy tests. Not applicable.

115.83 (e): If pregnancy results from the conduct described in paragraph (d) of this section, such victims shall receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services.

115.83 (e)-1 If pregnancy results from sexual abuse while incarcerated, victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services. Not applicable.

115.83 (f): Inmate victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections as medically appropriate

115.83 (f)-1 Inmate victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate. Yes.

Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section C. Medical Staff Action (effective 08/01/2023), pages 14-15, inmate victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections as medically appropriate.

115.83 (g): Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section C. Medical Staff Action (effective 08/01/2023), pages 14-15, inmate victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections as medically

appropriate.

Treatment services must be provided to the victim at no cost, regardless of whether they name the abuser or cooperate with any investigation. Both the Warden and medical and mental health practitioners confirmed this policy during interviews.

115.83 (h): All prisons 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.

115.83 (h)-1 If the facility is a prison, it attempts to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offers treatment when deemed appropriate by mental health practitioners. Yes.

Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section C8. Medical Staff Action (effective 08/01/2023), page 14, that all prisons 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. Likewise, during an interview with a medical and mental health practitioner, each confirmed that all prisons 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.

**Evidence relied upon:**

1. PAQ
2. Interview with a medical and mental health practitioner (2)
3. Interview with the Warden
4. Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention(effective 08/01/2023).
5. Connecticut Department of Correction (CDOC), Administrative Directive 8.1, Scope of Health Services (effective 11/02/2014).

**Conclusion:**

The narrative above provides a thorough overview of the evidence used to determine compliance or non-compliance and the Auditor's analysis, reasoning, and conclusions.

**115.86 Sexual abuse incident reviews**

**Auditor Overall Determination:** Meets Standard

<b>Auditor Discussion</b>
<p>Connecticut Department of Correction, Administrative Directive 6.12 Inmate Sexual Abuse Sexual Harassment Prevention and Intervention addresses this standard.</p>
<p>115.86 (a): The facility shall conduct a sexual abuse incident review after every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded.</p>
<p>Connecticut Department of Correction, Administrative Directive 6.12 Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Section 22, Review by Facility of Sexual Abuse Incidents, page 19 indicates that the facility shall conduct a sexual abuse incident review after every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded. During the prior 1-month period, Manson documented 2 sexual abuse and 1 sexual harassment allegation. One sexual abuse investigation was determined unfounded. A review of incident reviews for the prior 12-month period indicated one incident review for an allegation of sexual abuse was omitted from evidence. This substandard requires corrective action.</p>
<p>In PAQ 115.86 (a)-1, Manson answered "yes" that the facility conducts a sexual abuse incident review after every criminal or administrative sexual abuse investigation unless the allegation has been determined to be unfounded.</p>
<p>115.86 (b): Such review shall ordinarily occur within 30 days of the conclusion of the investigation.</p>
<p>In PAQ 115.86 (b)-1, Manson answered "yes" that the facility ordinarily conducts a sexual abuse incident review within 30 days of the conclusion of the criminal or administrative sexual abuse investigation. This Auditor interviewed a member of the incident review team and the PCM separately. The team member confirmed that Manson conducts incident reviews within 30 days of the conclusion of the investigation. The PCM indicated during his interview that Manson conducts incident reviews within 30 days of the conclusion of the investigation.</p>
<p>Problematic, a review of documented incident reviews indicated that one incident review did not occur for an unsubstantiated allegation of sexual abuse. Evidence was omitted that a second unsubstantiated allegation underwent an incident review by the facility. This substandard requires corrective action.</p>
<p>115.86 (c): The review team shall include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners.</p>
<p>In PAQ 115.86 (c)-1, Manson answered "yes," that the sexual abuse incident review team includes upper-level management officials and allows for input from line supervisors, investigators, and medical or mental health practitioners.</p>
<p>A problematic review of an incident review indicated that the review was limited to the Warden, PCM, member of medical/mental health and a Captain. Input from a line supervisor and an investigator was omitted from the incident review process. This</p>

substandard requires corrective action.

115.86 (d): The review team shall: (1) Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse; (2) Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility; (3) Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse; (4) Assess the adequacy of staffing levels in that area during different shifts; (5) Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; and (6) Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to paragraphs (d)(1)-(d)(5) of this section, and any recommendations for improvement and submit such report to the facility head and PREA compliance manager.

In PAQ 115.86 (d)-1 Manson answers "yes," that the facility prepares a report of its findings from sexual abuse incident reviews including, but not necessarily limited to, determinations made pursuant to paragraphs (d)(1) -(d)(5) of this section and any recommendations for improvement and submits such report to the facility head and PREA Compliance Manager.

A review of an incident review from prior 12-month period supports that the Manson incident review team: (1) Considers whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse; (2) Considers whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility; (3) Examines the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse; (4) Assesses the adequacy of staffing levels in that area during different shifts; (5) Assesses whether monitoring technology should be deployed or augmented to supplement supervision by staff; and (6) Prepares a report of its findings, including but not necessarily limited to determinations made pursuant to paragraphs (d)(1)-(d)(5) of this section, and any recommendations for improvement and submit such report to the facility head and PREA compliance manager. This Auditor found evidence that Manson submitted the incident review to the Warden. The incident reviewed also contained the Warden's signature and the date of the review, 2/21/24. Problematic Manson omitted evidence of a second substantiated sexual abuse incident, which was unsubstantiated. This substandard requires corrective action.

115.86 (e): The facility shall implement the recommendations for improvement or shall document its reasons for not doing so.

Connecticut Department of Correction, Administrative Directive 6.12 Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Section 22, Review by Facility

of Sexual Abuse Incidents, page 19 indicates that the facility shall implement the recommendations for improvement or shall document its reasons for not doing so.

In PAQ 115.86 (e)-1Manson answers "yes," that the facility implements the recommendations for improvement or documents its reasons for not doing so. During his interview the Warden confirmed that he reviews all incident reviews from the incident review team and either implements the recommendations for improvement or documents its reasons for not doing so.

Corrective Actions:

1. 115.86 (a): The facility shall conduct a sexual abuse incident review after every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded. Connecticut Department of Correction, Administrative Directive 6.12 Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Section 22, Review by Facility of Sexual Abuse Incidents, page 19 indicates that the facility shall conduct a sexual abuse incident review after every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded. During the prior 1-month period, Manson documented 2 sexual abuse and 1 sexual harassment allegation. A review of incident reviews for the prior 12-month period indicated 1 incident review for an allegation of sexual abuse was omitted from evidence. This substandard requires corrective action.
2. 115.86 (b): Such review shall ordinarily occur within 30 days of the conclusion of the investigation. Problematic, a review of documented incident reviews indicated that one incident review did not occur for an unsubstantiated allegation of sexual abuse. Evidence was omitted that a second unsubstantiated allegation underwent an incident review by the facility. This substandard requires corrective action.
3. 115.86 (c): The review team shall include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners. Problematic, a review of an incident review indicated that the review was limited to the Warden, a PCM member of medical/mental health, and a Captain. Omitted from the incident review process was input from the line supervisor and an investigator. This substandard requires corrective action.
4. 115.86 (d): The review team shall: (1) Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse; (2) Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility; (3) Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse; (4) Assess the adequacy of staffing levels in that area during different shifts; (5) Assess whether monitoring technology should be deployed or

	<p>augmented to supplement supervision by staff; and (6) Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to paragraphs (d)(1)-(d)(5) of this section, and any recommendations for improvement and submit such report to the facility head and PREA compliance manager. This Auditor found evidence that Manson submitted the incident review to the Warden. The incident reviewed also contained the Warden's signature and date of the review, 2/21/24. Problematic Manson omitted evidence of second substantiated sexual abuse incident which was unsubstantiated. This substandard requires corrective action.</p>
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<b>115.87</b>	<b>Data collection</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Administrative Directive 6.6, Reporting of Incidents Administrative Directive 1.6, Monthly and Annual Reports address this standard</p> <p>115.87 (a): The agency shall collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions.</p> <p>Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Administrative Directive 6.6, Reporting of Incidents Administrative Directive 1.6, Monthly and Annual Reports, Section 23, Reporting, page 17, indicates that the agency shall collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions. By examination of aggregated data which found of the agency's website this Auditor confirmed that CDOC collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions. This Auditor also examined a sample of incident-based and aggregated data from a private facility also found on the agency's website.</p> <p>In PAQ 115.87 (a)-1 Manson answers "yes," that the agency collects accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions.</p> <p>115.87 (b): The agency shall aggregate the incident-based sexual abuse data at least annually.</p>

By examination of annually aggregated data found on the agency's website, this Auditor confirmed that CDOC collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions.

115.87 (c): The incident-based data collected shall include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice.

By examination of the agency website, this Auditor determined that CDOC incident-based data collected includes, 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.

115.87 (d): The agency shall maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.

By examination of the agency's website this Auditor determined that CDOC maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.

115.87 (e): The agency also shall obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates.

By examination of the agency's website this Auditor determined that CDOC obtains incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates.

115.87 (f): Upon request, the agency shall provide all such data from the previous calendar year to the Department of Justice no later than June 30.

According to the PREA Coordinator during his interview, upon request, the agency shall provide all such data from the previous calendar year to the Department of Justice no later than June 30.

## **115.88 Data review for corrective action**

**Auditor Overall Determination:** Meets Standard

### **Auditor Discussion**

Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Survey of Sexual Victimization (Form SSV-2), PREA Annual Data Report, and Website Address for CDOC <https://portal.ct.gov/DOC/Miscellaneous/PREA> addresses this standard.

115.88 (a): The agency shall 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: (1) Identifying problem areas; (2) Taking corrective action on an ongoing basis; and (3) Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole.

In PAQ 115.88 (a)-1 Manson/CDOC answers "yes," that the agency reviews data collected and aggregated pursuant to §115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, response policies, and training, including:

- Identifying problem areas
- Taking corrective action on an ongoing basis; and
- Preparing an annual report of its findings from its data review and any corrective actions for each facility, as well as the agency as a whole.

By examination of the agency's website this Auditor determined that CDOC reviews data collected and aggregated pursuant to §115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, response policies, and training, such as identifying problem areas and taking corrective action. Further during his interview, the PREA Coordinator also confirmed that CDOC reviews data collected and aggregated pursuant to §115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, response policies, and training, such as identifying problem areas and taking corrective action.

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

Further during his interview, the PREA Coordinator also confirmed that CDOC reports include a comparison of the current year's data and corrective actions with those from prior years and shall provide an assessment of the agency's progress in addressing sexual abuse.

By examination of data on the agency's website for 2022 and 2023, this Auditor determined that CDOC reports include a comparison of the current year's data and corrective actions with those from prior years and shall provide an assessment of the agency's progress in addressing sexual abuse.

115.88 (c): The agency's report shall be 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.

By examination of data on the agency's website for 2022 and 2023, this Auditor determined that CDOC reports include a comparison of the current year's data and corrective actions with those from prior years and shall provide an assessment of the agency's progress in addressing sexual abuse and all PREA-related reports were reviewed and approved by the agency's Commissioner of CDOC.

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

During his interview the PREA Coordinator confirmed that CDOC may redact specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility, but must indicate the nature of the material redacted.

### **115.89 Data storage, publication, and destruction**

**Auditor Overall Determination:** Meets Standard

#### **Auditor Discussion**

Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention addresses this standard.

115.89 (a): The agency shall ensure that data collected pursuant to § 115.87 are securely retained.

Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 23, Reporting, page 17, states that CDOC shall ensure that data collected pursuant to § 115.87 are securely retained.

115.89 (b): The agency shall 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.

Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 23, Reporting, page 17, states that CDOC the agency shall 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.

115.89 (c): Before making aggregated sexual abuse data publicly available, the agency shall remove all personal identifiers.

Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 23, Reporting, page 17, states that CDOC the agency shall 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. This Auditor

	<p>sampled of publicly available sexual abuse data on the CDOC website to check that personal identifiers have been removed.</p> <p>115.89 (d): The agency shall 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.</p> <p>Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 23, Reporting, page 17, states that CDOC 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.</p>
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<b>115.401</b>	<b>Frequency and scope of audits</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Connecticut Department of Corrections publicly accessible website: <a href="https://portal.ct.gov/DOC/Org/PREA-Unit">https://portal.ct.gov/DOC/Org/PREA-Unit</a> addresses this standard.</p> <p>115.401 (a): During the three-year period starting on August 20, 2013, and during each three-year period thereafter, the agency shall ensure that each facility operated by the agency, or by a private organization on behalf of the agency, is audited at least once.</p> <p>By examination of review agency records, website, etc. this Auditor confirmed that each CDOC facility has been audited. The agency met this standard during the prior three-year audit cycle. Document indicate that Manson was audited in 2018, 2021 and again in 2024.</p> <p>115.401 (b): During each one-year period starting on August 20, 2013, the agency shall ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, is audited.</p> <p>By examination of CDOC reporting documents this Auditor determined that CDOC audited at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, is audited.</p> <p>115.401 (h): The auditor shall have access to, and shall observe, all areas of the audited facilities.</p> <p>This Auditor confirms that she was given access to, and observed all areas of the audited facilities minus building closed to residents due to a decrease in the population.</p> <p>115.401 (i): The auditor shall be permitted to request and receive copies of any</p>

	<p>relevant documents (including electronically stored information).</p> <p>The Auditor confirms that she was permitted to request and receive copies of any relevant documents (including electronically stored information).</p> <p>115.401 (m): The auditor shall be permitted to conduct private interviews with inmates.</p> <p>The Auditor was permitted to conduct private interviews with inmates</p> <p>115.401 (n): Inmates shall be permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel.</p> <p>The Auditor confirms that she was permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel.</p> <p>This Auditor observed posted on all living units information provided to inmates regarding the confidential nature of any correspondence and communication with the Auditor. Ensure that the information is accurate.</p>
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<b>115.403</b>	<b>Audit contents and findings</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Connecticut Department of Corrections publicly accessible website <a href="https://portal.ct.gov/DOC/Org/PREA-Unit">https://portal.ct.gov/DOC/Org/PREA-Unit</a> addresses this standard.</p> <p>115.403 (f): The agency shall ensure that the auditor's final report is published on the agency's website if it has one, or is otherwise made readily available to the public.</p> <p>By examination of the agency's website this Auditor determined that CDOC published on the agency's website readily available to the public. the Auditor's final reports from year 2018, and 2021.</p>

## Appendix: Provision Findings

<b>115.11 (a)</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
<b>115.11 (b)</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
	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
<b>115.11 (c)</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	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
	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
<b>115.12 (a)</b>	<b>Contracting with other entities for the confinement of inmates</b>	
	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
<b>115.12 (b)</b>	<b>Contracting with other entities for the confinement of inmates</b>	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure	yes

	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.)	
<b>115.13 (a)</b>	<b>Supervision and monitoring</b>	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into	yes

	consideration: Any applicable State or local laws, regulations, or standards?	
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes
<b>115.13 (b)</b>	<b>Supervision and monitoring</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
<b>115.13 (c)</b>	<b>Supervision and monitoring</b>	
	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
	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
	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
<b>115.13 (d)</b>	<b>Supervision and monitoring</b>	
	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
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	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

<b>115.14 (a)</b>	<b>Youthful inmates</b>	
	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
<b>115.14 (b)</b>	<b>Youthful inmates</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
	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
<b>115.14 (c)</b>	<b>Youthful inmates</b>	
	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
	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
	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
<b>115.15 (a)</b>	<b>Limits to cross-gender viewing and searches</b>	
	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
<b>115.15 (b)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	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 if the	na

	facility does not have female inmates.)	
<b>115.15 (c) <b>Limits to cross-gender viewing and searches</b></b>		
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	na
<b>115.15 (d) <b>Limits to cross-gender viewing and searches</b></b>		
	Does the facility have policies 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
	Does the facility have procedures 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
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
<b>115.15 (e) <b>Limits to cross-gender viewing and searches</b></b>		
	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
	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
<b>115.15 (f) <b>Limits to cross-gender viewing and searches</b></b>		
	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
	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

<b>115.16 (a)</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>	
	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
	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
	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
	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
	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
	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
	Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing?	yes
	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
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication	yes

	with inmates with disabilities including inmates who: Have intellectual disabilities?	
	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
	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
<b>115.16 (b)</b>	<b>Inmates with disabilities and inmates who are limited English proficient</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
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
<b>115.16 (c)</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>	
	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
<b>115.17 (a)</b>	<b>Hiring and promotion decisions</b>	
	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
	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
	Does the agency prohibit the hiring or promotion of anyone who	yes

	may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	
	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
	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
	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 two bullets immediately above?	yes
<b>115.17 (b) <b>Hiring and promotion decisions</b></b>		
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes
<b>115.17 (c) <b>Hiring and promotion decisions</b></b>		
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	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
<b>115.17 (d) <b>Hiring and promotion decisions</b></b>		
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes

<b>115.17 (e)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes
<b>115.17 (f)</b>	<b>Hiring and promotion decisions</b>	
	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
	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
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
<b>115.17 (g)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
<b>115.17 (h)</b>	<b>Hiring and promotion decisions</b>	
	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
<b>115.18 (a)</b>	<b>Upgrades to facilities and technologies</b>	
	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
<b>115.18 (b)</b>	<b>Upgrades to facilities and technologies</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
<b>115.21 (a)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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
<b>115.21 (b)</b>	<b>Evidence protocol and forensic medical examinations</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
	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
<b>115.21 (c)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	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

	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
<b>115.21 (d)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	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? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	na
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
<b>115.21 (e)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
<b>115.21 (f)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency 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
<b>115.21 (h)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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 always makes a victim advocate from a rape crisis center available to victims.)	yes
<b>115.22 (a)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	

	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes
<b>115.22 (b)</b>	<b>Policies to ensure referrals of allegations for investigations</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
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
<b>115.22 (c)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	
	If a separate entity is responsible for conducting criminal investigations, does the policy 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
<b>115.31 (a)</b>	<b>Employee training</b>	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	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
	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
	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
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes

	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	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
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	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
	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
<b>115.31 (b) Employee training</b>		
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	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
<b>115.31 (c) Employee training</b>		
	Have all current employees who may have contact with inmates received such training?	yes
	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
	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
<b>115.31 (d) Employee training</b>		
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
<b>115.32 (a) Volunteer and contractor training</b>		

	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
<b>115.32 (b)</b>	<b>Volunteer and contractor training</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
<b>115.32 (c)</b>	<b>Volunteer and contractor training</b>	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
<b>115.33 (a)</b>	<b>Inmate education</b>	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
<b>115.33 (b)</b>	<b>Inmate education</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
	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
	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
<b>115.33 (c)</b>	<b>Inmate education</b>	
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes

	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
<b>115.33 (d) Inmate education</b>		
	Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?	yes
<b>115.33 (e) Inmate education</b>		
	Does the agency maintain documentation of inmate participation in these education sessions?	yes
<b>115.33 (f) Inmate education</b>		
	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
<b>115.34 (a) Specialized training: Investigations</b>		
	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 receive 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
<b>115.34 (b) Specialized training: Investigations</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
	Does this specialized training include proper use of Miranda and	yes

	Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	
	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
	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
<b>115.34 (c) Specialized training: Investigations</b>		
	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
<b>115.35 (a) Specialized training: Medical and mental health care</b>		
	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? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	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? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	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? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	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	yes

	suspicions of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	
<b>115.35 (b)</b>	<b>Specialized training: Medical and mental health care</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 or the agency does not employ medical staff.)	na
<b>115.35 (c)</b>	<b>Specialized training: Medical and mental health care</b>	
	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? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
<b>115.35 (d)</b>	<b>Specialized training: Medical and mental health care</b>	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)	yes
	Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)	yes
<b>115.41 (a)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	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
	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
<b>115.41 (b)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
<b>115.41 (c)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Are all PREA screening assessments conducted using an objective	yes

	screening instrument?	
<b>115.41 (d)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	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
	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
	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
	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
	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
	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
	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
	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
	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
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10)	yes

	Whether the inmate is detained solely for civil immigration purposes?	
<b>115.41 (e)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?	yes
<b>115.41 (f)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	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
<b>115.41 (g)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Does the facility reassess an inmate's risk level when warranted due to a referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a request?	yes
	Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes
<b>115.41 (h)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	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
<b>115.41 (i)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	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	yes

	information is not exploited to the inmate's detriment by staff or other inmates?	
<b>115.42 (a) Use of screening information</b>		
	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
	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
	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
	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
	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
<b>115.42 (b) Use of screening information</b>		
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
<b>115.42 (c) Use of screening information</b>		
	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
	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	yes

	present management or security problems?	
<b>115.42 (d)</b>	<b>Use of screening information</b>	
	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
<b>115.42 (e)</b>	<b>Use of screening information</b>	
	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
<b>115.42 (f)</b>	<b>Use of screening information</b>	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes
<b>115.42 (g)</b>	<b>Use of screening information</b>	
	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? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)	yes
	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? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)	yes
	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? (N/A if the agency has a dedicated facility, unit, or wing	yes

	solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)	
<b>115.43 (a) Protective Custody</b>		
	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
	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
<b>115.43 (b) Protective Custody</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
	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
	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
	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
	If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
<b>115.43 (c) Protective Custody</b>		

	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
	Does such an assignment not ordinarily exceed a period of 30 days?	yes
<b>115.43 (d) Protective Custody</b>		
	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
	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
<b>115.43 (e) Protective Custody</b>		
	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 <b>EVERY 30 DAYS?</b>	yes
<b>115.51 (a) Inmate reporting</b>		
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	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
	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
<b>115.51 (b) Inmate reporting</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
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain	yes

	anonymous upon request?	
	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? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	na
<b>115.51 (c) Inmate reporting</b>		
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
<b>115.51 (d) Inmate reporting</b>		
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
<b>115.52 (a) Exhaustion of administrative remedies</b>		
	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
<b>115.52 (b) Exhaustion of administrative remedies</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.)	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.)	na
<b>115.52 (c) Exhaustion of administrative remedies</b>		
	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	na

	this standard.)	
	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.)	na
<b>115.52 (d) <i>Exhaustion of administrative remedies</i></b>		
	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.)	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.)	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.)	na
<b>115.52 (e) <i>Exhaustion of administrative remedies</i></b>		
	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.)	na
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	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.)	na
<b>115.52 (f) <i>Exhaustion of administrative remedies</i></b>		

	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.)	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.).	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.)	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.)	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.)	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.)	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.)	na
<b>115.52 (g)</b>	<b>Exhaustion of administrative remedies</b>	
	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.)	na
<b>115.53 (a)</b>	<b>Inmate access to outside confidential support services</b>	
	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
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers,	na

	including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)	
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
<b>115.53 (b)</b>	<b>Inmate access to outside confidential support services</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
<b>115.53 (c)</b>	<b>Inmate access to outside confidential support services</b>	
	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
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
<b>115.54 (a)</b>	<b>Third-party reporting</b>	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes
<b>115.61 (a)</b>	<b>Staff and agency reporting duties</b>	
	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
	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
	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	yes

	abuse or sexual harassment or retaliation?	
<b>115.61 (b)</b>	<b>Staff and agency reporting duties</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
<b>115.61 (c)</b>	<b>Staff and agency reporting duties</b>	
	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
	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
<b>115.61 (d)</b>	<b>Staff and agency reporting duties</b>	
	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
<b>115.61 (e)</b>	<b>Staff and agency reporting duties</b>	
	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
<b>115.62 (a)</b>	<b>Agency protection duties</b>	
	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
<b>115.63 (a)</b>	<b>Reporting to other confinement facilities</b>	
	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
<b>115.63 (b)</b>	<b>Reporting to other confinement facilities</b>	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes

<b>115.63 (c)</b>	<b>Reporting to other confinement facilities</b>	
	Does the agency document that it has provided such notification?	yes
<b>115.63 (d)</b>	<b>Reporting to other confinement facilities</b>	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
<b>115.64 (a)</b>	<b>Staff first responder duties</b>	
	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
	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
	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
	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
<b>115.64 (b)</b>	<b>Staff first responder duties</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
<b>115.65 (a)</b>	<b>Coordinated response</b>	
	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	yes

	response to an incident of sexual abuse?	
<b>115.66 (a)</b>	<b>Preservation of ability to protect inmates from contact with abusers</b>	
	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 limit 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
<b>115.67 (a)</b>	<b>Agency protection against retaliation</b>	
	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
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
<b>115.67 (b)</b>	<b>Agency protection against retaliation</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
<b>115.67 (c)</b>	<b>Agency protection against retaliation</b>	
	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 or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	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
	Except in instances where the agency determines that a report of	yes

	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?	
	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
	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
	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
	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
	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
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
<b>115.67 (d)</b>	<b>Agency protection against retaliation</b>	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
<b>115.67 (e)</b>	<b>Agency protection against retaliation</b>	
	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
<b>115.68 (a)</b>	<b>Post-allegation protective custody</b>	
	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
<b>115.71 (a)</b>	<b>Criminal and administrative agency investigations</b>	
	When the agency conducts its own investigations into allegations	yes

	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).)	
	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
<b>115.71 (b)</b>	<b>Criminal and administrative agency investigations</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
<b>115.71 (c)</b>	<b>Criminal and administrative agency investigations</b>	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
<b>115.71 (d)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.71 (e)</b>	<b>Criminal and administrative agency investigations</b>	
	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
	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
<b>115.71 (f)</b>	<b>Criminal and administrative agency investigations</b>	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes

	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
<b>115.71 (g)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.71 (h)</b>	<b>Criminal and administrative agency investigations</b>	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
<b>115.71 (i)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.71 (j)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.71 (l)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.72 (a)</b>	<b>Evidentiary standard for administrative investigations</b>	
	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
<b>115.73 (a)</b>	<b>Reporting to inmates</b>	
	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

<b>115.73 (b)</b>	<b>Reporting to inmates</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
<b>115.73 (c)</b>	<b>Reporting to inmates</b>	
	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 inmate 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
	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
	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
	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
<b>115.73 (d)</b>	<b>Reporting to inmates</b>	
	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
	Following an inmate's allegation that he or she has been sexually	yes

	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?	
<b>115.73 (e)</b>	<b>Reporting to inmates</b>	
	Does the agency document all such notifications or attempted notifications?	yes
<b>115.76 (a)</b>	<b>Disciplinary sanctions for staff</b>	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
<b>115.76 (b)</b>	<b>Disciplinary sanctions for staff</b>	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes
<b>115.76 (c)</b>	<b>Disciplinary sanctions for staff</b>	
	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
<b>115.76 (d)</b>	<b>Disciplinary sanctions for staff</b>	
	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
	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
<b>115.77 (a)</b>	<b>Corrective action for contractors and volunteers</b>	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes

	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
<b>115.77 (b)</b>	<b>Corrective action for contractors and volunteers</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
<b>115.78 (a)</b>	<b>Disciplinary sanctions for inmates</b>	
	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
<b>115.78 (b)</b>	<b>Disciplinary sanctions for inmates</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
<b>115.78 (c)</b>	<b>Disciplinary sanctions for inmates</b>	
	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
<b>115.78 (d)</b>	<b>Disciplinary sanctions for inmates</b>	
	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
<b>115.78 (e)</b>	<b>Disciplinary sanctions for inmates</b>	
	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
<b>115.78 (f)</b>	<b>Disciplinary sanctions for inmates</b>	
	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	yes

	evidence sufficient to substantiate the allegation?	
<b>115.78 (g)</b>	<b>Disciplinary sanctions for inmates</b>	
	If the agency prohibits all sexual activity between inmates, 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
<b>115.81 (a)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	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
<b>115.81 (b)</b>	<b>Medical and mental health screenings; history of sexual abuse</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
<b>115.81 (c)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	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? (N/A if the facility is not a jail).	yes
<b>115.81 (d)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	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
<b>115.81 (e)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior	yes

	sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	
<b>115.82 (a)</b>	<b>Access to emergency medical and mental health services</b>	
	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
<b>115.82 (b)</b>	<b>Access to emergency medical and mental health services</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
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes
<b>115.82 (c)</b>	<b>Access to emergency medical and mental health services</b>	
	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
<b>115.82 (d)</b>	<b>Access to emergency medical and mental health services</b>	
	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
<b>115.83 (a)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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
<b>115.83 (b)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</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
<b>115.83 (c)</b>	<b>Ongoing medical and mental health care for sexual abuse</b>	

	<b>victims and abusers</b>	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
<b>115.83 (d)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	yes
<b>115.83 (e)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	yes
<b>115.83 (f)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
<b>115.83 (g)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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
<b>115.83 (h)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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

<b>115.86 (a)</b>	<b>Sexual abuse incident reviews</b>	
	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
<b>115.86 (b)</b>	<b>Sexual abuse incident reviews</b>	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
<b>115.86 (c)</b>	<b>Sexual abuse incident reviews</b>	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
<b>115.86 (d)</b>	<b>Sexual abuse incident reviews</b>	
	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
	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
	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
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	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
<b>115.86 (e)</b>	<b>Sexual abuse incident reviews</b>	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes

<b>115.87 (a)</b>	<b>Data collection</b>	
	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
<b>115.87 (b)</b>	<b>Data collection</b>	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
<b>115.87 (c)</b>	<b>Data collection</b>	
	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
<b>115.87 (d)</b>	<b>Data collection</b>	
	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
<b>115.87 (e)</b>	<b>Data collection</b>	
	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
<b>115.87 (f)</b>	<b>Data collection</b>	
	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
<b>115.88 (a)</b>	<b>Data review for corrective action</b>	
	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
	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
	Does the agency review data collected and aggregated pursuant	yes

	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?	
<b>115.88 (b)</b>	<b>Data review for corrective action</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
<b>115.88 (c)</b>	<b>Data review for corrective action</b>	
	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
<b>115.88 (d)</b>	<b>Data review for corrective action</b>	
	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
<b>115.89 (a)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
<b>115.89 (b)</b>	<b>Data storage, publication, and destruction</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
<b>115.89 (c)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
<b>115.89 (d)</b>	<b>Data storage, publication, and destruction</b>	
	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
<b>115.401 (a)</b>	<b>Frequency and scope of audits</b>	

	During the prior three-year audit period, 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? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes
<b>115.401 (b)</b>	<b>Frequency and scope of audits</b>	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	no
	If this is the second year of the current audit cycle, 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 during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	no
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	yes
<b>115.401 (h)</b>	<b>Frequency and scope of audits</b>	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
<b>115.401 (i)</b>	<b>Frequency and scope of audits</b>	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
<b>115.401 (m)</b>	<b>Frequency and scope of audits</b>	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
<b>115.401 (n)</b>	<b>Frequency and scope of audits</b>	
	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
<b>115.403</b>	<b>Audit contents and findings</b>	

(f)		
	<p>The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. 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, there has never been a Final Audit Report issued.)</p>	yes