

# PREA Facility Audit Report: Final

**Name of Facility:** Bridgeport Correctional Center

**Facility Type:** Prison / Jail

**Date Interim Report Submitted:** 06/05/2024

**Date Final Report Submitted:** 11/13/2024

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> 11/13/2024

AUDITOR INFORMATION	
<b>Auditor name:</b>	Love, Sonya
<b>Email:</b>	sonya.love57@outlook.com
<b>Start Date of On-Site Audit:</b>	03/27/2024
<b>End Date of On-Site Audit:</b>	03/29/2024

FACILITY INFORMATION	
<b>Facility name:</b>	Bridgeport Correctional Center
<b>Facility physical address:</b>	1106 North Avenue, Bridgeport, Connecticut - 06604
<b>Facility mailing address:</b>	

Primary Contact
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<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>	Warden Ruben Burgos
<b>Email Address:</b>	ruben.burgos@ct.gov
<b>Telephone Number:</b>	475-225-8001

#### Facility PREA Compliance Manager

<b>Name:</b>	Joseph Garibaldi
<b>Email Address:</b>	joseph.garibaldi@ct.gov
<b>Telephone Number:</b>	
<b>Name:</b>	AnnaMarie Verdura
<b>Email Address:</b>	annamarie.verdura@ct.gov
<b>Telephone Number:</b>	

#### Facility Health Service Administrator On-site

<b>Name:</b>	RCCO Michael Greene
<b>Email Address:</b>	michael.b.greene@ct.gov
<b>Telephone Number:</b>	860-992-7636

#### Facility Characteristics

<b>Designed facility capacity:</b>	925
<b>Current population of facility:</b>	665
<b>Average daily population for the past 12 months:</b>	584

<b>Has the facility been over capacity at any point in the past 12 months?</b>	No
<b>Which population(s) does the facility hold?</b>	Males
<b>Age range of population:</b>	18-74 years old
<b>Facility security levels/inmate custody levels:</b>	1=10,2=38,3=144,4=470 on 2/1/2024
<b>Does the facility hold youthful inmates?</b>	No
<b>Number of staff currently employed at the facility who may have contact with inmates:</b>	316
<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>	36

<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****Name:** David McNeil**Email Address:** David.mcneil@ct.gov**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

1. Start date of the onsite portion of the audit:	2024-03-27
2. End date of the onsite portion of the audit:	2024-03-29

#### Outreach

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?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	Just Detention International

### AUDITED FACILITY INFORMATION

14. Designated facility capacity:	925
15. Average daily population for the past 12 months:	584
16. Number of inmate/resident/detainee housing units:	4
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" 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>36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:</b>	57196
<b>38. 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>	15
<b>39. 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>	7
<b>40. 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>	2
<b>41. 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>42. 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>	1
<b>43. 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>	1

<b>44. 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>	0
<b>45. 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>	0
<b>46. 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>	5
<b>47. 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>	0
<b>48. 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>	No text provided.
<b>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</b>	
<b>49. 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>	316
<b>50. 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>	36

51. Enter the total number of <b>CONTRACTORS</b> assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	0
52. 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:	No text provided.
<b>INTERVIEWS</b>	
<b>Inmate/Resident/Detainee Interviews</b>	
<b>Random Inmate/Resident/Detainee Interviews</b>	
53. Enter the total number of <b>RANDOM INMATES/RESIDENTS/DETAINEES</b> who were interviewed:	17
54. Select which characteristics you considered when you selected <b>RANDOM INMATE/RESIDENT/DETAINEE</b> interviewees: (select all that apply)	<input checked="" type="checkbox"/> Age <input checked="" type="checkbox"/> Race <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input checked="" type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input checked="" type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> None
55. How did you ensure your sample of <b>RANDOM INMATE/RESIDENT/DETAINEE</b> interviewees was geographically diverse?	Inmates were sample by living unit and level of vulnerability. The Auditor sampling strategy included selecting a select group of random interviewee from all living units. Further this Auditor crossed -referenced inmates identified as vulnerable and a select sample was chosen to participate in the interview process.



<b>56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</b>	<input checked="" type="radio"/> Yes  <input type="radio"/> No
<b>57. 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>	No text provided.
<b>Targeted Inmate/Resident/Detainee Interviews</b>	
<b>58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</b>	13
<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>	
<b>60. 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>	4
<b>61. 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>	3

<b>62. 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>	1
<b>63. 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>	0
<b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b>	<div> <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. </div> <div> <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed. </div>
<b>b. 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>	This Auditor corroborated with both medical and mental health practitioners to determine if within the population exist inmates who were LEP. This Auditor found none.
<b>64. 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>	0
<b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b>	<div> <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. </div> <div> <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed. </div>

<b>b. 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>The inmates sampled were English and Spanish proficient. According to the PREA Compliance Manager, zero LEP inmates were present during the onsite portion of this audit.</p>
<b>65. 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>2</p>
<b>66. 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>0</p>
<b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b>	<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>
<b>b. 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>Corroboration strategies to determine if this population exists in the audited facility include;</p> <ol style="list-style-type: none"> <li>1. Informal conversation with a medical practitioner</li> <li>2. Informal conversation with a mental health practitioner</li> <li>3. Facility and observations</li> <li>4. Informal conversation with the PREA Compliance Manager</li> </ol>

<b>67. 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>	1
<b>68. 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>	2
<b>69. 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>	0
<b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b>	<div> <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. </div> <div> <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed. </div>

<b>b. 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>During the facility tour and observation, this Auditor included an inspection of the segregation area. Additionally, during face-to-face observations in the cells, the Auditor spoke with all awake inmates to assess their status and inform them that the facility was undergoing a PREA audit. None of the inmates reported being placed in segregation due to allegations of sexual abuse or retaliation. Furthermore, no inmates requested to speak privately with the Auditor. Informal conversations with staff in the segregation area confirmed that no inmates were being held in segregation for reasons related to PREA.</p>
<b>70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</b>	<p>Specific categories of targeted populations are not tracked by CDOC.</p>
<b>Staff, Volunteer, and Contractor Interviews</b>	
<b>Random Staff Interviews</b>	
<b>71. Enter the total number of RANDOM STAFF who were interviewed:</b>	<p>12</p>
<b>72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</b>	<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>
<b>73. Were you able to conduct the minimum number of RANDOM STAFF interviews?</b>	<p> <input checked="" type="radio"/> Yes  <input type="radio"/> No         </p>

<b>74. 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>	No text provided.
<b>Specialized Staff, Volunteers, and Contractor Interviews</b>	
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>75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):</b>	12
<b>76. Were you able to interview the Agency Head?</b>	<input type="radio"/> Yes  <input checked="" type="radio"/> No
<b>a. Explain why it was not possible to interview the Agency Head:</b>	The Auditor spoke to the agency's designee.
<b>77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?</b>	<input checked="" type="radio"/> Yes  <input type="radio"/> No
<b>78. Were you able to interview the PREA Coordinator?</b>	<input checked="" type="radio"/> Yes  <input type="radio"/> No
<b>79. 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)

**80. 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>81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>a. Enter the total number of VOLUNTEERS who were interviewed:</b>	1
<b>b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)</b>	<input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input checked="" type="checkbox"/> Religious <input type="checkbox"/> Other
<b>82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No
<b>83. Provide any additional comments regarding selecting or interviewing specialized staff.</b>	The facility indicates zero contractors are employed.

## 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>84. 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>85. 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>86. 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>87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?</b>	<input checked="" type="radio"/> Yes  <input type="radio"/> No
<b>88. Informal conversations with staff during the site review (encouraged, not required)?</b>	<input checked="" type="radio"/> Yes  <input type="radio"/> No
<b>89. 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>	No text provided.
<b>Documentation Sampling</b>	
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.	
<b>90. 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>	<input checked="" type="radio"/> Yes  <input type="radio"/> No

<b>91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).</b>	No text provided.
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**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.

<b>92. Total number of SEXUAL ABUSE allegations and investigations overview during the 12 months preceding the audit, by incident type:</b>				
	<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>	0	0	0	0
<b>Staff-on-inmate sexual abuse</b>	1	0	1	0
<b>Total</b>	1	0	1	0

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

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

**94. 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

**95. 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	0	0
<b>Staff-on-inmate sexual abuse</b>	0	0	0	0
<b>Total</b>	0	0	0	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.

**96. 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

**97. 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>	2	2	0	0
<b>Total</b>	2	2	0	0

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

**Sexual Abuse Investigation Files Selected for Review**

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

1

<b>99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)
<b>Inmate-on-inmate sexual abuse investigation files</b>	
<b>100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b>	1
<b>101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</b>	<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)
<b>102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</b>	<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)
<b>Staff-on-inmate sexual abuse investigation files</b>	
<b>103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b>	1
<b>104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</b>	<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)

<b>105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</b>	<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)
<b>Sexual Harassment Investigation Files Selected for Review</b>	
<b>106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</b>	2
<b>107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)
<b>Inmate-on-inmate sexual harassment investigation files</b>	
<b>108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</b>	0
<b>109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</b>	<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)
<b>110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</b>	<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)

**Staff-on-inmate sexual harassment investigation files**

<b>111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</b>	2
<b>112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?</b>	<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 harassment investigation files)
<b>113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</b>	<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 harassment investigation files)
<b>114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.</b>	No text provided.

**SUPPORT STAFF INFORMATION****DOJ-certified PREA Auditors Support Staff**

<b>115. 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.</b>	<input type="radio"/> Yes  <input checked="" type="radio"/> No
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## Non-certified Support Staff

**116. 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

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

2

## AUDITING ARRANGEMENTS AND COMPENSATION

**121. 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

**Identify the name of the third-party auditing entity**

Diversified

Standards
Auditor Overall Determination Definitions
<ul style="list-style-type: none"> <li>Exceeds Standard (Substantially exceeds requirement of standard)</li> <li>Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period)</li> <li>Does Not Meet Standard (requires corrective actions)</li> </ul>
Auditor Discussion Instructions
<p>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.</p>

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	<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; CDOC Family and Friends Handbook, dated June 26, 2013; Employee PREA Training Curriculum and Sign-in sheets, CDOC Inmate Handbook, CDOC Organizational Chart, and CDOC Institutional Organizational Chart collectively address Standard 115.11.</p> <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 of CDOC Policy Number Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, effective July 20, 2015, pages 1-19. The said policy mandates that CDOC maintain a zero-tolerance policy on inmate sexual abuse/ sexual harassment. All employees, inmates, contractors, volunteers, vendors, and visitors shall be subject to this zero-tolerance policy. Violations of the policy may result in administrative and criminal</p>

sanctions. Each facility shall establish procedures for inmate sexual abuse/ sexual harassment prevention and intervention. The written policy outlines the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment

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.

Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, effective July 20, 2015, page 1, that the Commissioner of Corrections will appoint an upper-level person or their designee to serve as the agency PREA Coordinator for the Connecticut Department of Correction according to the CDOC organizational chart. During his interview, the PREA Coordinator confirmed for the Auditor that he has sufficient time and authority to develop, implement, and oversee agency efforts to comply with its facilities' PREA standards. The CDOC PREA Unit has several positions assigned to the unit, such as a Captain and two lieutenants.

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.

By examining and conducting audits in multiple CDOC facilities, each is designated a PREA Compliance Manager, as required in this standard—further PREA audits posted on the agency website list PREA Compliance Managers for each facility.

**Evidence relied upon:**

1. Pre-audit Questionnaire
2. Organizational Chart (facility)
3. Organizational Chart (agency) (internet search)
4. CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention (effective date 07/20/2015)
5. CDOC Family and Friends Handbook (dated 06/26/2013)
6. Employee PREA Training Curriculum and Sign-in sheets
7. CDOC Inmate Handbook
8. Interview with the PREA Coordinator
9. Interview with the PREA Compliance Manager

**Conclusion:**

Based on the evidence relied upon in making the compliance determination for this standard, the Auditor's analysis and reasoning, and the Auditor's conclusions, this standard is determined to be compliant. This standard complies with all material requirements for the relevant period.

115.12	Contracting with other entities for the confinement of inmates
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, effective July 20, 2015, and the Community Confinement Provider Manual addresses this standard.</p> <p>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.</p> <p>Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, indicates that contracts for the confinement of its inmates with private agencies or other entities, including other government agencies, will include in any new contract or contract renewal the entity's obligation to adopt and comply with the PREA standards. Further, the Community Confinement Provider Manual, pages 16-17, explicitly requires vendors with contracts for the confinement of its inmates to adopt and comply with the PREA standards, according to the contract administrator.</p> <p>115.12 (b): Any new contract or contract renewal shall provide agency contract monitoring to ensure that the contractor complies with the PREA standards.</p> <p>Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, effective July 20, 2015, indicates 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. Further, the Community Confinement Provider Manual, pages 16-17, explicitly requires vendors with contracts for the confinement of its inmates to adopt and comply with the PREA standards according to the contract administrator.</p> <p><b>Evidence relied upon:</b></p> <ol style="list-style-type: none"> <li>1. Pre-audit Questionnaire</li> <li>2. CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention (effective date 07/20/2015)</li> <li>3. Community Confinement Provider Manual</li> <li>4. Interview with the agency Contract Administrator</li> </ol> <p><b>Conclusion:</b></p> <p>Based on the evidence relied upon in making the compliance determination for this standard, the Auditor's analysis and reasoning, and the Auditor's conclusions, this standard is determined to be compliant. This standard complies with all material</p>

	requirements for the relevant period.
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<b>115.13</b>	<b>Supervision and monitoring</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Connecticut Department of Corrections (CDOC) Administrative Directive 2.15 Hazardous Duty Staff, Administrative Directive 6.12 Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, and Bridgeport CC Post Plan address this standard.</p> <p>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.</p> <p>Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 4, Staffing Plan, confirms that CDOC has a mandate to ensure that each facility it operates shall develop, document, and do its best to comply regularly with a staffing plan that provides for adequate staffing levels 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. Administrative Directive (AD) 2.15 Hazardous Duty Staff Deployment mandates that the agency Deputy Commissioner of Operations and designee establish a Post Plan for each facility. The Bridgeport Post Plan lists all posts and</p>

identifies each post as a fixed, pull, or shutdown post. Requests to add or delete permanent posts to the Post Plan are submitted in writing to the Deputy Commissioner of Operations. Problematic: Bridgeport omitted the staffing report as evidence of compliance. This substandard requires corrective action.

AD 6.12 specifically indicates that CDOC shall, 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. On November 9, 2023, members of Bridgeport upper management met with the PREA Unit Director and Captain. of the PREA Unit. Agenda Item #1 was the review of the Bridgeport Staffing Plan. According to the agenda and meeting minutes, the CDOC Operations Office approved the staffing plan on November 9, 2023.

During the facility tour, the Auditor observed that the staffing levels and the level of supervision in each unit were sufficient for the population assigned to each housing unit. One security officer was posted at the desk, which was positioned to minimize blind spots. The control rooms were centrally located in clear enclosures with sight lines down each corridor. The second and third officers were mobile throughout the living unit, conducting cell checks and listening to inmates'/confined persons' requests. Informal conversations with correctional staff assigned to each living unit provided zero insight into staff concerns over employee security concerns such as overcrowding, blind spots, or other matters. A sample of unannounced logbooks dated 1/7 - 13/24 and 3/3 - 9/24 all shifts indicate that intermediate and higher-level staff are making impromptu visits to each living unit and documenting those visits in the unit logbooks (See samples 1/7 - 13/24 and 3/3 - 9/24 all shifts for more information).

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

This Auditor found no evidence of a deviation from the staffing plan by examining a sample of post plans for the weeks of 1/7 -13/24 and 3/3- -9/24 all shifts. The PCM denied Bridgeport deviated from the staffing plan during this reporting period. According to the facility Warden, when staffing levels are unmet, Bridgeport documents the event and justifies all deviations from the facility staffing plan (See Administrative Directive 2.15. Hazardous Duty Staff Deployment, Section 5 – Staffing Plan for more information). Generally speaking, the shift supervisor indicated that possible deviations could result from weather, medical hospital posts, or staff sicknesses.

**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 pursuant 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 (See Connecticut Department of Correction, Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, p. 3, - Staffing Plan for more information).**

According to the facility Warden, Bridgeport, 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 pursuant 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. Problematic: **This Auditor lacks a staffing plan for this review period.**

AD 6.12 specifically indicates that CDOC shall, 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. On November 9, 2023, members of Bridgeport upper management met with the PREA Unit Director and Captain. of the PREA Unit. Agenda Item #1 was the review of the Bridgeport Staffing Plan. According to the agenda and meeting minutes, the CDOC Operations Office approved the staffing plan on November 9, 2023. **The 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. 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.

Connecticut Department of Correction, Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, page 10, Staff Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention Monitoring and Intervention (Sexual Abuse) mandates 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.

**Evidence relied upon:**

1. Pre-audit Questionnaire
2. CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention (effective date 07/20/2015)
3. CDOC Administrative Directive 2.15, Hazardous Duty Staff (effective date 02/13/2018)
4. Bridgeport CC Post Plan
5. Review of the facility staffing plan
6. Review of staff assignment onsite during the onsite audit period
7. Review of agenda and meeting minutes of the CDOC Operations Office approved the staffing plan (dated 11/09/2023)
8. Review of documentation of the staffing plan development process
9. Facility tour and observations
10. Observation of supervision practices
11. Observation of the camera system from control rooms
12. Observation of staffing assignments
13. Interview with the Warden
14. Interview with the PREA Coordinator
15. Interview with the PREA Compliance Manager
16. Interview with an Intermediate or Higher-Level Facility Staff

**Corrective Action:**

1. **115.13 (a): Problematic: Bridgeport omitted the staffing report as evidence of compliance. This substandard requires corrective action.**
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 pursuant 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 (See Connecticut Department of Correction, Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, p. 3, - Staffing Plan for more information).**

**Conclusion:**

Based on the evidence relied upon in making the compliance determination for this standard, the Auditor's analysis and reasoning, and the Auditor's conclusions, this standard is now determined to be compliant. This standard complies with all material requirements for the relevant period.



115.14	Youthful inmates
	<p data-bbox="256 185 959 219"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="256 264 544 297"><b>Auditor Discussion</b></p> <p data-bbox="256 342 1406 499">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 the use of a shared dayroom or other common space, shower area, or sleeping quarters.</p> <p data-bbox="256 544 1461 701">115.14 (a)-1 The facility prohibits placing youthful inmates in a housing unit in which a youthful inmate will have sight, sound, or physical contact with any adult inmate through the use of a shared dayroom or other common space, shower area, or sleeping quarters.</p> <p data-bbox="256 745 1445 813">115.14 (a)-2 Bridgeport indicates "no." the facility does not house youthful inmates. They are not assigned to this facility.</p> <p data-bbox="256 857 1445 925">According to the PAQ, Bridgeport does not house youthful inmates or confined persons. Interviews with the facility's Warden and the PCM each confirmed this fact.</p> <p data-bbox="256 969 1461 1126">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.</p> <p data-bbox="256 1171 1445 1238">According to the PAQ, Bridgeport does not house youthful inmates or confined persons. Interviews with the facility's Warden and the PCM each confirmed this fact.</p> <p data-bbox="256 1283 1461 1485">115.14 (c): Agencies shall make its 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.</p> <p data-bbox="256 1529 1445 1597">According to the PAQ, Bridgeport does not house youthful inmates or confined persons. Interviews with the facility's Warden and the PCM each confirmed this fact.</p> <p data-bbox="256 1641 603 1675"><b>Evidence relied upon:</b></p> <ol data-bbox="320 1731 1422 2022" style="list-style-type: none"> <li>1. Pre-audit Questionnaire</li> <li>2. Review of daily housing assignments for all offenders placed at Bridgeport during the onsite portion of this audit</li> <li>3. Review of the daily population report</li> <li>4. Interview the Warden</li> <li>5. Interview the PREA Compliance Manager</li> <li>6. Interview the PREA Coordinator</li> </ol> <p data-bbox="256 2067 443 2101"><b>Conclusion:</b></p>

	Based on the evidence relied upon in making the compliance determination for this standard, the Auditor's analysis and reasoning, and the Auditor's conclusions, this standard is determined to be compliant. This standard complies with all material requirements for the relevant period.
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<b>115.15</b>	<b>Limits to cross-gender viewing and searches</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Connecticut Department of Correction, Administrative Directive 6.7, Searches Conducted in Correctional Facilities, Correctional Practical Skills Module 300, Administrative Directive 8.17, Gender Non-Conforming, Bridgeport Post Orders, Administrative Directive 6.12, Sexual Assault Prevention Policy, and Administrative 8.17, Gender Non-Conforming address this standard.</p> <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>PAQ 115.15 (a)-2 Bridgeport Correctional Center indicates, in the past 12 months, the number of cross-gender strip or cross-gender visual body cavity searches of inmates was zero.</p> <p>Administrative Directives 6.12, Sexual Assault Prevention Policy, and, more specifically Administrative Directive 6.7, Searches Conducted in Correctional Facilities, pages 1-8, provide guidance for correctional staff to conduct cross-gender search strip searches or cross-gender visual body cavity searches Interviews with random staff during the onsite portion of this audit confirmed that all staff sampled understood that the facility and agency prohibit 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 (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.</p> <p>PAQ 115.15 (b)-1 Bridgeport Correctional Center answered "no". 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).</p> <p>Bridgeport has a rated capacity greater than 50. During the on-site portion of this audit, the facility reported zero transgender males and zero females.</p>

PAQ 115.15 (b)-2 Bridgeport Correctional Center indicates "not applicable". The facility does not restrict female inmates' access to regularly available programming or other out-of-cell opportunities to comply with this provision. The facility is an adult male facility, with zero transgender males assigned to it during the on-site portion of this audit.

PAQ 115.15 (b)-3 The number of pat-down searches of female inmates conducted by male staff at Bridgeport Correctional Center indicates "not applicable."

PAQ 115.15 (b)-4 The number of pat-down searches of female inmates conducted by male staff that did not involve exigent circumstance(s): Bridgeport Correctional Center indicates "not applicable." The facility is an adult male facility, with zero transgender males assigned to it during the on-site portion of this audit.

115.15 (c): The facility shall document all transgender/Intersex Inmates and shall document all transgender/Intersex Inmates of female inmates.

According to the facility's policy and questionnaire (PAQ), the report for this period indicates that Bridgeport conducted zero cross-gender strip searches and cross-gender visual body cavity searches. All sampled staff confirmed that if a cross-gender pat-down search occurs on a female inmate, the facility would document the incident using form CN 6601, Incident Form. Random interviews with correctional staff confirmed that there are currently no female inmates at Bridgeport. However, if females were assigned to the facility, the facility would document all cross-gender strip searches and cross-gender visual body cavity searches, as well as all cross-gender pat-down searches of female inmates. Furthermore, all random and targeted inmates/confined persons interviewed denied being subjected to a cross-gender strip search or cross-gender visual body cavity search, unless they requested to be searched by female correctional staff due to their gender identity.

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.

PAQ 115.15 (d)-1 Bridgeport Correctional Center confirmed that 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).

PAQ 115.15 (d)-2 Bridgeport Correctional Center confirmed that policies and procedures require staff of the opposite gender to announce their presence when entering an inmate housing unit.

The Connecticut Department of Correction (CDOC) implemented Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, effective July 20, 2015. This directive outlines policies and procedures to ensure that inmates can shower, use the restroom, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in urgent situations or during routine cell checks. Staff of the opposite gender are required to announce their presence when entering an inmate housing unit. Additionally, it is confirmed through interviews with random and targeted inmates/confined persons that transgender and intersex inmates are allowed to have separate shower times from their peers.

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.

PAQ 115.15 (e)-1 Bridgeport Correctional Center confirmed that 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.

PAQ 115.15 (e)-2 Bridgeport Correctional Center indicates "no," the number of searches as described in 115.15 (e)-1 that occurred in the past 12 months was zero.

Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, effective July 20, 2015, all random and specialized staff sampled indicated that they are prohibited by policy to 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.

Further, during the facility tour, staff verbally announced that staff of the opposite gender were entering a living unit. The announcement was sufficient for inmates/confined persons to hear the announcement. Random and targeted inmates/confined persons, when asked about staff making opposite gender announcements when entering a housing unit, the majority confirmed that female staff make the announcement. Some inmates sampled indicated they work during the daytime and, therefore, are not around to be listed for announcements. The Auditor observed where inmates and confined persons were showering. It is a single-person shower off the main corridor of each wing of every living unit. All showers were equipped with PREA-friendly shower curtains that obscured the visibility of breast and genital areas. Toilets are located inside each room. The window into each inmate/confined person's room is well above five feet. The Auditor was required to stand on the ball of her feet to speak with inmates/confined persons. Nonmedical staff of the opposite gender were unable to view confined persons in a state of undress, including from different

angles and via mirror placement. Same-sex male officers operated control rooms during the on-site portion of the audit, except in the control room at the entrance to the building. The entrance control room did not have access to living unit cameras.

115.15 (f): The agency shall train 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.

PAQ 115.15 (f)-1 Bridgeport Correctional Center indicates that 100 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.

CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, mandates training for all 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. By examination, CDOC has a training curriculum for correctional 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. Through the interview process, all random security staff interviewed during the onsite portion of this audit confirmed training 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.

**Evidence relied upon:**

1. Pre-audit Questionnaire
2. CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention (effective date 07/20/2015)
3. CDOC Administrative Directive 6.7, Searches Conducted in Correctional Facilities (effective date 01/30/2024)
4. CDOC Correctional Practical Skills Module 300
5. CDOC Administrative Directive 8.17, Gender Diverse (effective date 10/30/2023)
6. Bridgeport Post Orders
7. Facility tour and observations
8. Interviews with random staff
9. Interview with Intake staff
10. Interviews with random offenders
11. Interviews with targeted offenders
12. Informal conversation with offenders regarding opposite-gender announcements
13. Informal conversation with a supervisor in Intake
14. Photos of RHU showers (before)

	<p>15. Photos of RHU showers (after)</p> <p>16. Examination of a select group of training files (corrective action)</p> <p><b>Corrective Action:</b></p> <p>1. CDOC will provide this Auditor with a random sample of security staff who have completed cross-gender search training.</p> <p><b>Conclusion:</b></p> <p>Based on security staff interviews regarding training 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. This facility fully satisfies the requirements for this standard for the relevant review period.</p>
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115.16	Inmates with disabilities and inmates who are limited English proficient
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Administrative Directive: 10.12 – Inmate Orientation, American Sign Language Interpreting Services, Inmate Handbook (Spanish and English) addresses the standard.</p> <p>115.16 (a): CDOC 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 and providing access to interpreters who can interpret effectively, accurately, impartially, receptively, and expressively, using any necessary specialized vocabulary. In addition, the agency shall 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</p>

Americans With Disabilities Act, 28 CFR 35.164.

PAQ 115.16 (a)-1 The agency has established procedures to provide disabled inmates 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.

Interviews with all random sample staff confirmed the appropriate steps they would take to ensure that an inmate/confined person with a disability would have an opportunity to benefit from the agency's PREA initiative to prevent, protect, detect, and respond to sexual abuse and sexual harassment, such as reading aloud for those persons with reading challenges, providing posters and brochures in English and Spanish, use of a language line interpretive service, and the use of the National Registry of Interpreters for the Deaf or Hearing Impaired. Likewise, a sample of targeted inmates/confined persons with disabilities such as blindness (1), low vision (1), hearing loss (HOH)(1), and LEP (1) were interviewed separately for this audit. Each targeted inmate/confined person interviewed detailed how the facility communicates with them, given their disability. For example, the HOH indicated that intake staff communicated with him in writing. The LEP inmate/confined person detailed how the facility provided a staff person who spoke Spanish to communicate the rules and PREA information to him. The same inmate/confined person added that Bridgeport also has PREA posters in his living unit, hallways, and common spaces in a language he understands (Spanish). This Auditor found no documentation of circumstances in a sample of incident reports indicating that inmate interpreters, readers, or other inmate assistants were used to communicate with an LEP victim during a PREA investigation or incident.

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.

PAQ 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, pages 9 and 10, and Administrative Directive: 10.12 – Inmate Orientation, and the American Sign Language Interpreting Services support the steps CDOC takes in its efforts to prevent, detect, and respond to sexual abuse and sexual harassment for inmates who are limited English proficient. As a rule, Bridgeport employs staff fluent in specific languages such as Spanish. During the audit tour, the Auditor noted posters throughout the facility on bulletin boards, painted on walls, and positioned in communal areas to inform inmates/confined persons of their rights and information regarding emotional support and third-party reporting options. Bridgeport made available a staff person who spoke Spanish. On the facility tour, this Auditor tested

the telephone system of each living unit to confirm they were operational and could provide inmates/confined persons access to outside emotional services and serve to initiate a third-party report. All telephones tested on each living unit advise inmates/confined persons that their calls could be recorded. It should be noted that several facility inmates/confined persons were talking on the telephone, which further supports access to the community.

In an informal conversation with a bilingual Spanish-speaking inmate/confined person, he indicated he aids peers who are LEPs in the living units on request. During an interview with an LEP (1), he preferred communicating with Spanish-speaking peers in his living unit because it comforted him. Problematic, Bridgeport omitted the inclusion of evidence to support this substandard fully. The Auditor could not test the facility's process for securing interpretative services on demand. This substandard requires corrective action.

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 influential interpreter could compromise the inmate's safety, the performance of first-response duties under § 115.64, or the investigation of the inmate's allegations.

PAQ 115.16 (c)-1 Agency policy prohibits the 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.

PAQ 115.16 (c)-2 Bridgeport Correctional Center confirmed that the facility would document electronic medical records (EMR) in any emergent circumstances in individual cases where inmate interpreters, readers, or other types of inmate assistants are used.

PAQ 115.16 (c)-3 Bridgeport Correctional Center confirmed that 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 as confirmed by the PCM during the onsite portion of this audit.

All random staff sampled during the onsite portion of this audit denied ever relying on inmate interpreters, inmate readers, or other types of inmate assistants except in limited circumstances where an extended delay in obtaining an influential interpreter could compromise the inmate's safety, the performance of first-response duties under § 115.64, or the investigation of the inmate's allegations because of the need for confidentiality.

According to PAQ 115.16 (c), 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 as confirmed by the PCM during the onsite portion of this audit.

**Evidence relied upon:**

1. Pre-audit Questionnaire
2. CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention (effective date 07/20/2015)
3. CDOC Administrative Directive 10.12, Inmate Orientation (effective date 09/14/2014)
4. American Sign Language Interpreting Services
5. Examination of written PREA-related material (Spanish and English)
6. Examination of written Inmate Handbook (Spanish and English)
7. Interview with the CDOC Commissioner
8. Interviews with random staff
9. Interviews with offenders with blindness (1), low vision (1), hearing loss (HOH)(1), and Limited English Proficient (LEP) (1)

**Corrective Action:**

115.16 (b): The Auditor could not test the facility's process for securing interpretation services on demand. If services are provided via a language line, the auditor must test access to services via the language line to assess whether the phones for accessing the language line work correctly. The Auditor will test the language line or on-demand interpretive system to determine if persons confined in the facility must self-identify (e.g., enter a pin, provide name/ID number) to access interpretation services. Bridgeport will outline how inmates can access interpretive services if needed. Inclusive in the outline for access to interpretive services will include the contractual availability of the interpretive service. Bridgeport will provide the Auditor with evidence of compliance or document why initiating an on-demand system would create financial hardship for the facility or agency.

**Conclusion:**

1. There is a sister parent agency where CDOC staff utilizes interpretative services approved by the State of Connecticut. Governmental staff or disabled persons seeking assistance are not required to enter a PIN or provide an ID number.
2. CDOC meets this standard in all material ways for this relevant review period.

<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 2.3—Employee Selection, Transfer and Promotion, Policy 10.4—Volunteer and Recreation Services, and the Five Year Background Schedule collectively address this standard.</p> <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>PAQ 115.17 (a)-1 CDOC confirmed that the agency has a policy that 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.</p> <p>Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 6 - 8, CDOC mandates that 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. In an interview with a Human Resource Manager, she indicates, as was found in AD 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, that potential applicants complete a criminal disclosure form during the onboarding process. According to the HR Manager, CDOC continuously monitors employees for violations of their oath of office and PREA standards. All employees and contractors are duty-bound to affirmatively notify a supervisor of any administrative or criminal code violations, including</p>

behaviors outlined in PREA standards, such as engaging in sexual abuse, being 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.

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

PAQ 115.17 (b)-1 CDOC confirms that the agency's policy requires the consideration of any incidents of sexual harassment in determining whether to hire or promote anyone or to enlist the services of any contractor who may have contact with inmates.

The HR Manager confirmed that during the onboarding process, CDOC would consider any incident of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates or enlist the services of any contractor. During this audit period, the agency PREA Coordinator and Director of the PREA Unit confirmed zero contractors working for the agency during the previous 12-month period. The information obtained from the agency PREA Coordinator and HR Manager correlates with information submitted in the PAQ.

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.

PAQ 115.17 (c)-1 CDOC confirmed that the 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.

PAQ 115.17 (c)-2 Bridgeport Correctional Center confirmed that in the past 12 months, 60 persons were hired who may have contact with inmates who have had criminal background record checks.

According to the HR Manager, before hiring a new employee who may have contact with inmates, CDOC (1) Performs 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. Bridgeport provided the Auditor with a list of 60 persons hired or promoted during this audit period. The Auditor randomly selected 16 employees (e.g., 5 promoted, and 15 new hires) for file review. One new employee is listed as a Psychiatrist on per

diem. It is questionable if this employee is a state employee or a contractor.

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.

PAQ 115.17 (d)-1 CDOC confirmed that the agency has a policy requiring a criminal background record check before enlisting the services of any contractor who may have contact with inmates.

PAQ 115.17 (d)-2 Bridgeport Correctional Center confirmed that in the past 12 months, there were zero contracts for services where criminal background record checks were conducted on all staff covered in the contract who might have contact with inmates.

115.17 (e): The agency shall 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.

PAQ 115.17 (e)-1 CDOC confirmed that the agency has a policy requiring that either 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.

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 upon employees a continuing affirmative duty to disclose any such misconduct.

PAQ 115.17 (g)-1 CDOC confirmed that the policy states that material omissions regarding such misconduct or the provision of materially false information shall be grounds for termination.

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.

**Evidence relied upon:**

1. Pre-audit Questionnaire
2. CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention (effective date 07/20/2015)
3. CDOC Administrative Directive 2.3, Employee Selection, Transfer and Promotion (effective date 09/26/2014)

4. CDOC Administrative Directive 10.4, Volunteer and Recreation Services (effective date 06/29/2018)
5. Five Year Background Schedule
6. Interview with administrative staff
7. Examination of personnel files of persons hired in the past 12 months
8. Examination of records of contractors hired in the past 12-month period
9. Examination of CDOC background records checks of current employees in five- year intervals

**Corrective action:**

1. **115.17 (c):** According to the HR Manager, CDOC would, before hiring a new employee who may have contact with inmates, agency (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. Problematic, this substandard lacks evidence in the form of a sample of criminal background records checks to verify compliance with this substandard. This substandard requires corrective action. Bridgeport will provide this Auditor with a roster of employees promoted in the past 12 months. The Auditor will randomly select a sample of persons promoted to determine if CDOC conducted criminal background checks before promotions of employees. Additionally, Bridgeport will provide a roster of persons hired in the past 12 months. The Auditor will randomly select new employees from the roster to determine compliance with this standard.
2. This substandard requires corrective action.

**Conclusion:**

Based on the evidence relied upon in making the compliance determination for this standard, the Auditor's analysis and reasoning, and the Auditor's conclusions, this standard is determined to be compliant. This standard complies with all material requirements for the relevant period.

<b>115.18</b>	<b>Upgrades to facilities and technologies</b>
	<b>Auditor Overall Determination:</b> Meets Standard

**Auditor Discussion**

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

115.18 (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. According to the facility Warden, zero modifications were made at Bridgeport during this reporting period.

PAQ 115.18 (a)-1 Bridgeport Correctional Center indicated "no" that the facility has not 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. The PCM confirmed this substandard during the onsite portion of this audit.

According to the Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, page 16, supports this standard. During separate interviews with the facility, the Warden and the agency designee each confirmed that they would consider the effects of the design, acquisition, expansion, or modification of all facilities (e.g., Bridgeport and Manson) in the agency's efforts to prevent sexual abuse and sexual harassment.

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.

PAQ 115.18 (b)-1 The facility Warden confirmed that the Bridgeport Correctional Center 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. During his interview, the PCM also confirmed 115.18 (b)-1 CDOC/Bridgeport has installed or upgraded the facility's video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.

During an interview with the facility Warden, he confirmed that if Bridgeport installed or updated any additional video monitoring technology, he would consider how such technology may enhance and eliminate blind spots for improving the agency's ability to protect inmates from sexual abuse; likewise, in a separate, the agency designee detailed how employment of improvements in monitoring technology and installing additional cameras could also enhance sexual safety for inmates/confined persons and staff alike. The agency has installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since 2012. The agency's designee detailed to the Auditor how such technology may enhance the agency's ability to protect inmates from sexual abuse by providing audio and increased clarity in the video recordings.

	<p><b>Evidence relied upon:</b></p> <ol style="list-style-type: none"> <li>1. Pre-audit Questionnaire</li> <li>2. CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention (effective date 07/20/2015)</li> <li>3. Interview with the CDOC Commissioner</li> <li>4. Interview with the Warden</li> </ol> <p><b>Conclusion:</b></p> <p>Based on the evidence relied upon in making the compliance determination for this standard, the Auditor's analysis and reasoning, and the Auditor's conclusions, this standard is determined to be compliant. This standard complies with all material requirements for the relevant period.</p>
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115.21	Evidence protocol and forensic medical examinations
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>Connecticut 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 with between the Connecticut Sexual Assault Crisis Services, Inc and the Connecticut Department of Corrections, Evidence Protocol Guidelines all collectively addresses this standard.</p> <p>115.21 (a): The agency's responsibility for investigating allegations of sexual abuse is underscored by using a uniform evidence protocol. This protocol is crucial as it maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions.</p> <p>PAQ 115.21 (a)-1 CDOC/Bridgeport Correctional Center confirmed that the facility is responsible for conducting administrative sexual abuse investigations (including inmate-on-inmate sexual abuse or staff sexual misconduct).</p> <p>PAQ 115.21 (a)-2 CDOC/Bridgeport Correctional Center confirmed that the agency/facility is not responsible for conducting criminal sexual abuse investigations (including inmate-on- inmate sexual abuse or staff sexual misconduct).</p>

PAQ 115.21 (a)-3 CDOC/Bridgeport Correctional Center confirmed that another agency, CT State Police, does have responsibility for conducting either administrative or criminal sexual abuse investigations.

PAQ 115.21 (a)-4 CDOC/Bridgeport Correctional Center confirmed when conducting a sexual abuse investigation; the agency investigators follow a uniform evidence protocol.

The Director of the PREA Unit, the agency's PREA Coordinator, has confirmed that CDOC is responsible for conducting administrative investigations of sexual abuse. The agency adheres to the uniform evidence protocol in these investigations, demonstrating its commitment to thorough investigations. Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, page 14, indicates that the Connecticut State Police serves as the investigating authority in all incidents of potentially criminal sexual abuse investigations for the CDOC. The PREA Investigative Unit or designee is the primary investigating authority of sexual harassment. In separate interviews, the Bridgeport PCM and Captain of the agency's PREA Unit have also verified the accuracy of evidence submitted in the PAQ under Standard 115.21. Further, a memorandum dated 9/2/2014 between the CDOC Director of the PREA Unit and Connecticut State Police (CSP), Major, Office of the Deputy Commissioner confirms that CDOC reiterated the responsibility for investigating allegations of sexual abuse is underscored by using uniform evidence protocol (See CSP MOU documentation of the request regarding the requirements of §115.21(a) through (e) with the outside investigating agency).

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.

PAQ 115.21 (b)-2 CDOC confirmed "yes" that the evidence 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.

The protocol shall be developmentally appropriate for youth is not applicable. Bridgeport is an adult male facility that does not house youth under 18. During the on-site portion of this audit, zero transgender males were assigned to the facility. A review of the inmate/confined persons roster by living units confirmed that zero youthful inmates/confined persons were assigned to Bridgeport. Likewise, interviews with specialized staff also confirmed that zero youthful inmates/confined persons or transgender males were assigned to the facility during the audit period. All sampled random staff detailed to the Auditor how each would preserve forensic evidence by securing the crime scene, collecting clothing, and asking the victim not to take any



actions to compromise the collection of physical evidence.

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.

PAQ 115.21 (c)-1 The Bridgeport Correctional Center indicated "yes" that the facility does offer all offenders who experience sexual abuse access to forensic medical examinations onsite.

All victims of sexual abuse have access to forensic medical examinations at a local outside hospital such as the University of Connecticut (UCONN) without financial cost, where evidentiarily or medically appropriate. SANE examinations are performed by trained sexual assault forensic nurse examiners (SAFEs) or sexual assault nurse examiners (SANEs) where possible, as confirmed by a medical practitioner. Further, the same medical practitioner also explained that If SAFEs or SANEs were unavailable, the examination would be performed by other qualified medical practitioners in the Emergency Department of a local hospital.

During the forensic examination, the hospital obtains consent to conduct the examination. A medical history is obtained from the victim. Afterward, an extensive full-body examination, including the genital area, is conducted by the SANE examiner. The SANE examination documents sexual trauma to any part of the body and stores evidence in an evidence collection kit. Evidence collected during the examination is transported to a forensic laboratory for processing. Archival investigations from prior years corroborate the agency's documented efforts to provide SANE exams to victims of sexual abuse, and this confirms that inmate victims of sexual abuse have access to forensic medical examinations when applicable.

PAQ 115.21 (c)-5 The Bridgeport Correctional Center confirmed that where possible, examinations are conducted by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs).

PAQ 115.21 (c)-6 The Bridgeport Correctional Center confirmed that when SANEs or SAFEs are not available, a qualified medical practitioner performs forensic medical examinations.

PAQ 115.21 (c)-7 The Bridgeport Correctional Center confirmed that the facility documents efforts to provide SANEs or SAFEs.

PAQ 115.21 (c)-8 indicates that the number of forensic medical exams conducted during the past 12 months was zero, as confirmed by the Captain of the CDOC agency PREA Unit.

PAQ 115.21 (c)-9 indicates the number of forensic exams performed by SANEs/SAFEs

staff during the past 12 months as zero, as confirmed by the Captain of the CDOC agency PREA Unit.

PAQ 115.21 (c)-10 indicates the number of exams performed by a qualified medical practitioner during the past 12 months was also zero for Bridgeport, as confirmed by the Captain of the CDOC agency PREA Unit. (See Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 13 and Administrative Directive 8.1 Scope of Health Services Care, Section 4 for more information).

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 rape crisis centers. For the purpose of 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.

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

PAQ 115-21 (d)-2. The Bridgeport Correctional Center confirms documenting their efforts.

PAQ 115.21 (d)-3 The Bridgeport Correctional Center indicates that if and when a rape crisis center is not available to provide victim advocate services, the facility provides a qualified staff member (SART) to support the victim throughout the investigative process and the forensic examination. Moreover, SART serves as the victim advocate.

CDOC has an MOU to make available to victims of sexual abuse a victim advocate from a rape crisis center. The MOU between CDOC and the Connecticut Alliance to End Sexual Violence (The Alliance), formally known as the Connecticut Sexual Assault Crisis Service, confirms the existence of an agreement to provide victim advocacy services. As noted in Standard 115.21.(c) indicates the number of forensic medical exams conducted during the past 12 months was zero: PAQ 115.21 (c)8-9 indicates the number of forensic exams performed by SANES/SAFEs staff during the past 12 months as zero, as confirmed by the Captain of the CDOC agency PREA Unit. PAQ 115.21 (c)-10 indicates the number of exams performed by a qualified medical practitioner during the past 12 months was also zero for Bridgeport, as confirmed by the Captain of the CDOC agency PREA Unit.

CDOC/Bridgeport SANE protocol was outlined for this Auditor by a medical practitioner during the onsite portion of this audit. Bridgeport would transport the

victim to a local hospital with a SANE Examiner. The forensic protocol provides SANE examiners 7 days per week, including holidays, to conduct forensic examinations as needed. CDOC makes available to victims a victim advocate from the local rape crisis center. The PREA Coordinator provided evidence of an agreement to provide victim advocacy services through an MOU between CDOC and the Connecticut Alliance to End Sexual Violence (The Alliance), formally known as the Connecticut Sexual Assault Crisis Service. This Auditor made two attempts to email the victim advocacy agency to request an interview (See Administrative Directive 8.1 Scope of Health Services Care, pages 6-11 for additional information),

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.

PAQ 115.21 (e)-1 Bridgeport Correctional Center indicates that if the victim requests it, 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.

During his interview, the PREA complaint manager confirmed that a victim advocate would meet with and support the victim through the forensic medical examination if the victim requests the support from a victim advocate. Emotional support (e.g., information, crisis intervention, referrals for follow-up services) extends to investigatory interviews and emotional support during the forensic examination.

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.

PAQ 115.21 (f)-1 Bridgeport Correctional Center indicates "yes", the agency/facility is responsible for conducting administrative and criminal sexual abuse investigations.

By examination, this Auditor confirmed that CDOC has a MOU with the Connecticut State Police to investigate all potentially criminal allegations of sexual abuse. CDOC, by examination of a memorandum dated, the agency shall request that the investigating agency follow the requirements of paragraphs (a) through (e) of this section. The PREA Coordinator confirmed that his office is responsible for investigating administrative allegations of sexual abuse. A memorandum dated 9/2/2014 between the CDOC Director of the PREA Unit and Connecticut State Police (CSP), Major, Office of the Deputy Commissioner confirms that CDOC has reiterated the responsibility for investigating allegations of sexual abuse is underscored by using uniform evidence protocol (See CSP MOU documentation of the request regarding the requirements of §115.21(a) through (e) with the outside investigating agency).

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.

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.

As indicated in Standard 115. 21 (d), reported in Provision (d), victim advocacy services are provided through a trained victim advocate from the Connecticut Sexual Assault Crisis Services, Inc. If a victim advocate is unavailable, advocacy will be provided by trained facility clinical practitioners, according to the PCM.

**Evidence relied upon:**

1. Pre-audit Questionnaire
2. CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention (effective date 07/20/2015)
3. CDOC Administrative Directive 8.1, Scope of Health Services Care (effective date 11/02/2014)
4. CDOC Administrative Directive 1.10, Investigations (effective date 09/17/2020)
5. CDOC Administrative Directive 6.6, Reporting of Incidents (effective date 10/01/2018)
6. CDOC Administrative Directive 6.9, Collections and Retention of Contraband and Physical Evidence (effective date 01/03/2017)
7. Memorandum to the Connecticut State Police regarding Evidence Protocol
8. Memorandum of Understanding (MOU) between the Connecticut State Patrol and the Connecticut Department of Corrections
9. Memorandum of Understanding with between the Connecticut Sexual Assault Crisis Services, Inc and the Connecticut Department of Corrections
10. Documentation review of the Evidence Protocol Guidelines
11. Interviews with random staff
12. Interview with the PREA Compliance Manager
13. **Interviews with offenders who reported sexual abuse (2)**
14. Examination of select documentation of efforts to provide SANE/SAFEs
15. Documentation of screening, documentation of appropriate training
16. Documentation to corroborate that all offenders and victims of sexual abuse have access to forensic medical examinations

**Conclusion:**

Based on the evidence relied upon in making the compliance determination for this standard, the Auditor's analysis and reasoning, and the Auditor's conclusions, this standard is determined to be compliant. This standard complies with all material requirements for the relevant period.

115.22	Policies to ensure referrals of allegations for investigations
	<p data-bbox="256 185 959 219"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="256 264 544 297"><b>Auditor Discussion</b></p> <p data-bbox="256 342 1461 745">Connecticut 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 with between the Connecticut Sexual Assault Crisis Services, Inc and the Connecticut Department of Corrections, Evidence Protocol Guidelines all collectively addresses this standard.</p> <p data-bbox="256 790 1474 869">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 data-bbox="256 902 1474 1025">PAQ 115.22 (a)-2 Bridgeport Correctional Center indicates that in the past 12 months, the number of allegations of sexual abuse and sexual harassment that were received was 2.</p> <p data-bbox="256 1059 1474 1137">PAQ 115.22 (a)-3 Bridgeport Correctional Center indicates that in the past 12 months, the number of allegations resulting in an administrative investigation was 0.</p> <p data-bbox="256 1171 1410 1249">PAQ 115.22 (a)-4 Bridgeport Correctional Center indicates that 0 allegations were referred for criminal investigation in the past 12 months.</p> <p data-bbox="256 1283 1445 1451">PAQ 115.22 (a)-5 Bridgeport Correctional Center indicates "yes" that all administrative and/ or criminal investigations were completed regarding allegations received during the past 12 months. BCC reported no allegations resulted in administrative or criminal investigations.</p> <p data-bbox="256 1485 1474 1731">By examination of Bridgeport investigative documents (2) provided by the Captain of the CDOC PREA Unit, this Auditor determined that CDOC completed investigations for all allegations of sexual abuse and sexual harassment. Problematic, the investigations were completed by investigators who had not completed the required training as stipulated in the Prison Rape Act. This substandard requires corrective action. (see Standard 115.43).</p> <p data-bbox="256 1765 1461 2056">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. Administrative Directive 6.12, Inmate Sexual Abuse/ Sexual Harassment Prevention and Intervention, is published on the agency's formal website. According to the PREA Coordinator, all referrals to CSP are documented by CDOC.</p>

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

PAQ 115.22 (b)-3 Bridgeport Correctional Center confirmed that the agency documents all referrals of allegations of sexual abuse that are potentially criminal for criminal investigation. Likewise, each confirmed during separate interviews that all sexual harassment allegations are also investigated to a conclusion.

CDOC Administrative Directive (AD) 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. Further, Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, is published on the agency's formal website. The policies detail the investigative responsibilities of both the agency and CSP. The PREA Coordinator confirmed to the Auditor that all referrals to CSP are documented by CDOC. (See MOU with Connecticut State Police).

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.

Connecticut State Police is responsible for conducting criminal investigations for CDOC as outlined in Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, which describes the responsibilities of the agency and the investigating CSP.

Criminal investigations, specifically allegations of sexual abuse, fall under the jurisdiction of the Connecticut State Police. When a potential crime occurs CDOC personnel are required to secure the crime scene following Administrative Directive 6.9, Control of Contraband and Physical Evidence. CDOC will assist the Connecticut State Police upon request, and are prohibited from independently conducting any type of investigative investigation. Administrative Investigation are conducted by the CDOC upon authorization of the Connecticut State Police through the PREA Unit.

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.

PAQ 115.22 (d)-1 Bridgeport Correctional Center indicates "yes," If the agency is not responsible for conducting administrative or criminal investigations of alleged sexual abuse, and another state entity has that responsibility, this other entity has a policy governing how such investigations are conducted.

CDOC Administrative Directive (AD) 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, and AD 1.10 Investigation mandates that allegations of

sexual abuse or sexual harassment are referred for investigation to an agency (Connecticut State Police) with the legal authority to conduct criminal investigations unless the allegation does not involve potentially criminal behavior.

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.

This substandard is not applicable.

**Evidence relied upon:**

1. Pre-audit Questionnaire
2. CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention (effective date 07/20/2015)
3. CDOC Administrative Directive 8.1, Scope of Health Services Care (effective date 11/02/2014)
4. CDOC Administrative Directive 1.10, Investigations (effective date 09/17/2020)
5. CDOC Administrative Directive 6.6, Reporting of Incidents (effective date 10/01/2018)
6. CDOC Administrative Directive 6.9, Collections and Retention of Contraband and Physical Evidence (effective date 01/03/2017)
7. Memorandum to the Connecticut State Police regarding Evidence Protocol
8. Memorandum of Understanding (MOU) between the Connecticut State Patrol and the Connecticut Department of Correction
9. Memorandum of Understanding with between the Connecticut Sexual Assault Crisis Services, Inc and the Connecticut Department of Correction
10. Documentation review of the Evidence Protocol Guidelines
11. Documentation of reports of sexual abuse
12. Documentation of reports of sexual harassment
13. Documentation of investigations, including findings
14. Documentation of referrals of allegations of sexual abuse (2) and/or sexual harassment
15. Interview with the CDOC Commissioner
16. Interview with the facility Investigator staff
17. Interview with the PREA Coordinator
18. Internet search of the CDOC website

**Corrective Action:**

115.22 (a): The agency shall ensure that administrative or criminal investigations are completed for all allegations of sexual abuse and sexual harassment. By examination of investigative documents (2), this Auditor determined that CDOC completed investigations for all allegations of sexual abuse and sexual harassment. Problematic, the investigations were completed by investigators who did not complete the required training as stipulated in the Prison Rape Elimination Act. CDOC will re-investigate all

	<p>investigations using investigators who have completed the required specialized and general training. CDOC will provide this Auditor with documentation of reports of sexual abuse and harassment and documentation, including full investigation reports with findings of completion of specialized training as stipulated in PREA standards. Investigations during this reporting period will be reinvestigated by investigators who completed the required general and specialized training before the review.</p> <p><b>Conclusion:</b></p> <p>CDOC/PREA Unit will review all investigations completed by investigators who did not complete the required training as stipulated in the in the Prison Rape Elimination Act. CDOC/PREA unit will provide the Auditor with proof of a reinvestigation of all investigations completed by non-trained investigative or facility security CDOC staff.</p>
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115.31	Employee training
	<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, Employee PREA Training Curriculum and Sign-in sheets collectively address Standard 115.31.</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>PAQ 115.31 (a)-1 CDOC confirmed that the agency trains all employees who may have contact with inmates on the agency's zero-tolerance policy for sexual abuse and sexual harassment.</p> <p>PAQ 115.31 (a)-2 CDOC confirmed that the agency trains all employees who may</p>



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.

PAQ 115.31 (a)-3 CDOC confirmed that 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.

PAQ 115.31 (a)-4 CDOC confirmed that 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.

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

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

PAQ 115.31 (a)-7 CDOC confirmed that 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.

PAQ 115.31 (a)-8 CDOC confirmed that the agency trains all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates.

PAQ 115.31 (a)-9 CDOC confirmed that 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.

PAQ 115.31 (a)-10 CDOC confirmed that 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.

**By examination, this Auditor confirmed that Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, and the Employee PREA Training Curriculum such as 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; and (3) How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates. Problematic is the absence of evidence to confirm training of employees who may have contact with inmates. This substandard requires corrective action.**

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 the employee is

reassigned from a facility that houses only female inmates, or vice versa.

PAQ 115.31 (b)-1 CDOC confirmed that training is tailored to the gender of the inmates at the facility.

PAQ 115.31 (b)-2 CDOC confirmed that employees who are reassigned from facilities housing the opposite gender are given additional training.

Bridgeport is an adult male facility. CDOC training is gender neutral therefore tailored for all genders of adult inmates at Bridgeport. According to the PREA Coordinator, an employee would receive gender specific training if transferred to a female facility.

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, and 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 in which an employee does not receive refresher training, the agency shall provide refresher information on current sexual abuse and sexual harassment policies.

PAQ 115.31 (c)-2 CDOC confirmed that between training, the agency provides employees who may have contact with inmates with refresher information about current policies regarding sexual abuse and sexual harassment.

PAQ 115.31 (c)-3 CDOC confirmed that the frequency with which employees who may have contact with inmates receive refresher training on PREA requirements.

By examination this Auditor confirmed that a sample of CDOC/Bridgeport employees (12) completed refresher training yearly utilizing an electronic training platform. CDOC employees sampled were made aware of the agency's current sexual abuse and sexual harassment policies and procedures.

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

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

By examination this Auditor confirmed that a sample of CDOC/Bridgeport employees (12) completed refresher training yearly utilizing an electronic medium. CDOC employees sampled were made aware of the agency's current sexual abuse and sexual harassment policies and procedures and understand the training they received. Further, interviews with all random staff confirmed participating in yearly PREA training as required by CDOC policy. (See AD 6.12 Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention).

**Evidence relied upon:**

	<ol style="list-style-type: none"> <li>1. Pre-audit Questionnaire</li> <li>2. CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention (effective date 07/20/2015)</li> <li>3. Documentation review of Employee PREA Training Curriculum and Sign-in sheets</li> <li>4. Interviews with random staff (12)</li> </ol> <p><b>Conclusion:</b></p> <p>Based on the evidence relied upon in making the compliance determination for this standard, the Auditor's analysis and reasoning, and the Auditor's conclusions, this standard is determined to be compliant. This standard complies with all material requirements for the relevant period.</p>
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115.32	Volunteer and contractor training
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <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>115.32 (a)-1 CDOC confirmed that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response.</p> <p>PAQ 115.32 (a)-2 Bridgeport Correctional Center confirms that 36 volunteers and contractors who may have contact inmates have been trained in the agency's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response.</p> <p>According to the PCM, CDOC ensures that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention. A review of sample</p>

security clearances of contractors and volunteers confirms that contractors such as Yale AIDS Program and Community Mental Health Affiliates

**115.32 (b): Under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures. 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.**

PAQ 115.32 (b)-1 CDOC responded "no" that the level and type of training provided to volunteers and contractors is based on the services they provide and level of contact they have with inmates.

PAQ 115.32 (b)-2 Bridgeport Correctional Center confirmed that all volunteers (3) and contractors (3) who have contact with inmates have been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents.

**This Auditor reviewed the training curriculum for volunteers and contractors who may have contact with inmates. under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures. Sample of training records of volunteers and contractors who may have contact with inmates.**

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

PAQ 115.32 (c)-1 CDOC confirmed that the agency maintains documentation confirming that volunteers and contractors understand the training they have received.

**Evidence relied upon:**

1. Pre-audit Questionnaire
2. CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention (effective date 07/20/2015)
3. Volunteer PREA Training Curriculum and VIP Sign-in sheet Acknowledgements
4. VIP Volunteer Handbook
5. VIP PREA Handbook
6. VIP Safety and Security Training Orientation
7. Interviews with volunteers
8. Interviews with contractors

**Corrective Action:**

1. CDOC will provide this Auditor with a random sample of training records of volunteers and contractors trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response

	<p>policies and procedures.</p> <p><b>Conclusion:</b></p> <p>Based on the evidence relied upon in making the compliance determination for this standard, the Auditor's analysis and reasoning, and the Auditor's conclusions, this standard is determined to be compliant. This standard complies with all material requirements for the relevant period.</p>
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<b>115.33</b>	<b>Inmate education</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, is a crucial document ensuring staff's and inmates' safety and security. 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, collectively addresses the requirements of Standard 115.33.</p> <p>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.</p> <p>PAQ 115.33 (a)-1 Bridgeport Correctional Center confirmed that offenders 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.</p> <p>PAQ 115.33 (a)-2 Bridgeport Correctional Center confirmed that 3886 inmates admitted during the past 12 months were given this information at intake.</p> <p>The intake officer, a key figure in inmate education, was interviewed during the audit. Their role in conducting the intake process and explaining the orientation process for new inmates in Bridgeport was detailed. A sample of inmates, both targeted and random, was also interviewed. Each confirmed that they received PREA-related education during the intake process. This education included viewing a PREA video, reviewing a PREA pamphlet, learning about the agency's zero-tolerance policy, and how to report incidents or suspicions of sexual abuse or harassment. They also had a face-to-face interview with a Bridgeport intake officer and Case Manager in a private area. Notably, during the onsite portion of this audit, no inmates were transferred to Bridgeport or received a long-term placement at the facility.</p> <p>A sample of targeted and random inmates was also interviewed for this audit. The</p>

targeted group included inmates with cognitive challenges (2), low-vision (1), blind in one eye, Limited English Proficient (LEP) (1), and hearing impaired (1). Each inmate interviewed confirmed that during the intake process, they received PREA-related education information during the orientation process using a method they understood. Moreover, inmate education, such as viewing a PREA video, reviewing a PREA pamphlet provided in English and Spanish, learning about the agency's zero-tolerance policy regarding sexual abuse and sexual harassment, information on how to report incidents or suspicions of sexual abuse or sexual harassment, and a face-to-face interview by a Bridgeport intake officer in a private area. Bridgeport intake staff confirmed that they read written information aloud to accommodate persons with low-vision, blind, or limited reading skills. Mental health practitioners interviewed confirmed that inmates assigned to their caseloads with cognitive or functional challenges are provided educational information as needed.

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

PAQ 115.33 (b)-1 Bridgeport Correctional Center confirmed that 1354 inmates admitted during the past 12 months (whose length of stay in the facility was 30 days or more) received comprehensive education on their rights to be free from sexual abuse, sexual harassment, and retaliation for reporting such incidents and on agency policies and procedures for responding to such incidents within 30 days of intake.

During interviews with random and targeted inmates, all confirmed that understanding their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents and regarding agency policies and procedures for responding to such incidents. All inmates interviewed provided at least one method of reporting sexual abuse and sexual harassment, such as telling a trusted staff person (e.g., medical or mental health practitioners), contacting the Ombudsman's office, filing a grievance, and calling the hotline.

Zero inmates interviewed could recall specific information regarding how to contact local advocacy organizations for emotional support in the community. A review of inmate education provided by Bridgeport supports that inmates were provided contact information during the intake process, and the same or similar information lives on an electronic platform on their personal tablets. Further, during the onsite portion of this audit, zero inmates were transferred to Bridgeport or received a long-term placement at the facility.

Case Managers interviewed during the same audit confirmed that within 30 days, CDOC/Bridgeport provides a comprehensive education to inmates assigned to the facility or transferred. Likewise, the PCM confirmed information contained in PAQ 115.33 (b)-1 indicates the number of inmates admitted during the past 12 months (whose length of stay in the facility was 30 days or more) who received comprehensive education on 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 within 30 days of intake was 1354, equivalent to 100%.

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.

PAQ 115.33 (c)-1 Bridgeport Correctional Center confirmed that of those who were NOT educated (as stated in 115.33(b)-1) within 30 days of intake, all offenders have been educated subsequently. The facility commented, "all educated."

PAQ 115.33 (c)-2 Bridgeport Correctional Center confirmed that inmates will be educated within 30 days of intake.

PAQ 115.33 (c)-4 CDOC confirms that it has a policy that 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.

Through the interview process, all random and targeted inmates sampled confirmed being provided comprehensive education by Bridgeport staff during the intake process.

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.

PAQ 115.33 (d)-1 Bridgeport Correctional Center confirmed that offender PREA education is available in formats accessible to all inmates, including those who are limited English proficient.

PAQ 115.33 (d)-2 Bridgeport Correctional Center confirmed that the inmate PREA education is available in formats accessible to all inmates, including those who are deaf.

PAQ 115.33 (d)-3 Bridgeport Correctional Center confirmed that inmate PREA education is available in formats accessible to all inmates, including those who are visually impaired.

PAQ 115.33 (d)-4 Bridgeport Correctional Center confirmed that inmate PREA education is available in formats accessible to all inmates, including those who are otherwise disabled.

PAQ 115.33 (d)-5 Bridgeport Correctional Center confirmed that inmate PREA education is available in formats accessible to all inmates, including those with limited reading skills.

A sample of targeted and random inmates was also interviewed for this audit. The targeted group included inmates with cognitive challenges (2), low-vision (1), blind in one eye, Limited English Proficient (LEP) (1), and hearing impaired (1). Each inmate interviewed confirmed that during the intake process, they received PREA-related education information during the orientation process using a method they understood. The facility also provides over-the-phone interpretive services for inmates with limited English proficiency and requires a translator when bilingual staff is unavailable or an uncommon language is spoken by the inmate, such as Burmese or Mandarin Chinese. **Problematic:** Bridgeport omitted evidence of the availability of interpretative services besides bilingual staff. This substandard requires corrective action.

Moreover, inmate education, such as viewing a PREA video, reviewing a PREA pamphlet provided in English and Spanish, learning about the agency's zero-tolerance policy regarding sexual abuse and sexual harassment, information on how to report incidents or suspicions of sexual abuse or sexual harassment, and a face-to-face interview by a Bridgeport intake officer in a private area. During interviews with random and targeted inmates, zero recall specific information regarding how to contact local advocacy organizations for emotional support in the community. A pamphlet review indicated that the information was provided during the intake process and lives on an electronic platform on their personal tablets.

During the facility tour, this Auditor observed PREA-related signs and posters, including all living units. Moreover, signage was observed in medical and food services in common areas accessible to inmates, staff, and visitors. Posted in areas where staff and persons confined in the facility can read and retain the information provided (e.g., medical and mental health office areas, all living units). The signage was easily read and understandable, printed in English and Spanish. Posters provided contact information (toll-free telephone number) for persons seeking emotional support with a history of victimization if they needed it. While inmates interviewed (random and targeted) could not provide this Auditor with specific information about advocacy services during interviews, each confirmed knowing where they could find information about emotional support services in their living unit, which was located near the telephones in the living unit. Further, painted on walls in every living unit, this Auditor also noted contact information for external reporting and the CDOC hotline. This Auditor tested the CDOC hotline from the living units and confirmed a direct connection to this report source. All telephones tested were in good working order. All PREA-related signage, advocacy information, and third-party reporting access contact information, including the audit notices, were accurate.

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

PAQ 115.33 (e)-1 Bridgeport Correctional Center confirmed that the agency maintains documentation of inmate participation in PREA education sessions.

This substandard is **problematic** and requires corrective action. Bridgeport will upload the sample of inmates identified by the Auditor to validate inmate



participation in education sessions as outlined in Standard 115.33.

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

PAQ 115.33 (f)-1 CDOC confirmed that the agency ensures that key information about the agency's PREA policies is continuously and readily available or visible through posters, inmate handbooks, or other written formats.

During the facility tour, this Auditor confirmed that CDOC and Bridgeport provide continuous and readily available or visible to inmates through PREA-related posters, pamphlets, and inmate handbooks. Further, crucial information can also be accessed using personal tablets.

**Evidence relied upon:**

1. Pre-audit Questionnaire
2. CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention (effective date 07/20/2015)
3. CDOC Administrative Directive 9.3, Inmate Admissions, Transfers and Discharges (effective date 07/20/2015)
4. CDOC Administrative Directive 10.12, Initial Orientation (effective date 08/26/2015)
5. Facility tour
6. Interview with the CDOC Commissioner
7. Interview with Intake Staff
8. Interview with random offenders
9. Informal conversation with offenders
10. Testing the interpretive services
11. Examine a select number of intake records
12. Examine relevant PREA education (offender brochure)
13. Examine relevant education brochures on how to report sexual abuse or sexual harassment (offender posters)
14. Examine relevant how to contact outside entities for emotional services
15. Sample documentation of Offender records of receipt acknowledgment for PREA-related education
16. Examination of the agency interpretive contract
17. PREA-education brochure, termed Offender PREA Brochure, also called the Offender Student Information Brochure in English or Spanish

**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.

	<p>During this onsite portion of this audit, Bridgeport utilized staff proficient in Spanish to communicate with an LEP inmate during the audit process. CDOC will provide the Auditor with evidence of an agreement with an organization to provide on-demand language line access and interpretive services as outlined in this standard in whatever manner is available to the persons confined in the facility.</p> <p>115.33 (e): The agency shall maintain documentation of inmate participation in these education sessions. Bridgeport will provide the Auditor with evidence of compliance with this standard through randomly selected documentation of inmate participation in education sessions.</p> <p><b>Conclusion:</b></p> <p>Based on the evidence relied upon in making the compliance determination for this standard, the Auditor's analysis and reasoning, and the Auditor's conclusions, this standard is determined to be compliant. This standard complies with all material requirements for the relevant period.</p>
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<b>115.34</b>	<b>Specialized training: Investigations</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>Connecticut Department of Connecticut (CDOC) Administrative Directives 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Administrative Directive, Investigation of Sexual Abuse and Sexual Harassment, Administrative Directive 1.10, Investigations collectively address Standard 115.34.</p> <p>115.34 (a): In addition to the general training provided to all employees according to § 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.</p> <p>PAQ 115.34 (a)-1 CDOC confirmed that the agency policy requires that investigators be trained in conducting sexual abuse investigations in confinement settings.</p> <p>By examining training records and interviews with PREA investigators, this Auditor confirmed that CDOC PREA Unit investigator (3) completed specialized training in conducting PREA-related investigations in confinement settings and general PREA training as outlined in Standards 115.34 and 115.31. (See Administrative Directive 1.10, Investigations Section 11, page 6).</p> <p>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.</p>

CDOC Administrative Directive 1.10, Investigations directs training to include techniques for interviewing sexual abuse victims, sexual abuse evidence collection and handling, and the criteria and evidence required to substantiate an investigation. During his interview, the CDOC Captain of the PREA Unit confirmed that his training provided by the National Institute of Corrections (NIC) dated December 21, 2021, included 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. According to the National Institute of Corrections website, the purpose of the PREA: Investigating Sexual Abuse in a Confinement Setting course (NIC ID: 21ECCS2941) is to assist agencies in meeting the requirements of Prison Rape Elimination Act (PREA) Section 115.34 Specialized Training for Investigators. Further, at the end of this course, the participant could 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 115.31 and 115.34.

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

PAQ 115.34 (c)-1 CDOC confirmed that the agency maintains documentation showing that investigators have completed the required training.

PAQ 115.34 (c)-2 indicates that the number of investigators currently employed who have completed the required training was 3, as confirmed by the Captain of the PREA Unit and the PREA Coordinator.

Examining the certificate of completion (3) of training for PREA: Investigating Sexual Abuse in a Confinement Setting course (NIC ID: 21ECCS2941) confirms that CDOC maintains documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations.

Under a contractual Memorandum of Agreement (MOU) between the Connecticut Department of Corrections and the Connecticut State Police (CSP), The CSP conducts all criminal investigations according to Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention.

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 substandard.

**Evidence relied upon:**

1. Pre-audit Questionnaire
2. CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention (effective date 07/20/2015)

	<p>3. CDOC Administrative Directive 1.10, Investigations (effective date 09/17/2020)</p> <p>4. Interview with a facility investigators (3)</p> <p>5. Examination of NIC Curriculum</p> <p><b>Conclusion:</b></p> <p>Based on the evidence relied upon in making the compliance determination for this standard, the Auditor's analysis and reasoning, and the Auditor's conclusions, this standard is determined to be compliant. This standard complies with all material requirements for the relevant period.</p>
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115.35	Specialized training: Medical and mental health care
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Administrative Directive 2.7, Training and Staff Development, Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, In-Service Training, Administrative Directive 8.6, Credentials for Health Services Staff, Training of Health Services Staff address standard 115.35.</p> <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>PAQ 115.35 (a)-1 CDOC confirms that the agency has a policy related to the training of medical and mental health practitioners who work regularly in its facilities.</p> <p>PAQ 115.35 (a)-2 Bridgeport Correctional Center confirmed that 47 of the medical and mental health care practitioners who regularly work there received the training required by agency policy.</p> <p>PAQ 115.35 (a)-3 Bridgeport Correctional Center: The percentage of all medical and mental health care practitioners who regularly work at this facility and have received the training required by agency policy was 100 percent.</p> <p>By examination of the Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Administrative Directive 2.7, Training and Staff Development, Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, In-</p>

Service Training, Administrative Directive 8.6, Credentials for Health Services Staff, Training of Health Services Staff collectively address Standard 115.35. The applicable administrative directives mandate that 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.

For example, Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 8A, Inservice Training mandates direct contact employees to receive a minimum of 40 hours of in-service training annually, which includes PREA Refresher training. Section 8C, All Employees, requires all employees to receive refresher training on sexual abuse and sexual harassment prevention, intervention, and follow-up procedures annually. During the onsite portion of this audit, random and targeted staff sampled all confirmed completing PREA refresher training annually but at least every two years under PREA standards. In addition, CDOC Administrative Directive 8.6, Credentials for Health Services Staff, Training of Health Services Staff, directs full and part-time medical and mental health care practitioners who regularly work in CDOC-operated facilities to be trained in areas such as how to detect and assess signs of sexual abuse and sexual harassment; how to respond effectively and professionally to victims of sexual abuse and sexual harassment and how and to whom to report allegations or suspicions of sexual abuse.

This Auditor reviewed a list of all medical and mental health practitioners assigned to the facility. From a random sample of medical and mental practitioners, CDOC training records were examined from the Frances H. Maloney Center for Training and Staff Development attendance records. The training records confirmed training completed by Bridgeport medical and mental health practitioners during this reporting period under Program Number HSU-23-07, dated from 8/14/23 to 12/22/23. Further, each medical and mental practitioner interviewed during the onsite portion of this audit confirmed completing the required training as indicated 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.

PAQ 115.35 (b)-1 Bridgeport answered "no" that the agency medical staff at this facility conducts forensic medical exams.

During the onsite portion of this audit, the Auditor interviewed a medical practitioner who denied conducting forensic examinations; therefore, appropriate training is not required by this standard. The medical practitioner explained that SANE examinations are conducted at a local hospital under a contractual agreement with a trained SANE examiner. As confirmed during an interview with a medical practitioner, PAQ 115.35 (b)-1 asks if agency medical staff at Bridgeport conducts forensic medical exams, and Bridgeport answered no to this question.

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.

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

As indicated in Standard 115.35 (a) paragraph 4, reviewing training materials confirms compliance with the requirements outlined in Standard 115.35. Further, a review of CDOC training records from the Frances H. Maloney Center for Training and Staff Development attendance records also confirms training completed by medical and mental health practitioners, Program Number HSU-23-07, from 8/14/23 to 12/22/23.

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.

As indicated in Standard 115.35 (a) paragraph 4, reviewing training materials confirms compliance with the requirements outlined in Standard 115.35. Further, a review of CDOC training records from the Frances H. Maloney Center for Training and Staff Development attendance records also confirms training completed by medical and mental health practitioners, Program Number HSU-23-07, dated from 8/14/23 to 12/22/23. Training records examined from 8/14/23 to 12/22/23 include medical practitioners, both full-time employees and part-time contractors working as medical and mental health practitioners. This Auditor confirmed that Bridgeport medical and mental health practitioners completed specialized and annual refresher training outlined in CDOC policies and procedures and this standard. According to the PCM, zero medical or mental health care practitioners volunteered for the agency and were assigned to Bridgeport during this reporting period.

**Evidence relied upon:**

1. Pre-audit Questionnaire
2. CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention (effective date 07/20/2015)
3. Administrative Directive 2.7, Training and Staff Development (effective date 08/01/2014)
4. Administrative Directive 8.6, Credentials for Health Services Staff (effective date 08/29/2014)
5. Interview with a medical practitioner (contractor - 1)
6. Interview with a mental health practitioner (contractor)
7. Examination of training record for medical practitioner
8. Examination of training record for a mental health practitioner
9. Examination of a list of medical and mental health practitioners and a select sample of training documentation

	<p><b>Conclusion:</b></p> <p>Based on the evidence relied upon in making the compliance determination for this standard, the Auditor's analysis and reasoning, and the Auditor's conclusions, this standard is determined to be compliant. This standard complies with all material requirements for the relevant period.</p>
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<b>115.41</b>	<b>Screening for risk of victimization and abusiveness</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>Connecticut Department of Correction, Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Connecticut Department of Corrections, Administrative Directive 9.3, Inmate Admissions, Transfers and Discharges, PREA Screening of Inmates Transferred Between Facilities, CDOC HR001 Intake Screening Form and CDOC and CN 9306 PREA Screening Form address Standard 115.41.</p> <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>PAQ 115.41 (a)-1 Bridgeport Correctional Center confirmed that the agency has a policy that requires screening (upon admission to a facility or transfer to another facility) for risk of sexual abuse victimization or sexual abusiveness toward other inmates.</p> <p>CDOC has policies that require screening (upon admission to a facility or transfer to another facility) for risk of sexual abuse victimization or sexual abuse toward other inmates. Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 11, mandates that inmates be assessed for risk of victimization and abusiveness toward others upon entry or transfer to another facility. A companion to Administrative Directive 6.12 is Administrative Directive 9.3, Inmate Admissions, Transfers, and Discharges, Section 7, PREA Screening of Inmates Transferred Between Facilities similarly directs all facilities to assess inmates during intake, upon transfer or placement in another facility for risk of being sexually abusiveness or being sexually abusive toward other inmates.</p> <p>115.41 (b): Intake screening shall ordinarily occur within 72 hours of arrival at the facility.</p> <p>PAQ 115.41 (b)-1 Bridgeport Correctional Center confirmed that 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.</p>

PAQ 115.41 (b)-2 Bridgeport Correctional Center confirmed that 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 was 2454.

The policies require that inmates be screened for risk of sexual victimization or risk of sexually abusing other inmates within 72 hours of their intake. Moreover, Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 11, mandates that inmates be assessed for risk of victimization and abusiveness toward others upon entry or transfer to another facility. A companion to Administrative Directive 6.12 is Administrative Directive 9.3, Inmate Admissions, Transfers, and Discharges, Section 7, PREA Screening of Inmates Transferred Between Facilities similarly directs facilities to conduct all intake screening for risk of victimization or abusiveness within 72 hours of the inmates arrive. It should be noted that CDOC policies mandate that risk screening take place not later than 72 hours, as outlined in Standard 115.41.

To determine full compliance with this substandard, the Auditor interviewed a sample of random and targeted inmates during the on-site portion of the audit. CDOC policies direct facilities to document intake screening using the HR001 Intake Screening Form. (See Administrative Directive 9.3, Inmate Admissions, Transfers, and Discharges, Section 7, PREA Screening of Inmates Transferred Between Facilities). According to intake staff interviewed, during the process, inmates are screened by using A.D.9.3, Attachment- B Intake Health Screening (HR 001) form and CN 9306 Inmate Intake Form. During inter-facility transfer, inmates shall be screened by qualified staff members using A.D. 9.3, Attachment- I Transfer Summary (HR 005) form, and CN 9306/2 Inmate Intake Form. Staff Responsible for Risk Screening confirmed during an interview with the Auditor that intake screening occurs within 72 hours of the arrival at the facility. Random and targeted inmates sampled during the audit: (1) within 48 hours,(6) inmates did not recall the time frame, (10) inmates indicated the same day, (1) never, (6) within 24 hours, and (2) indicated 10 days or more. Problematic, a sample of records of inmates who have been victims or perpetrators of sexual abuse for confirmation of reassessment within 72 hours of their intake was omitted. This substandard requires corrective action.

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

PAQ 115.41 (c)-1 Risk assessment is conducted using an objective screening instrument as confirmed by the Bridgeport PCM and PAQ response.

Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 11, directs facilities risk screening instruments to ensure that each item prescribed by the PREA standard is included/assessed. To meet the standard's requirements, the screening should use all criteria (1-10) to determine risk. By examining Administrative Directive 6.12, this Auditor confirmed a policy mandate for the requirements to assess inmates upon transfer or placement in



Bridgeport to include all factors outlined in Standard 115.41, such as age, physical build, history of previous incarceration, and history of prior victimization.

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 perception of vulnerability; and (10) Whether the inmate is detained solely for civil immigration purposes.

Risk screening should consider all criteria (1–10) to meet the standard's requirements to determine the risk of victimization or abusiveness. By examining Administrative Directive 6.12 and Administrative Directive 9.3, Inmate Admissions, Transfers and Discharges, Section 7, A-3, page 8, PREA Screening of Inmates Transferred Between Facilities, this Auditor confirmed that CDOC has policies mandating a requirement to assess inmates upon transfer or placement in secure facilities include all factors outlined in Standard 115.41, such as age, physical build, history of previous incarceration, and history of prior victimization. This risk screening shall be completed and documented on the CN 9306 PREA Screening Form. **Problematic** evidence of the completion of an objective risk of sexual victimization or risk of sexually abusing other inmates was omitted. This substandard requires corrective action.

115.41 (e): The initial screening shall consider prior acts of sexual abuse, previous 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.

Risk screening should consider all criteria (1–10) to meet the standard's requirements to determine the risk of victimization or abusiveness. By examining Administrative Directive 6.12 and Administrative Directive 9.3, Inmate Admissions, Transfers and Discharges, Section 7, A-3, page 8, PREA Screening of Inmates Transferred Between Facilities, this Auditor confirmed that CDOC has policies mandating a requirement to assess inmates upon transfer or placement in secure facilities include all factors outlined in Standard 115.41, such as prior acts of sexual abuse, previous 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. **Problematic** evidence of the completion of an initial screening was omitted. This substandard requires corrective action.

115.41 (f): Within a set 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. Problematic evidence of the completion of risk of sexual victimization or risk of sexually abusing other inmates was omitted. This substandard

requires corrective action.

PAQ 115.41(f)-1 Bridgeport Correctional Center confirmed that the facility has a policy that 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.

PAQ 115.41 (f)-2 In the past 12 months, the Bridgeport Correctional Center confirmed that 1354 offenders entered the facility through intake or transfer and stayed for 30 days or more. Within 30 days of their arrival, these offenders were reassessed for their risk of sexual victimization or being sexually abusive based on any additional, relevant information received since intake.

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. **Problematic** evidence of the completion of risk of sexual victimization or risk of sexually abusing other inmates was omitted. This substandard requires corrective action.

PAQ 115.41 (g)-1 CDOC confirms having a policy that requires that an offender'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 offender's risk of sexual victimization or abusiveness.

115.41 (h): Inmates may not be disciplined for refusing to answer or for not disclosing complete information in response to questions asked under paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section.

PAQ 115.41 (h)-1 CDOC confirms that the agency has a policy that 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.

CDOC, Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention Section 11, indicates inmates shall not be disciplined for refusing to answer or for not disclosing complete information in response to questions asked under Section III.B.3. During an interview with intake staff he denied inmates being disciplined for refusing to answer or for not disclosing complete information in response to questions asked under paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section. Targeted and random inmates (26) sampled denied being disciplined for refusing to answer or for not disclosing complete information in response to questions asked under paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section.

115.41 (i): The agency shall implement appropriate controls on disseminating responses to questions asked under this standard to ensure that sensitive information

is not exploited to the inmate's detriment by staff or other inmates.

According to CDOC, Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention Section 11, Screening for Risk and Abusiveness and subsection B, After Intake to the Facility, indicates staff shall use appropriate controls to disseminate responses to questions asked under this plan within the units, ensuring that sensitive.

Information is not exploited to the detriment of any offender by staff or other offenders. Interviews with medical and mental health practitioners separately confirm a password-protected system where access to electronic and physical records access is strictly limited. Likewise, the intake officer confirmed that access to sensitive PII is limited and controlled. During the facility tour, this Auditor observed physical storage areas for sensitive information/documentation inside doors and file cabinets with locks and limited key access. Informal conversations with Bridgeport random staff confirmed access to sensitive information, such as medical and mental health files, sexual abuse, and sexual harassment reports, is stored on the electronic medical record, which is password protected, with, restricted access based on a need.

**Evidence relied upon:**

1. Pre-audit Questionnaire
2. CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention (effective date 07/20/2015)
3. CDOC Administrative Directive 9.3, Inmate Admissions, Transfers and Discharges (effective date 07/20/2015)
4. PREA Screening of Inmates Transferred Between Facilities
5. CDOC HR001 Intake Screening Form
6. CDOC CN 9306 PREA Screening Form
7. Interview with staff responsible for risk screening
8. Interview with a select group of offenders
9. Examination of a select group of records of offenders admitted to the facility in the past 12 months for evidence of appropriate screening within 72 hours
10. **Review of the risk screening instrument (10 criteria) to assess risk**
11. Offender assessment reviews
12. Offender assessment reassessments
13. Sample of records (15) of offenders who were victims or perpetrators of sexual abuse for confirmation of reassessment
14. Interview with the PREA Coordinator
15. Interview with the PREA Compliance Manager

**Corrective Action:**

1. 115.41 (b): Intake screening shall ordinarily occur within 72 hours of arrival at the facility. Problematic evidence of the completion of risk of sexual victimization or risk of sexually abusing other inmates within 72 hours of their

	<p>intake was omitted.</p> <ol style="list-style-type: none"> <li>2. 115.41 (c): Such assessments shall be conducted using an objective screening instrument.</li> <li>3. 115.41 (d): The intake screening shall consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization:</li> <li>4. 115.41 (e): The initial screening shall consider prior acts of sexual abuse, previous 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.</li> <li>5. 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.</li> </ol> <p><b>Conclusion:</b></p> <p>Based on the evidence relied upon in making the compliance determination for this standard, the Auditor's analysis and reasoning, and the Auditor's conclusions, this standard is determined to be compliant after corrective action. This standard complies with all material requirements for the relevant period.</p>
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<b>115.42</b>	<b>Use of screening information</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>Connecticut Department of Correction, Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment, Prevention and Intervention Section, Use of Screening Information, Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment, Prevention and Intervention Section 11, Transgender and Intersex Inmates collectively address this standard.</p> <p>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 to keep separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive.</p> <p>PAQ 115.42 (a)-1 CDOC/BCC confirmed it 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.</p>

CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention Section 11, Use of Screening Information, directs facilities to use information from the risk screening as required in Standard 115.41 to inform housing, bed, work, education, and program assignment decision, to separate inmates with risk of being sexually victimized from inmates risk of being sexually abusive. Interviews with staff responsible for risk screening and intake staff separately detailed how risk screening information informed decisions regarding inmate placement in programming, housing, bed, work, education, and sexual safety. **Problematic** evidence omitted (e.g., risk screening documents) in 115.41 impacts Standard 115.42. this standard requires corrective action.

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

PAQ 115.42 (b)-1 CDOC/Bridgeport confirms that the facility makes individualized determinations about how to ensure the safety of each inmate.

According to the PCM, CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention Section 11, Use of Screening Information, indicates the committee shall make individualized determinations regarding how to ensure the safety of each inmate. **Problematic** evidence omitted (e.g., risk screening documents) in 115.41 impacts Standard 115.42. this standard requires corrective action.

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.

CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention Section 11, Transgender and Intersex Inmates, indicates in deciding to assign a transgender or intersex inmate to a unit for male or female inmates, and when making other housing and programming assignments, CDOC will consider on a case-by-case basis about the health and safety of the inmate and management or security problems. Housing determinations shall not be made solely based on gender identity status. The PREA Coordinator confirmed that CDOC does not place lesbian, gay, bisexual, transgender, or intersex inmates in dedicated facilities, units, or wings solely based on such identification or status unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment to protect such inmates. During the onsite portion of this audit, zero transgender or intersex inmates were identified by the facility. This Auditor also interviewed unit counselors and medical and mental health practitioners to determine if inmates from the targeted population (e.g., Transgender/Intersex/Gay/Lesbian Inmates) could be identified in the Bridgeport population. The review results shall be documented on the inmate classification history form in section 5 of the inmate master file. A transgender or intersex inmate's own views with respect to his or her own safety shall be given serious consideration.

**Problematic evidence to confirm compliance with this standard was omitted (e.g., risk screening documents) in 115.41 impacts Standard 115.42. this standard requires corrective action.**

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 11, Transgender and Intersex Inmates, indicates that 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. During Interviews with social service staff, confirmed when a transgender or intersex inmate is placed at Bridgeport, case managers are responsible for reassessing the inmates at least twice each year to review any threats to safety experienced by the inmate. The review results shall be documented on the inmate classification history form in section 5 of the inmate master file.

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

CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention Section 11, Transgender and Intersex Inmates, indicates that transgender or intersex inmates' own views with respect to or their own safety shall be given serious consideration. A unit counselor, during an interview with the Auditor, confirmed that transgender or intersex inmates' own views with respect to their own safety should be given serious consideration. Intake staff/staff responsible for risk screening also confirmed during an interview that transgender or intersex inmates' own views with respect to their own safety should be given serious consideration. During the onsite audit, zero intersex or transgender inmates were identified to be included in the targeted sample of inmates.

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 11, Transgender and Intersex Inmates, indicates that inmates identified as transgender, or intersex would be given the opportunity to shower separately from other inmates. Showers at Bridgeport are small single-person showers, which allows all inmates to shower separately. The showers are in the main hallways, visible sightlines to the control center, and privacy is protected by PREA-friendly shower curtains. Interviews with random and targeted inmates confirmed all inmates shower separately in single-person showers. Interviews with random staff confirmed that a transgender or intersex inmate would be given a separate shower time from the others on the living unit to allow movement to and from the shower.

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 to protect such inmates.

According to CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention Section 11, Transgender and Intersex Inmates, 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 to protect such inmates. During an interview with the PREA Coordinator, he confirmed that CDOC does not operate 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 to protect such inmates. During the facility tour, this Auditor did not observe dedicated living units solely for wings solely based on such identification or gender identity status.

**Evidence relied upon:**

1. Pre-audit Questionnaire
2. CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention (effective date 07/20/2015)
3. Interview with staff responsible for risk screening
4. Interview with the PREA Coordinator
5. Interview with the PREA Compliance Manager
6. Interviews with transgender offenders

**Corrective Action:**

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 to keep separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive.

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

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.

**Conclusion:**

Based on the evidence relied upon in making the compliance determination for this standard, the Auditor's analysis and reasoning, and the Auditor's conclusions, this standard is determined to be compliant after corrective action. This standard complies with all material requirements for the relevant reporting period.

115.43	Protective Custody
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Connecticut Department of Connecticut, Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 11 addresses this standard.</p> <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>PAQ 115.43 (a)-1 CDOC confirmed that 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 and a determination has been made that there is no available alternative means of separation from likely abusers.</p> <p>By examination, this Auditor determined that CDOC 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 and a determination has been made that there is no available alternative means of separation from likely abusers, Administrative Directive 6.12, Inmate Sexual Abuse/ Sexual Harassment Prevention and Intervention, Section 11.</p> <p>As confirmed by the PCM and staff who supervise Inmates in segregated housing in separate interviews, 115.43 (a)-2, 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 assessment during this reporting period was zero. Likewise, during the facility tour, this Auditor toured segregation to conduct informal conversations with inmates housed in segregation. After introductions, zero inmates requested to speak with the Auditor. Zero inmates were formally interviewed regarding compliance with this standard. Zero inmates were assigned to segregated housing for risk of sexual victimization/who allege to have suffered sexual abuse.</p> <p>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. Suppose the facility restricts access to programs, privileges, education, or work opportunities. In that case, 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>As confirmed by the PCM and staff who supervise Inmates in segregated housing in separate interviews, inmates placed in segregated housing for this purpose would</p>



have access to programs, some privileges, and education, but not work opportunities. If programs, privileges, education, or other opportunities are restricted, staff who supervise segregation indicated the restriction would be documented in the unit logbook.

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.

PAQ 115.43 (c)-1 Bridgeport Correctional Center confirmed that in the past 12 months, the number of inmates at risk of sexual victimization who were assigned to involuntary segregated housing for longer than 30 days while awaiting alternative placement was zero.

Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention Section 11 Screening for Risk and Abusiveness indicates the facility shall assign such inmates to involuntary restrictive housing or segregation on Administrative Detention status only until an alternative means of separation from likely abusers can be arranged. Such an assignment shall be, at most, 30 days. Suppose an involuntary restrictive housing assignment is made. In that case, 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 separate interviews, the Captain of the PREA Unit and the Warden each confirmed PAQ 115.43 (c)-1. In the past 12 months, the number of inmates at risk of sexual victimization who were assigned to involuntary segregated housing for longer than 30 days while awaiting alternative placement was zero. A review of investigative reports for this reporting period also supports information contained in PAQ 115.43 (c)-1. Zero records for length of placement in segregated housing for those at risk of sexual victimization were reviewed by the Auditor. Zero inmates were placed in involuntary segregated housing only until an alternative means of separation from likely abusers could be arranged during this reporting period. Zero inmates were placed in involuntary segregated housing for a period that does not ordinarily exceed 30 days during this reporting period.

115.43 (d): If an involuntary segregated housing assignment is made pursuant to 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.

PAQ 115.43 (d)-1 Bridgeport Correctional Center confirmed that the number of offenders case files (Delta) at risk of sexual victimization and held in involuntary segregated housing in the past 12 months, was zero.

Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention Section 11 Screening for Risk and Abusiveness indicates that if an involuntary restrictive housing assignment decision is made, during separate

interviews, the Captain of the PREA Unit and the Warden each confirmed the facility would 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. Every 30 days, the facility shall review the circumstances to determine whether there is a continuing need for separation from the general population. Records for the length of placement in segregated housing for those at risk of sexual victimization were not reviewed during this audit. In the past 12 months, the number of inmates at risk of sexual victimization who were assigned to involuntary segregated housing for longer than 30 days while awaiting alternative placement was zero.

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.

PAQ 115.43 (e) - 1 Bridgeport Correctional Center confirmed that if an involuntary segregated housing assignment is made, the facility reviews each such offender every 30 days to determine whether there is a continuing need for separation from the general population.

Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention Section 11 Screening for Risk and Abusiveness indicates that if an involuntary restrictive housing assignment decision is made, during separate interviews, the Captain of the PREA Unit and the Warden each confirmed the facility would conduct an inmate placement status review, to determine the need to continue separating the inmate in segregation from other inmates in the general population and explore additional alternative placements for housing. In the past 12 months, the number of inmates at risk of sexual victimization who were assigned to involuntary segregated housing for longer than 30 days while awaiting alternative placement was zero.

According to the Captain of the PREA Unit zero inmates were placed in segregation during this review period.

**Evidence relied upon:**

1. Pre-audit Questionnaire
2. CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention (effective date 07/20/2015)
3. Interview with the facility Warden
4. Interview with the facility PREA Compliance Manager
5. Interview with staff who supervise offenders in segregation
6. Informal interviews with offenders in segregation
7. Facility tour and observations to include segregation (RHU)

**Conclusion:**

Based on the evidence relied upon in making the compliance determination for this standard, the Auditor's analysis and reasoning, and the Auditor's conclusions, this standard is determined to be compliant. This standard complies with all material

	requirements for the relevant period.
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<b>115.51</b>	<b>Inmate reporting</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, Sections 10-13, and Administrative Directive 6.6 Inmate Reporting addresses this standard.</p> <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>PAQ 115.51 (a)-1 CDOC confirmed that 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.</p> <p>By examining PREA posters (CDOC PREA Zero Tolerance Posters (English/Spanish)) and advocacy information posted on all living units, reviewing inmate educational pamphlets, and touring inmate living units and staff and inmate common areas, this Auditor determined that CDOC allows 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. PREA Zero Tolerance Posters, reporting signage, and contact information for emotional support are posted throughout the facility were colorful and easily read/accessible to inmates in all living units and throughout the facility. Signage specific to services, such as emotional support services and external reporting, contained language that details what services are available and for what purposes. PREA posters and contact information for the Auditor were determined to be accurate information and consistent throughout the facility. Further advocacy information was observed posted near the telephones, and the font size was readable and accommodating to most inmates in the population. This Auditor observed no damage to PREA-related posters or victim advocacy information. or contact information for third-party reporting.</p> <p>Further, during the interview process with staff (e.g., random and specialized), this Auditor asked staff to describe methods to report sexual abuse and sexual harassment to CDOC authorities. Staff response included options such as using the hotline, notifying the CSP, face-to-face meetings, and completing an incident report.</p>

The same staff confirmed during interviews that they are not required to notify an accused staff person in their chain of command, even a direct supervisor, of an allegation of abuse or harassment. All staff and all inmates provided at least one method of reporting. The Auditor tested the hotline reporting system from the living units and communicated with a hotline representative who accepted the calls.

According to random and targeted inmates, internal ways 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 include telling a trusted staff person, verbal or written communication, contacting the Connecticut State Police (CSP) \*9333# and using the confidential toll-free PREA Investigation Hotline \*9222#, (See CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention Section 10, Inmate Education and Bridgeport Inmate Handbook PREA ).

Inmates' accessibility to writing instruments was determined through informal conversation (e.g., paper, writing instruments, sexual abuse, and sexual harassment reporting form(s)). Most inmates sampled confirmed utilizing electronic tablets to communicate with authorities, outside entities, family, and friends.

During the facility tour, receptacles such as locked grievances and mailboxes were observed in locations inmates frequented daily. Inmates in segregation indicated that upon request, they would be given writing instruments unless noted otherwise in the unit logbook due to suicidal ideations or as outlined in an individualized behavioral safety plan. Through informal interviews, some inmates (3) in segregation indicated they would either hold their written allegations of sexual abuse or sexual harassment until shower or recreation time and drop it in the appropriate locked box or give the written allegation to a unit team manager or medical or mental health practitioner during their daily rounds on the unit. Receptacles are in areas accessible to all persons confined to the facility. Key access to the general mailboxes around the facility is limited to mailroom staff or facility official(s). Moreover, inmate help requests for medical and mental health practitioners are limited to medical staff or designated facility official(s).

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.

PAQ 115.51 (b)-1 CDOC confirmed that 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.

PAQ 115.51 (b)-2 CDOC confirmed that 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.

CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention Section 10, Inmate Education, provides at least one way for inmates to report abuse and harassment to a public entity that is not a part of the agency.

Further, the Bridgeport Inmate Handbook indicates sexually abused and/or harassed inmates can only be disciplined or prosecuted if the incident is reported to authorities. Victims of sexual abuse or sexual harassment should report the incident immediately to any facility staff. The employee (First Responder) to whom the inmates make the report will take immediate action to ensure the victim's safety and will promptly document the report in writing. The First Responder will appropriately notify correctional managers through the facility chain of command, and CSP will be notified if appropriate.

Interviews with random and targeted inmates confirmed that each inmate could provide the Auditor with at least one example of how to report abuse and harassment to a public entity other than the agency, such as using the toll-free \*9333# or calling the Connecticut State Police. (See the attached CSP/CDOC MOU.)

According to the PREA Coordinator, CDOC/Bridgeport does not detain inmates solely for civil immigration purposes.

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

PAQ 115.51 (c)-1 CDOC, 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.

PAQ 115.51 (c)-2 Bridgeport Correctional Center confirmed that staff are required to document verbal reports.

CDOC's policy directs staff to accept reports made verbally, in writing, anonymously, and from third parties and to document any verbal reports promptly. 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, which indicates staff shall accept reports made verbally, in writing, anonymously, and from third parties and shall promptly document any verbal reports.

All staff sampled during the audit confirmed a duty to accept sexual abuse and sexual harassment reports made verbally, in writing, using tablets, anonymously, and from third parties and to document any verbal reports promptly. Specialized staff (e.g., medical and mental health practitioners) also confirmed a duty under their occupational responsibility as mandated reporters of sexual abuse.

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

PAQ 115.51 (d)-1 CDOC confirmed that the agency has established procedures for staff to privately report sexual abuse and sexual harassment of inmates.

CDOC has established procedures for staff to report sexual abuse and sexual harassment of inmates privately. PAQ 115.51 (d)-2 indicates that staff are informed of these procedures in the following ways: AD 6.12 and training. **According to Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention Section 13, Staff Monitoring and Intervention (Sexual Abuse) Inmate and Third-Party Reporting of Sexual Abuse and Sexual Harassment, and Administrative Directive 6.6 Reporting of Incidents.** All staff sampled during the audit provided the Auditor with methods to privately report sexual abuse and sexual harassment, such as calling the PREA Investigation Hotline (770-743-7783) and contacting the Connecticut State Police. All staff sampled indicated a willingness to immediately notify a supervisor and request a face-to-face meeting if the supervisor was not the object of the allegation instead of calling the PREA Investigation Hotline (770-743-7783) and contacting the Connecticut State Police.

**Evidence relied upon:**

1. Pre-audit Questionnaire
2. CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention (effective date 07/20/2015)
3. Administrative Directive 6.6 Reporting of Incidents (effective date 10/01/2018)
4. Examination of the offender brochure
5. Examination of the staff brochure
6. Interview with random staff
7. Interview with random offenders
8. Facility tour
9. Observation of signage throughout the facility regarding contacting outside emotional support services
10. Observation of signage for how to sexual abuse and sexual harassment internally
11. Observation of signage throughout the facility contact information for the Ombudsman Bureau
12. Internal testing of the telephone system
13. Internal testing of outside entities using electronic methods (tablets)
14. Observation of mail receptacles

**Conclusion:**

Based on the evidence relied upon in making the compliance determination for this standard, the Auditor's analysis and reasoning, and the Auditor's conclusions, this standard is determined to be compliant. This standard complies with all material requirements for the relevant period.

115.52	Exhaustion of administrative remedies
	<p data-bbox="256 185 959 219"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="256 264 544 297"><b>Auditor Discussion</b></p> <p data-bbox="256 383 1461 539">Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, and the CDOC/Bridgeport Inmate Handbook PREA Supplement addresses this standard.</p> <p data-bbox="256 577 1406 656">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.</p> <p data-bbox="256 694 1477 976">PAQ 115.52 (a) - 1 asks if CDOC has an administrative procedure for dealing with inmate grievances regarding sexual abuse. CDOC answered no. The PREA Coordinator acting as the agency designee confirmed PAQ 115.52 (a); therefore, CDOC is exempt from this standard because it does not have an administrative procedure to address inmate grievances regarding sexual abuse through the administrative remedy procedure. (See Administrative Directive 6.12 Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention and Bridgeport Inmate Handbook.)</p> <p data-bbox="256 1014 1469 1339">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 attempt otherwise 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 because the applicable statute of limitations has expired.</p> <p data-bbox="256 1377 1461 1496">N/A – See Provision (a) for details. Standard 115.52 asks if CDOC has an administrative procedure for dealing with inmate grievances regarding sexual abuse. CDOC answered no</p> <p data-bbox="256 1534 1469 1697">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.</p> <p data-bbox="256 1736 1461 1854">N/A – See Provision (a) for details. Standard 115.52 asks if CDOC has an administrative procedure for dealing with inmate grievances regarding sexual abuse. CDOC answered no</p> <p data-bbox="256 1892 1469 2089">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 days 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 average period for response is insufficient to make an</p>

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 the reply, including any properly noticed extension, the inmate may consider the absence of a response to be a denial at that level.

N/A – See Provision (a) for details. Standard 115.52 asks if CDOC has an administrative procedure for dealing with inmate grievances regarding sexual abuse. CDOC answered no

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.

N/A – See Provision (a) for details. Standard 115.52 asks if CDOC has an administrative procedure for dealing with inmate grievances regarding sexual abuse. CDOC answered no

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.

N/A – See Provision (a) for details. Standard 115.52 asks if CDOC has an administrative procedure for dealing with inmate grievances regarding sexual abuse. CDOC answered no

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.

N/A – See Provision (a) for details. Standard 115.52 asks if CDOC has an administrative procedure for dealing with inmate grievances regarding sexual abuse. CDOC answered no



	<p><b>Evidence relied upon:</b></p> <ol style="list-style-type: none"> <li>1. Pre-audit Questionnaire</li> <li>2. CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention (effective date 07/20/2015)</li> <li>3. CDOC/Bridgeport Inmate Handbook</li> <li>4. Interview with offenders who reported sexual abuse</li> </ol> <p><b>Conclusion:</b></p> <p>Based on the evidence relied upon in making the compliance determination for this standard, the Auditor's analysis and reasoning, and the Auditor's conclusions, this standard is determined to be compliant. This standard complies with all material requirements for the relevant period.</p>
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<b>115.53</b>	<b>Inmate access to outside confidential support services</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 10, Inmate Education, Administrative Directive 10.7, Inmate Communication, Connecticut State Police (MOU), the Connecticut Alliance to End Sexual Violence, and the CDOC/ Bridgeport Inmate Handbook address this standard.</p> <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>PAQ 115.53 (a)-1 Bridgeport Correctional Center confirmed that the facility provides inmates with access to outside victim advocates for emotional support services related to sexual abuse.</p> <p>PAQ 115.53 (a)-2 Bridgeport Correctional Center confirmed that 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.</p> <p>PAQ 115.53 (a)-3 Bridgeport Correctional Center confirmed that the facility provides inmates with access to such services by giving inmates mailing addresses and</p>

telephone numbers (including toll-free hotline numbers where available) for immigrant services agencies for persons detained solely for civil immigration purposes.

PAQ 115.53 (a)-4 Bridgeport Correctional Center confirmed that 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.

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.

Bridgeport 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.

Further, telephones were tested by calling the outside emotional support service provider, Connecticut Alliance to End Sexual Violence, to determine if the phones were operational. As the Auditor entered some living units, inmates used phones to make personal calls. The phone call was toll-free. The phone number listed for Connecticut Alliance to End Sexual Violence matched the number used to connect with the victim organization that provides statewide community emotional support services. The phone was answered by a live service representative in Milford, Connecticut. The representative provided information about the routing system. 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 Bridgeport victim advocacy organization closest to Bridgeport is The Center for Family Justice. 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 throughout Connecticut. **During this reporting period, one incident involved allegations of sexual abuse. The inmate involved/victim was no longer assigned to Bridgeport.**

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.

PAQ 115.53 (b)-1 Bridgeport Correctional Center confirmed that the facility informs inmates, prior to giving them access to outside support services, the extent to which

such communications will be monitored.

PAQ 115.53 (b)-2 Bridgeport Correctional Center confirmed that 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.

During the facility tour, this Auditor tested the telephone system. The telephone system advises callers that calls may be monitored. Administrative Directive 10.7, Inmate Communication, Recording, and Listening, details telephone access, general provisions, restrictions, and guidelines for inmates in Special Management. Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, indicates that inmates shall be informed, before giving them access, of the extent to which these communications will be monitored and how reports of abuse will be forwarded to authorities under mandatory reporting laws. Further, PAQ 115.53 (b)-1 Bridgeport indicates that inmates are informed on how much such communications will be monitored before giving them access to outside support services. All inmates sampled (random and targeted) confirmed that telephones are being monitored and are put on notice before making a call. CDOC Notification and Acknowledgement for Inmates indicates that an inmate has been advised the Commissioner of Corrections has adopted regulations about mail and telephone use and that regulations are contained in Sections 18-81-28 through 18-81-51 of the Regulation of Connecticut State Agencies such as Inmate use of telephones, call to privileged correspondents, listening to non-recorded telephone calls, incoming and outgoing general correspondence, tablet communication and video visitation. All inmates are required to acknowledge and sign an understanding of the guidelines.

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 agreements or documentation showing attempts to enter into such agreements.

PAQ 115.53 (c)-1 CDOC confirmed maintaining a memorandum of understanding (MOUs) or other agreements with community service providers that are able to provide inmates with emotional support services related to sexual abuse.

PAQ 115.53 (c)-2 CDOC confirmed that the agency or facility maintains copies of those agreements.

The agency PREA Coordinator confirmed during an interview that CDOC maintains a memorandum of understanding (MOU) with victim advocacy community service providers that can 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

	<p>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 Bridgeport victim advocacy organization closest to Bridgeport is The Center for Family Justice. 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.</p> <p><b>Evidence relied upon:</b></p> <ol style="list-style-type: none"> <li>1. Pre-audit Questionnaire</li> <li>2. CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention (effective date 07/20/2015)</li> <li>3. CDOC Administrative Directive 10.7, Inmate Communication (effective date 12/16/2022)</li> <li>4. Review of MOU with the Connecticut State Police</li> <li>5. Review of MOU with the Connecticut Alliance to End Sexual Violence</li> <li>6. CDOC/ Bridgeport Inmate Handbook</li> <li>7. Interview with an offender who reported sexual abuse</li> <li>8. Interviews with random offenders</li> <li>9. Facility tour</li> <li>10. Observation of signage (PREA-related)</li> <li>11. Test telephones on the living unit for monitoring alert</li> <li>12. Testing telephones to determine if they were operational (access to outside emotional support services)</li> <li>13. Review of the agency's E-contract for emotional services</li> </ol> <p><b>Conclusion:</b></p> <p>Based on the evidence relied upon in making the compliance determination for this standard, the Auditor's analysis and reasoning, and the Auditor's conclusions, this standard is determined to be compliant. This standard complies with all material requirements for the relevant period.</p>
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<b>115.54</b>	<b>Third-party reporting</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>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,</p> <p>115.54 (a): The facility shall establish a method to receive third-party reports of</p>

sexual abuse and sexual harassment and shall distribute public information on how to report sexual abuse and sexual harassment on behalf of an inmate.

PAQ 115.54 (a)-1 CDOC/Bridgeport Correctional Center confirmed providing a method to receive third-party reports of inmate sexual abuse or sexual harassment. The PAQ stated the methods included verbally in person, via phone, email, and/or in writing.

PAQ 115.54 (a)-2 CDOC/Bridgeport Correctional Center confirmed the agency or facility publicly distributes information on how to report inmate sexual abuse or sexual harassment on behalf of inmates. The PAQ stated the facility distributed information via inmate education, handbooks, and for the public via the agency website.

CDOC has established a method to receive third-party reports of sexual abuse and sexual harassment. According to the PREA Coordinator and as confirmed in PAQ 115.54 (a)-1, Bridgeport provides inmates with various methods to report sexual abuse or sexual harassment to a third-party entity.

**Interviews with a sample of random and targeted** during the onsite portion of this audit confirmed that CDOC/Bridgeport had established a method to receive third-party reports of sexual abuse and sexual harassment. Inmates interviewed were all aware of methods for third-party reporting, such as family or friends contacting the CDOC PREA Unit or contacting the CSP.

Third-party reports, according to the 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, indicate the methods for inmates to report sexual abuse or sexual harassment as the following ways:

1. Calling the Connecticut State Police;
2. Reporting to any staff member either verbally or in writing;
3. Calling the PREA hotline;
4. Writing an inmate request;
5. Writing an anonymous note;
6. Where applicable, Inmates detained solely for civil immigration purposes 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. (See MOU between CSP and CDOC); and
7. From family and friends or concerned individuals.

The agency has distributed public information on how to report sexual abuse and sexual harassment on behalf of an inmate. Further, reports of sexual abuse or sexual harassment can also be submitted through CDOC's website to the agency PREA Coordinator and Director of the PREA Unit. From any living unit, inmates can report

	<p>abuse or harassment to the Connecticut State Police (*9333#) and CDOC (*9222#). During the facility tour, this Auditor observed all living unit PREA and reported informational posters containing contact information for third-party reporting. Contact information for emotional support was also observed in all living units and common areas frequented by inmates and staff. All posters and stenciled information were clear, average font size, written in simple language, and printed in both English and Spanish to accommodate most readers. Likewise, the Auditor found no evidence of unreadable or damaged PREA-related information posted throughout the facility, in either staff, visitors, or inmate common areas such as food service, visitation, front lobby, or medical.</p> <p><b>Evidence relied upon:</b></p> <ol style="list-style-type: none"> <li>1. Pre-audit Questionnaire</li> <li>2. CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention (effective date 07/20/2015)</li> </ol> <p><b>Conclusion:</b></p> <p>Based on the evidence relied upon in making the compliance determination for this standard, the Auditor's analysis and reasoning, and the Auditor's conclusions, this standard is determined to be compliant. This standard complies with all material requirements for the relevant period.</p>
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<b>115.61</b>	<b>Staff and agency reporting duties</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>Pre-Audit Questionnaire (PAQ) and supporting documentation; Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, effective July 20, 2015; CDOC Administrative Directive 6.12 Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 13, page 10, Staff Monitoring and Intervention (Sexual Abuse); and Administrative Directive 6.6 Reporting of Incidents, collectively address this standard.</p> <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>PAQ 115.61 (a)-1 CDOC confirmed that the agency requires all staff to report</p>

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.

PAQ 115.61 (a)-2 CDOC requires all staff to report immediately and, according to agency policy, any retaliation against inmates or staff who report such an incident.

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

Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 13, indicates that CDOC is required 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. Interviews with a sample of random and specialized staff confirmed their duty 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. PAQ 115.61 (a)-1 indicates that 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 as confirmed by the agency PREA Coordinator.

During the site review, the Auditor questioned staff, asking staff to detail the process for reporting an incident of sexual abuse or sexual harassment provided by the facility. All random staff indicated they would contact their shift supervisor unless they were the object of the allegations or use the hotline to report an incident. During the facility tour, this Auditor noted the number of PREA hotlines and CSPs visible to all. All staff sampled denied a requirement to report their direct supervisor if they were the object of the allegation of sexual abuse or sexual harassment.

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.

PAQ 115.61 (b)-1 Bridgeport Correctional Center confirmed that 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.

Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate

Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 13 A, indicates that 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. All random staff indicated they would contact their shift supervisor unless they were the object of the allegations or use the hotline to report an incident. During the facility tour, this Auditor noted the number of PREA hotlines and CSPs visible to all. All staff sampled denied a requirement to report their direct supervisor if they were the object of the allegation of sexual abuse or sexual harassment.

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.

CDOC Administrative Directive 6.6 Reporting of Incidents states that unless otherwise precluded by federal, state, or local law, and at the initiation of services, medical and mental health practitioners are required under a duty of law and license as mandated reporters of sexual abuse. All mandated reports must inform inmates of their duty to report and the limitations of confidentiality. During the onsite portion of this audit, a sample of medical and mental health practitioners confirmed CDOC Administrative Directive 6.6 Reporting of Incidents, the duty to report sexual abuse immediately per Standard 115.61. From a sample of reports to investigators. During this reporting period, Bridgeport investigative documents indicate one allegation of sexual abuse. The incident was determined to be unfounded/unsubstantiated. (See Standard 115.71 for additional information).

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.

CDOC Administrative Directive 6.12 Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 11, states 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. 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. Bridgeport is an adult male facility with zero inmates under 18 years old. Separate Interviews with a sample of medical and mental practitioners confirmed that medical and mental health practitioners would 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

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



	<p>investigators.</p> <p>CDOC Administrative Directive 6.12 Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention directs all staff to report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators. A sample of the random and specialized staff confirmed an agency requirement to report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators or shift supervisor.</p> <p><b>Evidence relied upon:</b></p> <ol style="list-style-type: none"> <li>1. Pre-audit Questionnaire</li> <li>2. CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention (effective date 07/20/2015)</li> <li>3. Administrative Directive 6.6 Reporting of Incidents (effective date 10/01/2018)</li> <li>4. Interview with a random sample of staff</li> <li>5. Interview with a medical practitioner</li> <li>6. Interview with a mental health practitioner</li> <li>7. Interview with the facility Warden</li> <li>8. Interview with the agency PREA Coordinator</li> <li>9. Informal conversation verifying random staff reporting methods</li> <li>10. Test on-demand reporting system</li> <li>11. Review of a sample investigative reports for this reporting period</li> </ol> <p><b>Conclusion:</b></p> <p>Based on the evidence relied upon in making the compliance determination for this standard, the Auditor's analysis and reasoning, and the Auditor's conclusions, this standard is determined to be compliant. This standard complies with all material requirements for the relevant period.</p>
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115.62	Agency protection duties
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention and Administrative Directive 9.9 Protective Management, Determination of Substantial Risk address Standard 115.62.</p> <p>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>PAQ 115.62 (a)-1 CDOC/Bridgeport Correctional Center confirmed that when the</p>

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).

PAQ 115.62 (a)-2 Bridgeport Correctional Center confirmed that 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 was zero.

PAQ 115.62 (a)-3 If the agency or facility made such determinations in the past 12 months, the average amount of time (in hours) that passed before taking action: CDOC/Bridgeport Correctional Center indicated zero and no such determinations made.

PAQ 115.62 (a)-4 The longest time passed (in hours or days) before taking action (please note if response is in hours or days). If not "immediate" (i.e., without unreasonable delay), please explain in the comments section: CDOC/Bridgeport Correctional Center indicated zero and no such determinations made.

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 states 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. In separate interviews, the designated agency head, the PREA Coordinator, and the Warden all confirmed when the CDOC learns that an inmate is subject to a substantial risk of imminent sexual abuse, it takes immediate action to protect the inmate. Protection includes close monitoring, movement to another living unit, bed placement closer to correctional staff transfer to another facility, or, as the last alternative, short-term placement in a restricted living unit. Random staff samples interviewed during the onsite portion of this audit indicated that when CDOC/Bridgeport learns that an inmate is subject to a substantial risk of imminent sexual abuse, immediate action would be taken to protect the inmate, such as removing the inmate from the living unit to a safe place, removal of any known aggressor, notify the shift supervisor and document the incident. PAQ 115.62 (a)-2 indicates that 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 was zero, as confirmed by the Captain of the PREA Unit. (Also see Administrative Directive 9.9 Protective Management, Section 6, Determination of Substantial Risk for more information).

**Evidence relied upon:**

1. Pre-audit Questionnaire
2. CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention (effective date 07/20/2015)
3. CDOC Administrative Directive 9.9, Protective Management (effective date 04/

	<p>29/2015)</p> <ol style="list-style-type: none"> <li>4. Interview with the CDOC Commissioner</li> <li>5. Interview with the facility Warden</li> <li>6. Interview with the PREA Compliance Manager</li> <li>7. Interview with a sample of random staff</li> </ol> <p><b>Conclusion:</b></p> <p>Based on the evidence relied upon in making the compliance determination for this standard, the Auditor's analysis and reasoning, and the Auditor's conclusions, this standard is determined to be compliant. This standard complies with all material requirements for the relevant period.</p>
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115.63	Reporting to other confinement facilities
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention; Administrative Directive 6.12 Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 13, Staff Monitoring and Intervention (Sexual Abuse); and Administrative Directive 6.6 Reporting of Incidents collectively address Standard 115.63.</p> <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>PAQ 115.63 (a)-1 CDOC confirmed that 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.</p> <p>PAQ 115.63 (a)-2 Bridgeport Correctional Center confirmed that in the past 12 months, the number of allegations the facility received that an inmate was abused while confined at another facility was zero.</p> <p>PAQ 115.63 (a)-3 Bridgeport Correctional Center described in the comment boxes that "N/A and no such allegation received".</p> <p>By examination, this Auditor determined that CDOC 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 as confirmed in PAQ 115.63 (a)-1. (See Administrative Directive 6.12 Inmate Sexual</p>

Abuse/Sexual Harassment Prevention and Intervention, Section 13, Staff Monitoring and Intervention (Sexual Abuse)). The agency will document that it has provided such notification.

115.63 (b): Such notification shall be provided as soon as possible but 72 hours after receiving the allegation.

PAQ 115.63 (b)-1 CDOC confirmed that the agency policy requires that the facility head provide such notification as soon as possible but no later than 72 hours after receiving the allegation.

By examination, this Auditor determined that CDOC 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 as confirmed in PAQ 115.63 (a)-1. (See Administrative Directive 6.12 Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 13, Staff Monitoring and Intervention (Sexual Abuse)). The same policy requires facilities to provide such notification as soon as possible but no later than 72 hours after receiving the allegation. According to PAQ 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 was zero. Likewise, this Auditor examined investigative reports for this reporting period and found zero documented allegations that an inmate was sexually abused while confined at another facility.

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

PAQ 115.63 (c)-1 CDOC/Bridgeport Correctional Center confirmed the agency or facility documents that it has provided such notification within 72 hours of receiving the allegation. Bridgeport Correctional Center described in the comment boxes that "no allegations made required notifications; but when required, notifications are made via email".

In an Interview with the Warden it was confirmed that Bridgeport is aware of 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 6.12 Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 13, Staff Monitoring and Intervention (Sexual Abuse) and a duty to notify the head of the facility where the inmate indicates sexual abuse or sexual harassment occurred within 72 hours after receiving the allegation.

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

PAQ 115.63 (d)-1 CDOC/Bridgeport Correctional Center has a policy requiring that allegations received from other facilities and agencies be investigated in accordance with the PREA standards.

	<p>PAQ 115.63 (d)-2 Bridgeport Correctional Center confirmed in the past 12 months, the number of allegations of sexual abuse the facility received from other facilities was zero, as confirmed by the facility head, Warden, and the PREA Coordinator. Further, the Warden and designated agency head (PREA Coordinator) confirmed that if such an allegation is received, the allegation will be investigated under this standard.</p> <p>In separate interviews with the Warden and designated agency head (PREA Coordinator), it was confirmed that Bridgeport is aware of 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 6.12 Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 13, Staff Monitoring and Intervention (Sexual Abuse) and the Warden, the facility head or agency office that receives such notification shall ensure that the allegation is investigated under these standards. PAQ 115.63 (d)-2 indicates in the past 12 months, the number of allegations of sexual abuse the facility received from other facilities was zero, as confirmed by the facility head, Warden, and the PREA Coordinator. Further, the warden and designated agency head (PREA Coordinator) confirmed that if such an allegation is received, the allegation will be investigated under this standard.</p> <p><b>Evidence relied upon:</b></p> <ol style="list-style-type: none"> <li>1. Pre-audit Questionnaire</li> <li>2. CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention (effective date 07/20/2015)</li> <li>3. Administrative Directive 6.6 Reporting of Incidents (effective date 10/01/2018)</li> <li>4. Interview with the CDOC Commissioner</li> <li>5. Interview with the PREA Compliance Monitor</li> <li>6. Interview with the facility Warden</li> <li>7. Documentation that notification occurred within 72 hours after receiving the allegation</li> <li>8. Evidence of the initiation of an investigation of the previous outcome regarding the 2006 allegation</li> </ol> <p><b>Conclusion:</b></p> <p>Based on the evidence relied upon in making the compliance determination for this standard, the Auditor's analysis and reasoning, and the Auditor's conclusions, this standard is determined to be compliant. This standard complies with all material requirements for the relevant period.</p>
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<b>115.64</b>	<b>Staff first responder duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>

Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, and Administrative Directive 6.6, Reporting of Incidents, address this standard.

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 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 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.

PAQ 115.64 (a)-1 CDOC confirmed that the agency has a first responder policy for allegations of sexual abuse.

PAQ 115.64 (a)-1 CDOC confirmed that the agency has a first responder policy for allegations of sexual abuse.

PAQ 115.64 (a)-2 CDOC confirmed that 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 abuse.

PAQ 115.64 (a)-3 CDOC confirmed that 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.

PAQ 115.64 (a)-4 CDOC confirmed that 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.

PAQ 115.64 (a)-5 CDOC confirmed that 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.

PAQ 115.64 (a)-6 Bridgeport Correctional Center confirmed that in the past 12 months, the number of allegations that an inmate was sexually abused: 1.

PAQ 115.64 (a)-7 Bridgeport Correctional Center confirmed that 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 was zero.

PAQ 115.64 (a)-8 Bridgeport Correctional Center confirmed that in the past 12 months, zero allegations were made in which staff were notified within a period that still allowed for the collection of physical evidence.

PAQ 115.64 (a)-9 Bridgeport Correctional Center confirmed that 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: was 0.

PAQ 115.64 (a)-10 Bridgeport Correctional Center confirmed that 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: was 0.

PAQ 115.64 (a)-11 Bridgeport Correctional Center confirmed that 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: was 0.

Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 13, Staff Monitoring and Intervention (Sexual Abuse), indicates that 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.

Interviews with a sample of random staff confirm all understood their responsibility and that 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 and document the incident using form CN 6601, Incident Report then forward the report to the shift supervisor under Administrative Directive 6.6, Reporting of Incidents.

A review of an allegation of sexual abuse for this reporting period indicates that the inmate/victim came forward months after he stated the incident occurred. Still, documentation of responses to allegations suggests that, once staff was alerted, Bridgeport took steps to secure his safety. Documents indicate the inmate was immediately taken to medical to be examined by a medical practitioner. PAQ 115.64 (a)-6 states in the past 12 months, the number of allegations that an inmate was sexually abused was one. (Also see PAQ 115.64 (b)-1).

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.

PAQ 115.64 (b)-1 CDOC confirmed that the 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.

PAQ 115.64 (b)-2 CDOC policy required that if the first staff responder is not a security staff member, that responder shall be required to notify security staff.

PAQ 115.64 (b)-3 Bridgeport Correctional Center confirmed that 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 0.

PAQ 115.64 (b)-4 Bridgeport Correctional Center indicated 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 0.

PAQ 115.64 (b)-5 Bridgeport Correctional Center indicated that of those allegations responded to first by a non-security staff member, the number of times that staff member notified security staff: was 0.

Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 13, Staff Monitoring and Intervention (Sexual Abuse), indicates that if the first staff responder is not a security staff member, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff. During an interview with a



	<p>random non-security staff person, they detailed that upon notification of sexual abuse, they would take actions such as (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 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 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. (See PAQ 115.64 (b)-2).</p> <p><b>Evidence relied upon:</b></p> <ol style="list-style-type: none"> <li>1. Pre-audit Questionnaire</li> <li>2. CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention (effective date 07/20/2015)</li> <li>3. Administrative Directive 6.6 Reporting of Incidents (effective date 10/01/2018)</li> <li>4. Interview with Security Staff First Responders</li> <li>5. Interview with Non-First Responder</li> <li>6. Interviews with random staff</li> <li>7. Examination of CDOC Staff Training materials</li> <li>8. Examination of responses to allegations of sexual abuse</li> </ol> <p><b>Conclusion:</b></p> <p>Based on the evidence relied upon in making the compliance determination for this standard, the Auditor's analysis and reasoning, and the Auditor's conclusions, this standard is determined to be compliant. This standard complies with all material requirements for the relevant period.</p>
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<b>115.65</b>	<b>Coordinated response</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></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; HR-301; Refusal of Health Services; and PREA Incident Checklist (CN61201) address this standard.</p> <p>115.65 (a): The facility shall develop a written institutional plan to coordinate actions taken in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators, and facility leadership.</p>

PAQ 115.65 (a)-1 Bridgeport Correctional Center confirmed the facility has developed a written institutional plan to coordinate actions taken in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators, and facility leadership.

Connecticut Department of Correction, Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 13, Staff Monitoring and Intervention (Sexual Abuse) outlines the agency's coordinated actions to take in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators, and facility leadership. If the incident reported allegedly occurred in a facility that is not under the jurisdiction of the CDOC or at a facility/ site under the jurisdiction of the CDOC other than where it is reported, the Unit Administrator or designee shall notify the administrator of the other facility of the allegation within 72 hours of the reporting of the incident.

Further, according to Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 13, Staff Monitoring and Intervention (Sexual Abuse) the facility shall offer medical and mental health evaluation by a practitioner and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any facility. (An inmate may refuse such treatment in writing utilizing HR-301 Refusal of Health Services) any such refusal must be documented by the Supervisor completing the PREA Incident Checklist (CN61201) and HR-301 Refusal of Health Services if applicable.

The evidence provided is problematic because it is not facility-specific. The Auditor's instructions provide a note to Auditors: To be compliant, there must be an institutional plan for each facility (not merely an agency-wide plan). This standard requires corrective action.

**Evidence relied upon:**

1. Pre-audit Questionnaire
2. CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention (effective date 07/20/2015)
3. Administrative Directive 6.6 Reporting of Incidents (effective date 10/01/2018)
4. HR-301 Refusal of Health Services
5. PREA Incident Checklist (CN61201)
6. Examination of the Bridgeport Correctional Facility Coordinated Response
7. Interview with the facility Warden

**Corrective Action:**

1. To ensure compliance with the PREA standards, Bridgeport will provide as evidence an institutional plan for a coordinated response to an incident of sexual abuse. This plan should be specific to the facility and address the unique needs and challenges it faces.

**Conclusion:**

	Based on the evidence relied upon in making the compliance determination for this standard, the Auditor's analysis and reasoning, and the Auditor's conclusions, this standard is determined to be compliant. This standard complies with all material requirements for the relevant period.
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<b>115.66</b>	<b>Preservation of ability to protect inmates from contact with abusers</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, addresses this standard.</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>PAQ 115.66 (a)-1 CDOC, indicated "no," the agency, facility, or any other governmental entity responsible for collective bargaining on the agency's behalf has entered into or renewed any collective bargaining agreement or other agreement since August 20, 2012, or since the last PREA audit, whichever is later.</p> <p>Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, indicates that collective bargaining activities at the State level suggest that there are no agreements in place that limit the agency's authority to remove alleged staff sexual abusers from contact with inmates. Since August 2012, there have been no new collective bargaining agreements, according to the PREA Coordinator, the agency-designated head for this audit. (See PAQ 115.66 (a)-1).</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>The Auditor is not required to audit this provision.</p> <p><b>Evidence relied upon:</b></p>

	<ol style="list-style-type: none"> <li>1. Pre-audit Questionnaire</li> <li>2. Interview with the PREA Coordinator</li> <li>3. Interview with the CDOC Commissioner</li> </ol> <p><b>Conclusion:</b></p> <p>Based on the evidence relied upon in making the compliance determination for this standard, the Auditor's analysis and reasoning, and the Auditor's conclusions, this standard is determined to be compliant. This standard complies with all material requirements for the relevant period.</p>
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<b>115.67</b>	<b>Agency protection against retaliation</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, addresses this standard.</p> <p>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.</p> <p>PAQ 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.</p> <p>PAQ 115.67 (a)-2 CDOC confirms that the agency designates staff member(s) or charges department(s) with monitoring for possible retaliation.</p> <p>CDOC has 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 and shall designate which staff members or departments are charged with monitoring retaliation. (See Connecticut Department of Correction, Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 18, page 15, Post Allegation Protection of Inmates and Staff from Retaliation).</p> <p>Post-allegation Protection of Inmates and Staff from Retaliation indicates 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 facility shall monitor the conduct and treatment of inmates or staff who reported the alleged</p>

sexual abuse and of inmates who were reported to have suffered sexual abuse to see if there were changes that may suggest possible retaliation by inmates or staff and shall act promptly to remedy any such retaliation. Items the PREA Unit and PCM should monitor include any inmate disciplinary reports, housing or program changes, or negative performance reviews or staff reassignments. The PREA Unit should also include periodic status checks of any alleged inmate victims. The PREA Unit and PCM shall continue the monitoring beyond 90 days if the initial monitoring indicates a continuing need for monitoring. If any other individuals cooperating with the investigation express a fear of retaliation, the PREA Unit shall recommend appropriate actions (if any) to protect the individual against reprisals. The agency PREA Director Unit's and PCM's obligation to monitor shall terminate if an investigation determines that the allegation is unfounded. Interviews separate with the PCM and PREA Coordinator each confirmed their duty to monitor inmates and staff for reporting inmate sexual abuse or inmate sexual harassment for at least 90 days following a report of sexual abuse.

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 the onsite portion of this audit, the Auditor interviewed a Lieutenant who confirmed his role as retaliation monitor. The PCM and PREA Coordinator each outlined multiple measures they would take to protect inmates and staff from retaliation, such as inmate disciplinary reports, housing or program changes, negative performance reviews, or staff reassignments.

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, 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.

PAQ 115.67 (c)-1 CDOC/Bridgeport Correctional Center confirmed that 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 there are any changes that may suggest possible retaliation by inmates or staff.

PAQ 115.67 (c)-2 CDOC/Bridgeport Correctional Center confirmed that if YES, the length of time that the agency/facility monitors the conduct or treatment: was 90 days.

PAQ 115.67 (c)-3 CDOC/Bridgeport Correctional Center confirmed that the agency/facility acts promptly to remedy such retaliation.

PAQ 115.67 (c)-4 CDOC/Bridgeport Correctional Center confirmed that the agency/facility continues such monitoring beyond 90 days if the initial monitoring indicates a continuing need.

PAQ 115.67 (c)-5 CDOC/Bridgeport Correctional Center confirmed that zero incidents of retaliation occurred in the past 12 months.

The facility tour included inmates in segregated housing. Zero inmates were housed in segregation during the on-site portion of this audit for risk of sexual victimization/who allege to have suffered sexual abuse.

Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 18, page 15, Post Allegation Protection of Inmates and Staff from Retaliation indicates that the PREA Unit and PCM shall continue the monitoring beyond 90 days if the initial monitoring suggests a continuing need for monitoring. If any other individuals cooperating with the investigation express a fear of retaliation, the PREA Unit shall recommend appropriate actions (if any) to protect the individual against reprisals. The agency PREA Director Unit's and PCM's monitoring obligation shall terminate if an investigation determines the allegation is unfounded. Interviews separate with the PCM and PREA Coordinator each confirmed their duty to monitor inmates and staff for reporting inmate sexual abuse or inmate sexual harassment. According to PAQ 115.67 (c)-5, the number of times an incident of retaliation occurred in the past 12 months was zero according to the PCM.

For at least 90 days following a report of sexual abuse. A document review for this reporting period indicates one allegation of sexual abuse during this reporting period. Bridgeport omitted any evidence of retaliation monitoring on the inmate in question. It should be noted that the inmate came to alert Bridgeport two months after he alleged the incident occurred. The incident was determined unfounded/unsubstantiated. This is problematic because the incident was investigated by a staff member who had not completed specialized training, and this incident was not referred to the CSP; it is being referred back for review and findings. (See Standard 115.71 for more information). This substandard requires corrective action.

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, page 15, Post Allegation Protection of Inmates and Staff from Retaliation indicates that such monitoring shall also include periodic status checks as confirmed by the PCM and PREA Coordinator in separate interviews. Problematic, this Auditor found no evidence of monitoring for retaliation. It should be noted that the inmate came to alert Bridgeport two months after he alleged the incident occurred. The incident was determined unfounded/unsubstantiated. Protective measures for this incident included the removal of the victim from the living unit where the inmate alleges the incident occurred. This is problematic because the incident was investigated by a staff member who had not completed specialized training, and this incident was not referred to the CSP; it is being referred back for review and findings. (See Standard 115.71 for more information). This

substandard requires corrective action.

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 reprisals.

Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 18, page 15, Post Allegation Protection of Inmates and Staff from Retaliation, states that if any other individual who cooperates with an investigation expresses a fear of retaliation. During separate interviews, the PREA Coordinator and the PCM confirmed a duty to take appropriate measures to protect other individuals who cooperate with an investigation and express a fear of retaliation.

115.67 (f): An agency's obligation to monitor shall terminate if the agency determines that the allegation is unfounded.

During his interview, the Warden confirmed Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 18, page 15, Post Allegation Protection of Inmates and Staff from Retaliation, which states that CDOC's obligation to monitor shall terminate if the agency determines that the allegation is unfounded.

**Evidence relied upon:**

1. Pre-audit Questionnaire
2. CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention (effective date 07/20/2015)
3. Interview with the Agency Head
4. Interview with the facility Warden
5. Interview with the PCM/designated retaliation monitor
6. Interview with offenders in segregation (informal)
7. Interview with inmates who reported sexual abuse
8. **Documentation of monitoring measures (corrective action) (8/24/2024)**
9. PCM training on Standard 115.67 agenda by the PREA Coordinator

**Corrective Action:**

1. Bridgeport will provide evidence of retaliation monitoring.
2. The PCM will re-train Bridgeport staff regarding Standard 115.67.
3. The PCM will document the re-training of Bridgeport staff and provide the Auditor evidence of the said training.
4. The Auditor will monitor compliance with Standard 115.67 for the corrective action period.

**Conclusion:**

	Based on the evidence relied upon in making the compliance determination for this standard, the Auditor's analysis and reasoning, and the Auditor's conclusions, this standard is determined to be compliant. This standard complies with all material requirements for the relevant period.
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<b>115.68</b>	<b>Post-allegation protective custody</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Connecticut Department of Correction, Administrative Directive 6.12 Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Section 11, Screening for Risk of Victimization and Abusiveness, and Section 11, After Intake to the Facility, address this standard.</p> <p>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.</p> <p>PAQ 115.68 (a)-1 CDOC confirmed that 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.</p> <p>CDOC 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. Intake staff interviewed during the audit confirmed Connecticut Department of Correction, Administrative Directive 6.12 Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 11, After Intake to the Facility. Moreover, the same intake staff person explained that Bridgeport has multiple housing options other than segregated housing to protect an inmate who is alleged to have suffered sexual abuse and shall be subject to the requirements of § 115.43. Segregated housing would be the last option to keep an inmate safe.</p> <p>According to 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 was zero. 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 was zero.</p> <p>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</p>



longer than 30 days while awaiting alternative placement was zero.

PAQ 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 was zero.

Further, PAQ 115.68 (a)-5 states 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 answered yes, as confirmed by the PCM and PREA Coordinator. Zero segregation placement documents were reviewed for housing assignments of inmates who alleged to have suffered sexual abuse. As stated previously, in PAQ 115.68 a (1-4), zero inmates were placed in segregation during this reporting period who alleged to have suffered sexual abuse and who were assigned to involuntary segregated housing in the past 12 months.

However, staff who supervise segregation were interviewed during the audit. The said staff person confirmed that he would document in-cell and out-of-cell programs, privileges, education, and work opportunities for inmates in segregated housing for this purpose. If Bridgeport restricts access to programs, privileges, education, or work opportunities, he would document in the unit logbook (1) any opportunities that have been limited, (2) the duration of the limitations, and (3) the reasons for such limitations.

Likewise, the Warden, during his interview, confirmed that segregation staff would document in-cell and out-of-cell programs, privileges, education, and work opportunities for inmates in segregated housing for this purpose. If Bridgeport restricts access to programs, privileges, education, or work opportunities, segregation staff will document in the unit logbook (1) any opportunities that have been limited, (2) the duration of the limitations, and (3) the reasons for such limitations.

**Evidence relied upon:**

1. Pre-audit Questionnaire
2. CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention (effective date 07/20/2015)
3. Examination of investigative records and documentation of housing assignments of offenders who are alleged to have suffered sexual abuse.
4. Documentation of in-cell and out-of-cell programs, privileges, education, and work opportunities for inmates in segregated housing for this purpose
5. Case files of inmates who alleged to have suffered sexual abuse held in involuntary segregated housing in the past 12 months

**Conclusion:**

Based on the evidence relied upon in making the compliance determination for this standard, the Auditor's analysis and reasoning, and the Auditor's conclusions, this

	standard is determined to be compliant. This standard complies with all material requirements for the relevant period.
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<b>115.71</b>	<b>Criminal and administrative agency investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>CDOC Administrative Directive 1.10 Investigations, Section 4 Training, Section 5 Criminal Investigations, Section 7 General Principles, Conduct of Investigations, Section 10 PREA Unit, Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention; and Administrative Directive 6.9, Control of Contraband and Physical Evidence address this standard.</p> <p>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.</p> <p>PAQ 115.71 (a)-1 CDOC/Bridgeport Correctional Center confirmed it has a policy related to criminal and administrative agency investigations.</p> <p><b>CDOC has policies related to criminal and administrative agency investigations.</b></p> <p>Specifically, CDOC Administrative Directive 1.10 Investigations indicates investigations of sexual abuse and sexual harassment shall be conducted promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports. During an interview with the Captain of the PREA Unit, he confirmed that CDOC and the PREA Unit investigate allegations of administrative sexual abuse and sexual harassment promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports.</p> <p>115.71 (b): Where sexual abuse is alleged, the agency shall use investigators who have received special training in sexual abuse investigations according to § 115.34.</p> <p><b>CDOC Administrative Directive 1.10 Investigations states that where sexual abuse is alleged, the agency shall use investigators who have received special training in sexual abuse investigations according to § 115.34. PREA Unit investigators have completed the required specialized and general PREA-related training. However, a review of investigations of sexual abuse and sexual harassment submitted as evidence for this reporting period failed to provide evidence that the investigators completed specialized training as outlined in Standard 115.34. This substandard requires corrective action.</b></p> <p>115.71 (c): Investigators shall gather and preserve direct and circumstantial</p>

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.

CDOC Administrative Directive 6.12 Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 16, Investigation of Sexual Abuse Sexual Harassment, directs that all allegations of sexual abuse shall follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. The Captain of the PREA Unit, a trained investigator, was interviewed by the Auditor. The Captain confirmed that all allegations of sexual abuse follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. **This Auditor also reviewed a sample of administrative investigation reports (3) initiated during this reporting period. Zero samples of cases involving substantiated allegations were reviewed to ensure they were referred for prosecution. Zero cases involving substantiated allegations were referred for prosecution to the prosecutor's office for action.**

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 to determine whether they may be an obstacle to subsequent criminal prosecution.

The Auditor interviewed the Captain of the PREA Unit, a trained investigator. The Captain confirmed that when the quality of evidence appears to support a criminal prosecution, the agency shall conduct compelled interviews only after consulting with prosecutors to determine whether they may be an obstacle to subsequent criminal prosecution. This Auditor also reviewed a sample of administrative investigative reports (3) initiated during this reporting period. Zero samples of cases involving substantiated allegations were reviewed to ensure they were referred for prosecution. Zero cases involving substantiated allegations were referred for prosecution to the prosecutor's office for action. (See Administrative Directive 1.10 Investigations, Section 4, Training, Section 5 Criminal Investigations, Section 7, General Principles, Conduct of Investigations, Section 10, PREA Unit, and Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention and Administrative Directive 6.9, Control of Contraband and Physical Evidence).

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 an inmate or staff member. 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 the Captain of the PREA Unit, a trained investigator. The Captain confirmed that 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 an inmate or staff. He also confirmed that CDOC does not 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. This Auditor reviewed a sample of administrative investigative reports (3) initiated during this reporting period. Zero samples of cases involved the use of a polygraph examination or other truth-telling device. (Administrative Directive 1.10 Investigations, Section 4, Training, Section 5 Criminal Investigations, Section 7, General Principles, Conduct of Investigations, Section 10, PREA Unit, and Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention and Administrative Directive 6.9, Control of Contraband and Physical Evidence).

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.

This Auditor reviewed a sample of administrative investigative reports (3) initiated during this reporting period. The investigations included a review of staff actions or failures to act that contributed to the abuse. The reports each included a description of physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings. (Administrative Directive 1.10 Investigations, Section 4, Training, Section 5 Criminal Investigations, Section 7, General Principles, Conduct of Investigations, Section 10, PREA Unit, and Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention and Administrative Directive 6.9, Control of Contraband and Physical Evidence).

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.

The Auditor interviewed the Captain of the PREA Unit, a trained investigator. The Captain confirmed that any 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. Informal conversations with random staff confirmed for the Auditor that access to secure information, including medical and mental health files, sexual abuse, and sexual harassment reports, is restricted to the role and need to know. Medical and mental health practitioners interviewed separately during this audit confirmed access to PII is limited and restricted by role or function in the agency. or facility. (Administrative Directive 1.10 Investigations, Section 4, Training, Section 5 Criminal Investigations, Section 7, General Principles, Conduct of Investigations, Section 10, PREA Unit, and Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention and Administrative Directive 6.9, Control of Contraband and Physical Evidence).

115.71 (h): Substantiated allegations of conduct that appear to be criminal shall be referred for prosecution.

PAQ 115.71 (h)-1 Bridgeport Correctional Center confirmed that substantiated allegations of conduct that appear to be criminal are referred for prosecution.

PAQ 115.71 (h)-2 Bridgeport Correctional Center confirmed that the number of substantiated allegations of conduct that appear to be criminal and that were referred for prosecution was zero since August 20, 2012, or since the last PREA audit, whichever is later.

The Auditor interviewed the Captain of the PREA Unit, a trained investigator. The Captain confirmed that substantiated allegations of conduct that appear to be criminal should be referred for prosecution.

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.

PAQ 115.71 (i)-1 CDOC confirmed that 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.

During an interview with the PREA Coordinator, he confirmed that CDOC would 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 under CDOC Administrative Directive 1.10 Investigations, Section 6, Initial Inquiries and Administrative Investigations, Section 8, PREA Unit Investigations and Administrative Directive 6.12 Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Section 16, Investigation of Sexual Abuse/Sexual Harassment. The Auditor observed physical lock and key storage in a standalone building where the CDOC PREA Unit operates. The building is secure, with restricted access. All physical files are stored in locked cabinets. Electronic investigative documents are password-protected with restricted access, according to the PREA Coordinator.

According to the PREA Coordinator, CDOC Administrative Directive 1.10 Records Retention mandates that the CDOC PREA Unit shall retain all investigation reports for if the alleged abuser is incarcerated or employed by the CDOC, plus five years or as long as required by State records retention policies, or as required by a litigation hold notice, whichever is longer.

115.71 (j): The departure of the alleged abuser or victim from the employment or control of the facility or agency shall not provide a basis for terminating an investigation.

The Auditor interviewed the Captain of the PREA Unit, a trained investigator. The Captain confirmed that the departure of the alleged abuser or victim from the employment or control of the facility or agency should not provide a basis for terminating an investigation. Examination of administrative investigations initiated during this reporting period found no evidence to suggest that CDOC discontinued an investigation due to the departure of the alleged abuser or victim from the

	<p>employment or control of the facility or agency, which was a basis for terminating an investigation. (Administrative Directive 1.10 Investigations, Section 4, Training, Section 5 Criminal Investigations, Section 7, General Principles, Conduct of Investigations, Section 10, PREA Unit, and Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention and Administrative Directive 6.9, Control of Contraband and Physical Evidence).</p> <p>115.71 (k): Any State entity or Department of Justice component that conducts such investigations shall do so under the above requirements.</p> <p>115.71 (l): When outside agencies investigate sexual abuse, the facility shall cooperate with outside investigators and endeavor to remain informed about the progress of the investigation.</p> <p><b>Evidence relied upon:</b></p> <ol style="list-style-type: none"> <li>1. Pre-audit Questionnaire</li> <li>2. CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention (effective date 07/20/2015)</li> <li>3. CDOC Administrative Directive 1.10 Investigations (effective date 09/17/2020)</li> <li>4. CDOC Administrative Directive 6.9, Control of Contraband and Physical Evidence (effective date 01/03/2017)</li> <li>5. Interview with investigative staff (3)</li> <li>6. Interview with the PREA Coordinator</li> <li>7. Interviews with offenders who reported sexual abuse (2)</li> <li>8. Informal interviews with staff</li> <li>9. Sample of investigative records (3) sexual abuse and sexual harassment</li> <li>10. Sample of criminal and administrative investigative reports</li> <li>11. Sample of investigative reports referred for prosecution</li> <li>12. Facility tour (record storage)</li> <li>13. Facility tour (sexual safety tour)</li> </ol> <p><b>Conclusion:</b></p> <p>Based on the evidence relied upon in making the compliance determination for this standard, the Auditor's analysis and reasoning, and the Auditor's conclusions, this standard is determined to be compliant. This standard complies with all material requirements for the relevant period.</p>
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<b>115.72</b>	<b>Evidentiary standard for administrative investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate

	<p>Sexual Abuse Sexual Harassment Prevention and Intervention, and Administrative Directive 1.10, Investigations address this standard.</p> <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>PAQ 115.72 (a)-1 CDOC confirmed that 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.</p> <p>As per the Captain of the PREA Unit, CDOC is resolute in not imposing a standard of preponderance of the evidence or a lower standard of proof when determining the substantiation of allegations of sexual abuse or sexual harassment. A thorough review of administrative findings documentation was conducted, serving as a stringent standard of proof for this reporting period. This was further confirmed by the Captain of the PREA Unit, and PAQ 115.72 (a)-1, which indicates that CDOC is committed to a standard of a preponderance of the evidence or a lower standard of proof when determining the substantiation of allegations of sexual abuse or sexual harassment.</p> <p><b>Evidence relied upon:</b></p> <ol style="list-style-type: none"> <li>1. Pre-audit Questionnaire</li> <li>2. CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention (effective date 07/20/2015)</li> <li>3. CDOC Administrative Directive 1.10 Investigations (effective date 09/17/2020)</li> <li>4. Interview with the PREA Coordinator</li> <li>5. Interview with the PCM</li> <li>6. Interview with the investigator/Administrative</li> <li>7. Interview with the investigator/Criminal</li> <li>8. Examination of administrative and criminal findings for the standard of proof</li> </ol> <p><b>Conclusion:</b></p> <p>Based on the evidence relied upon in making the compliance determination for this standard, the Auditor's analysis and reasoning, and the Auditor's conclusions, this standard is determined to be compliant. This standard complies with all material requirements for the relevant period.</p>
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<b>115.73</b>	<b>Reporting to inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>

Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention and Administrative Directive 1.10 Investigations, Section 10, Reporting to Inmates address this standard.

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.

PAQ 115.73 (a)-1 CDOC confirmed that 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.

PAQ 115.73 (a)-2 Bridgeport Correctional Center confirmed that 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 was 0.

After careful review CDOC now reports 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 as 3 administrative and zero criminal. All cases were unfounded.

PAQ 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 was zero. The comment states no investigations require notification during this audit period. All inmates named in SH and SA investigations are notified of the results. **Bridgeport omitted evidence of compliance with this substandard.**

115.73 (b): If the agency did not conduct the investigation, it shall request the relevant information from the investigative agency to inform the inmate.

PAQ 115.73 (b)-1 CDOC indicates "not applicable" if an outside entity conducts such investigations, the agency requests the relevant information from the investigative entity to inform the inmate of the investigation's outcome. IDOC conducts its own criminal and administrative investigations. Zero samples of alleged sexual abuse investigations were completed by an outside entity.

See Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, and Administrative Directive 1.10 Investigations, Section 10, g, Reporting to Inmates indicates the agency did not conduct the investigation, it shall request the relevant information from the investigative agency to inform the inmate. During an interview with the Captain of the PREA Unit, a trained investigator, he confirmed that if CDOC did not conduct the investigation, it would request the relevant information from the investigative agency (e.g., Connecticut State Police) to inform the inmate of the outcome of the investigation. During this reporting period, zero investigations were referred to the Connecticut



State Police.

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 was zero. A comment submitted indicates, "CSP does not provide notification unless officially requested by involved parties. " The Captain of the PREA Unit clarified and confirmed that CDOC would officially request the outcome of a referral to investigate by CDOC to report back to the inmate who reported the allegations. During the correct5ive action period this Auditor confirmed that the facility now reports back to offenders the outcome of an investigation. Closure memo are issued to all affected inmate who report sexual abuse.

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 on a charge 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.

PAQ 115.73 (c)-1 CDOC and the Captain of the PREA Unit, who is a trained investigator, confirmed that 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 on a charge 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. Problematic evidence of compliance was omitted.

115.73 (d): Following an inmate's allegation that he or she has been sexually abused by another inmate, the agency shall subsequently inform the alleged victim whenever: (1) The agency learns that the alleged abuser has been indicted on a charge 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.

The Captain of the PREA Unit, who is a trained investigator, confirmed that following an inmate's allegation that he or she has been sexually abused by another inmate, the agency shall subsequently inform the alleged victim whenever: (1) The agency learns that the alleged abuser has been indicted on a charge 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. (See Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention and Administrative Directive 1.10 Investigations, Section 10, Reporting to Inmates).

115.73 (e): All such notifications or attempted notifications shall be documented.

The Captain of the PREA Unit confirmed that notifications or attempted notifications shall be documented. Problematic, Bridgeport omitted evidence of compliance with this substandard. (See Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention and Administrative Directive 1.10 Investigations, Section 10, Reporting to Inmates).

115.73 (f): An agency's obligation to report under this standard shall terminate if the inmate is released from the agency's custody.

The Captain of the PREA Unit confirmed that the agency's obligation to report under this standard shall terminate if the inmate is released from the agency's custody. (See Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention and Administrative Directive 1.10 Investigations, Section 10, Reporting to Inmates).

**Corrective Action:**

PAQ 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 was zero. The comment states no investigations require notification during this audit period. All inmates named in SH and SA investigations are notified of the results. Bridgeport omitted evidence of compliance with this substandard. Bridgeport will submit sample evidence of compliance.

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 was zero. A comment submitted indicates, "CSP does not provide notification unless officially requested by involved parties. " The Captain of the PREA Unit clarified and confirmed that CDOC would officially request the outcome of a referral to investigate by CDOC to report back to the inmate who reported the allegations.

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 on a charge 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. Evidence of compliance with this standard was omitted. Bridgeport will submit sample evidence of compliance with this standard.

PAQ 115.73 (c)-2 States 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. Bridgeport Correctional Center replied "no".

PAQ 115.73 (c)-3 Bridgeport Correctional Center confirmed all cases the agency subsequently informed the offender whenever:

- The staff member was no longer posted within the inmate's unit;
- The staff member was no longer employed at the facility;
- The agency learned that the staff member has been indicted on a charge related to sexual abuse within the facility; or
- The agency learned that the staff member has been convicted on a charge related to sexual abuse within the facility.

115.73 (d): Following an inmate's allegation that he or she has been sexually abused by another inmate, the agency shall subsequently inform the alleged victim whenever: (1) The agency learns that the alleged abuser has been indicted on a charge 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.

PAQ 115.73 (d)-1 Bridgeport Correctional Facility, the Captain of the PREA Unit, who is a trained investigator, confirmed that following an inmate's allegation that he or she has been sexually abused by another inmate, the agency shall subsequently inform the alleged victim whenever: (1) The agency learns that the alleged abuser has been indicted on a charge 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 (e): All such notifications or attempted notifications shall be documented. Bridgeport will submit sample evidence of compliance with this standard.

PAQ 115.73 (e)-1 CDOC has a policy that all notifications to inmates described under this standard are documented.

PAQ 115.73 (e)-2 CDOC confirmed in the past 12 months, the number of notifications to inmates that were provided pursuant to this standard: was 0.

PAQ 115.73 (e)-3 Bridgeport Correctional Center confirmed that of those notifications made in the past 12 months, the number that were documented: was 0.

The Captain of the PREA Unit confirmed that notifications or attempted notifications shall be documented. Problematic, Bridgeport omitted evidence of compliance with this substandard.

115.73 (f): An agency's obligation to report under this standard shall terminate if the inmate is released from the agency's custody.

The Captain of the PREA Unit confirmed that notifications or attempted notifications shall be documented. Problematic, Bridgeport omitted evidence of compliance with this substandard.

**Evidence relied upon:**

	<ol style="list-style-type: none"> <li>1. Pre-audit Questionnaire</li> <li>2. CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention (effective date 07/20/2015)</li> <li>3. CDOC Administrative Directive 1.10 Investigations (effective date 09/17/2020)</li> <li>4. Interview with the facility Warden</li> <li>5. Interview with Investigative Staff</li> <li>6. Interview with offenders who reported sexual abuse</li> <li>7. Examination of a select sample of sexual abuse investigations</li> <li>8. Examination of notification of offenders of outcome of investigations (3)</li> <li>9. Examination of substantiated or unsubstantiated investigations (3) unfounded.</li> </ol> <p><b>Conclusion:</b></p> <p>Based on the evidence relied upon in making the compliance determination for this standard, the Auditor's analysis and reasoning, and the Auditor's conclusions, this standard is determined to be compliant. This standard complies with all material requirements for the relevant period.</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>Administrative Directive 2.17 Employee Conduct, Section 6, Staff Discipline, and Administrative Directive 6.12 Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 21, Disciplinary Sanctions address this standard.</p> <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>PAQ 115.76 (a)-1 Bridgeport Correctional Center confirmed that staff is subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies.</p> <p>According to Administrative Directive 2.17 Employee Conduct, Section 6, Staff Discipline, and Administrative Directive 6.12 Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 21, Disciplinary Sanctions, employees are subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies. During an investigative records (3) review, this Auditor found zero evidence of a disciplinary sanction nor reports to law enforcement for violations of CDOC sexual abuse or sexual harassment policies during this reporting period.</p>

115.76 (b): Termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual abuse.

PAQ 115.76 (b)-1 Bridgeport Correctional Center confirmed that in the past 12 months, the number of staff from the facility who have violated agency sexual abuse or sexual harassment policies: was 0.

PAQ 115.76 (b)-2 Bridgeport Correctional Center confirmed that in the past 12 months, 0 staff members have been terminated (or resigned prior to termination) for violating agency sexual abuse or sexual harassment policies.

According to Administrative Directive 2.17 Employee Conduct, Section 6, Staff Discipline, and Administrative Directive 6.12 Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 21, Disciplinary Sanctions, employees are subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies. During an investigative records review, this Auditor found zero evidence of termination of an employee as a disciplinary sanction for violating CDOC sexual abuse or sexual harassment policies. During an investigative records (3) review, this Auditor found zero evidence of reports to law enforcement for violations of CDOC sexual abuse or sexual harassment policies during this reporting period.

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. During an investigative records review, this Auditor found zero evidence of disciplinary sanction such as termination of an employee as a disciplinary sanction for violating CDOC sexual abuse or sexual harassment policies. During an investigative records (3) review, this Auditor found zero evidence of reports to law enforcement for violations of CDOC sexual abuse or sexual harassment policies during this reporting period.

PAQ 115.76 (c)-1 Bridgeport Correctional Center indicated 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.

PAQ 115.76 (c)-2 Bridgeport Correctional Center confirmed that 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): was 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. During an investigative records review, this Auditor found zero evidence of disciplinary sanction

	<p>such as termination of an employee as a disciplinary sanction for violating CDOC sexual abuse or sexual harassment policies. During an investigative records (3) review, this Auditor found zero evidence of reports to law enforcement for violations of CDOC sexual abuse or sexual harassment policies during this reporting period.</p> <p>PAQ 115.76 (d)-1 Bridgeport Correctional Center 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, are reported to law enforcement agencies (unless the activity was clearly not criminal) and to any relevant licensing bodies.</p> <p>PAQ 115.76 (d)-2 Bridgeport Correctional Center confirmed that 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: was 0.</p> <p>During an investigative records review, this Auditor found zero evidence of disciplinary sanction such as termination of an employee as a disciplinary sanction for violating CDOC sexual abuse or sexual harassment policies. During an investigative records (3) review, this Auditor found zero evidence of reports to law enforcement for violations of CDOC sexual abuse or sexual harassment policies during this reporting period.</p> <p><b>Evidence relied upon:</b></p> <ol style="list-style-type: none"> <li>1. Pre-audit Questionnaire</li> <li>2. CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention (effective date 07/20/2015)</li> <li>3. CDOC Administrative Directive 2.17 Employee Conduct (effective date 09/26/2014)</li> <li>4. <b>Examination of gate closures (2)</b></li> <li>5. <b>Examination of investigations associated with the gate closures</b></li> <li>6. <b>Interview with the PREA Coordinator regarding investigations</b></li> </ol> <p><b>Conclusion:</b></p> <p>Based on the evidence relied upon in making the compliance determination for this standard, the Auditor's analysis and reasoning, and the Auditor's conclusions, this standard is determined to be compliant. This standard complies with all material requirements for the relevant period.</p>
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<b>115.77</b>	<b>Corrective action for contractors and volunteers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>

Administrative Directive 6.12 Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Section 21, Disciplinary Sanctions, and Administrative Directive 10.4 – Volunteer and Recreation Services address this standard.

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.

PAQ 115.77 (a)-1 CDOC confirmed that the agency policy requires that any contractor or volunteer who engages in sexual abuse be reported to law enforcement agencies (unless the activity was clearly not criminal) and to relevant licensing bodies.

PAQ 115.77 (a)-2 CDOC confirmed that the agency policy requires that any contractor or volunteer who engages in sexual abuse be prohibited from contact with inmates.

PAQ 115.77 (a)-3 CDOC confirmed that in the past 12 months, “no” contractors or volunteers have been reported to law enforcement agencies and relevant licensing bodies for engaging in sexual abuse of inmates.

115.77 (a)-4 Bridgeport Correctional Center confirmed that in the past 12 months, the number of contractors or volunteers reported to law enforcement for engaging in sexual abuse of inmates was 0.

According to Administrative Directive 6.12 Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Section 21, Disciplinary Sanctions, and Administrative Directive 10.4 – Volunteer and Recreation Services, 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. During this reporting period and a review of investigative documents, the Auditor found zero evidence that any contractor or volunteer had engaged in sexual abuse as prohibited in CDOC policy. During an interview with the Captain of the PREA Unit, he confirmed that there was zero evidence that any contractor or volunteer had engaged in sexual abuse as prohibited in CDOC policy.

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.

PAQ 115.77 (b)-1 indicates that 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, as confirmed during an interview with the Warden. The Warden also indicated that Bridgeport would take appropriate remedial measures, and consider 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.

**Evidence relied upon:**

	<ol style="list-style-type: none"> <li>1. Pre-audit Questionnaire</li> <li>2. CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention (effective date 07/20/2015)</li> <li>3. CDOC Administrative Directive 10.4, Volunteer and Recreation Services (effective date 06/29/2018)</li> <li>4. <b>PAQ 115.77 (a)-1 CDOC confirmed that the agency policy requires that any contractor or volunteer who engages in sexual abuse be reported to law enforcement agencies (unless the activity was clearly not criminal) and to relevant licensing bodies.</b></li> <li>5. <b>PAQ 115.77 (a)-3 CDOC confirmed that in the past 12 months, “no” contractors or volunteers have been reported to law enforcement agencies and relevant licensing bodies for engaging in sexual abuse of inmates.</b></li> <li>6. <b>Review of gate closure documentation</b></li> <li>7. <b>Review of relevant investigations</b></li> </ol> <p><b>Conclusion:</b></p> <p>Based on the evidence relied upon in making the compliance determination for this standard, the Auditor's analysis and reasoning, and the Auditor's conclusions, this standard is determined to be compliant. This standard complies with all material requirements for the relevant period.</p>
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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>Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Section 21, Inmate Discipline, and Administrative Directive 9.5, Code of Penal Discipline address this standard.</p> <p>115.78 (a): 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.</p> <p>PAQ 115.78 (a)-1 Bridgeport Correctional Center confirmed that offenders 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.</p> <p>PAQ 115.78 (a)-2 Bridgeport Correctional Center confirmed that offenders are subject to disciplinary sanctions only pursuant to a formal disciplinary process following a criminal finding of guilt for inmate-on-inmate sexual abuse.</p>



PAQ 115.78 (a)-3 Bridgeport Correctional Center confirmed that in the past 12 months, the number of administrative findings of inmate-on-inmate sexual abuse that have occurred at the facility: was 0.

PAQ 115.78 (a)-4 Bridgeport Correctional Center confirmed that in the past 12 months, the number of criminal findings of guilt for inmate-on-inmate sexual abuse that have occurred at the facility: was 0.

According to Administrative Directive 6.12 Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Section 21, Inmate Discipline and Administrative Directive 9.5 Code of Penal Discipline, 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 as confirmed in PAQ 115.78 (a)-1 Inmates are subject to disciplinary sanctions only under a formal disciplinary process following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse. This Auditor reviewed investigative reports from this review period. Zero investigative reports indicated sanctioned inmate discipline related to sexual abuse or sexual harassment.

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.

According to Administrative Directive 6.12 Inmate Sexual Abuse and Sexual Harassment Prevention and Intervention, Section 21, Inmate Discipline, and Administrative Directive 9.5,e of Penal Discipline, 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. This Auditor reviewed investigative reports from this review period. Zero investigative reports indicated sanctioned inmate discipline related to sexual abuse or sexual harassment.

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 Administrative Directive 6.12 Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Section 21, Inmate Discipline and Administrative Directive 9.5 Code of Penal Discipline, 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. This Auditor reviewed investigative reports from this review period. Zero investigative reports indicated sanctioned inmate discipline related to sexual abuse or sexual harassment.

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.

PAQ 115.78 (d)-1 Bridgeport Correctional Center confirmed that the facility offers therapy, counseling, or other interventions designed to address and correct the underlying reasons or motivations for abuse.

PAQ 115.78 (d)-2 Bridgeport Correctional Center confirmed that 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.

According to Administrative Directive 6.12 Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Section 21, Inmate Discipline, 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 (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.

PAQ 115.78 (e)-1 CDOC confirmed that the agency disciplines offenders for sexual conduct with staff only upon finding that the staff member did not consent to such contact.

According to Administrative Directive 6.12 Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Section 21, Inmate Discipline, CDOC may discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact. This Auditor reviewed investigative reports from this review period. Zero investigative reports indicated sanctioned inmate discipline related to sexual abuse or sexual harassment.

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.

According to Administrative Directive 6.12 Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Section 21, Inmate Discipline, 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. This Auditor reviewed investigative reports (3) from this review period. Zero investigative reports indicated sanctioned inmate discipline related to sexual abuse or sexual harassment.

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.

	<p>PAQ 115.78 (g)-1 CDOC confirmed that the agency prohibits all sexual activity between inmates.</p> <p>PAQ 115.78 (g)-2 Bridgeport Correctional Center confirmed that 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.</p> <p>According to Administrative Directive 6.12 Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Section 21, Inmate Discipline, CDOC has, in its discretion, prohibited 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. The Warden, during his interview, confirmed that CDOC prohibits all sexual activity between inmates and may discipline inmates for such activity.</p> <p><b>Evidence relied upon:</b></p> <ol style="list-style-type: none"> <li>1. Pre-audit Questionnaire</li> <li>2. CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention (effective date 07/20/2015)</li> <li>3. CDOC Administrative Directive 9.5, Code of Penal Discipline (effective date 10/01/2019)</li> <li>4. Interview with the facility Warden</li> <li>5. Interview with a medical practitioner</li> <li>6. Interview with a mental practitioner</li> <li>7. <b>Review of disciplinary reports with sanctions imposed</b></li> </ol> <p><b>Conclusion:</b></p> <p>Based on the evidence relied upon in making the compliance determination for this standard, the Auditor's analysis and reasoning, and the Auditor's conclusions, this standard is determined to be compliant. This standard complies with all material requirements for the relevant period.</p>
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<b>115.81</b>	<b>Medical and mental health screenings; history of sexual abuse</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Connecticut Department of Correction, Administrative Directive 6.12 Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Section 11, Screening for Risk of Victimization and Abusiveness, Administrative Directive 8.5 Mental Health Services,</p>

Administrative Directive, 8.1, Scope of Health Care, Administrative Directive, **Administrative Directive 8.13, Sex Offender Programs** and CDOC Form CN 4401/1, Authorization to Obtain and/or Disclose Protected Health Information addresses this standard.

115.81 (a): If the screening pursuant to § 115.41 indicates that a prison/jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in 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 Bridgeport Correctional Center confirmed that all inmates at this facility who have disclosed any prior sexual victimization during a screening pursuant to §115.41 are offered a follow-up meeting with a medical or mental health practitioner.

PAQ 115.81 (a)-2 Bridgeport Correctional Center confirmed that a follow-up meeting is offered within 14 days of the intake screening.

PAQ 115.81 (a)-3 Bridgeport Correctional Center confirmed that 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 was 100.

PAQ 115.81 (a)-4 Bridgeport Correctional Center confirmed that medical and mental health staff maintain secondary materials (e.g., forms and logs) documenting compliance with the above-required services.

According to Administrative Directive 6.12 Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Section 11, Screening for Risk of Victimization and Abusiveness and Administrative Directive 8.5 Mental Health Services, 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.

During the facility audit, a medical practitioner staff responsible for risk screening confirmed that 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. Further, during an interview with a mental health practitioner, confirmed that 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. The number of inmates who disclosed sexual victimization at risk screening during the onsite portion of this audit was zero, as confirmed by both medical and mental practitioners who were sampled during the audit. The number of inmates entering and discharging from

Bridgeport is fluid. It is conceivable that victims with a history of victimization were discharged or were transferred before the onsite portion of this audit began.

115.81 (b): If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, 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 Bridgeport Correctional Center is a prison. Also, Bridgeport Correctional Center confirmed that 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.

PAQ 115.81 (b)-2 Bridgeport Correctional Center confirmed that the follow-up meeting was offered within 14 days of the intake screening.

PAQ 115.81 (b)-3 Bridgeport Correctional Center indicates that in the past 12 months, the percentage 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 was 100.

PAQ 115.81 (b)- 4 Bridgeport Correctional Center confirmed that mental health staff maintain secondary materials (e.g., form, log) documenting compliance with the above required services.

According to Administrative Directive 6.12 Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Section 11, Screening for Risk of Victimization and Abusiveness and Administrative Directive 8.5 Mental Health Services, 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 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.

Administrative Directive 8.1, Sex Treatment Services, indicates that medical practitioners and DOC shall ensure that all sentenced inmates with sex treatment classification scores of 2 or greater have access to sex offender programming consistent with **Administrative Directive 8.13, Sex Offender Programs**. Further the same directive, Section R, Mental Health Services directs contracted health services practitioners to provide mental health services consistent with community standards and based on current American Correctional Association (ACA) and National Commission on Correctional Health Care (NCCHC) standards, and under Administrative Directives 8.5, Mental Health Services.

During the facility audit, a medical practitioner confirmed that if the screening under § 115.41 indicates that 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 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. Further, during an interview with a mental health practitioner, they

confirmed that 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, 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 (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.

PAQ 115.81 (d)-1 Bridgeport Correctional Center confirmed that the information related to sexual victimization or abusiveness that occurred in an institutional setting is strictly limited to medical and mental health practitioners.

According to Administrative Directive 6.12 Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Section 11, Screening for Risk of Victimization and Abusiveness and Administrative Directive 8.5 Mental Health Services, 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 separate interviews with a sample of medical and mental health practitioners, staff responsible for risk screenings, each confirmed that 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. Sensitive personal information is maintained in an electronic medical record (EMR). Physical records were observed in a locked room with locked file cabinets.

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.

115.81 (e)-1 Bridgeport Correctional Center 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.

According to Administrative Directive 6.12 Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Section 11, Screening for Risk of Victimization and Abusiveness and Administrative Directive 8.5 Mental Health Services, medical and mental health practitioners are directed by policy to 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. During

separate interviews with a sample of medical and mental health practitioners and staff responsible for risk screenings, each confirmed a policy requirement to 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.

According to PAQ 115.81 (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. Consent from inmates to report prior sexual victimization that did not occur in an institutional setting is captured on CDOC Form CN 4401/1, Authorization to Obtain and/or Disclose Protected Health Information.

**Evidence relied upon:**

1. Pre-audit Questionnaire
2. CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention (effective date 07/20/2015)
3. Administrative Directive 8.5 Mental Health Services (effective date 12/30/2015)
4. Administrative Directive, 8.1, Scope of Health Care (effective date 11/02/2014)
5. **Administrative Directive 8.13, Problem Sexual Behavior Program (effective date 06/01/2023)**
6. **CDOC Form CN 4401/1, Authorization to Obtain and/or Disclose Protected Health Information**
7. **Examination of a sample health secondary material (corrective action)**
8. **Examined the electronic cloud platform termed Delta, to confirm compliance with this standard**
9. **Examined access to Delta, the electronic cloud platform to confirm confidentiality measures for sensitive PI**
10. **Facility tour and observations**
11. **Interview with PCM to clarify a PAQ response**
12. **Interview with a medical practitioner**
13. **Interview with a mental health practitioner**

**Conclusion:**

Based on the evidence relied upon in making the compliance determination for this standard, the Auditor's analysis and reasoning, and the Auditor's conclusions, this standard is determined to be compliant. This standard complies with all material requirements for the relevant period.

	<p data-bbox="256 118 959 152"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="256 197 544 230"><b>Auditor Discussion</b></p> <p data-bbox="256 275 1453 432">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 address this standard.</p> <p data-bbox="256 477 1453 633">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.</p> <p data-bbox="256 678 1453 745">PAQ 115.82 (a)-1 CDOC confirmed that inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services.</p> <p data-bbox="256 790 1453 902">PAQ 115.82 (a)-2 CDOC confirmed that the nature and scope of such services are determined by medical and mental health practitioners according to their professional judgment.</p> <p data-bbox="256 947 1453 1227">PAQ 115.82 (a)-3 CDOC confirmed that 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.</p> <p data-bbox="256 1272 1453 1462">Administrative Directive 6.12 Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 13, 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.</p> <p data-bbox="256 1507 1453 1664">115.82 (b): If no qualified medical or mental health practitioners are on duty when 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.</p> <p data-bbox="256 1709 1453 2067">According to Administrative Directive 6.12 Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 13, if no qualified medical or mental health practitioners are on duty when 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. During separate interviews with the PREA Coordinator, the Captain of the PREA Unit and the PCM each confirmed that if no qualified medical or mental health practitioners are on duty when a report of recent abuse is made, security staff first responders shall take preliminary steps to protect the victim pursuant to § 115.62 and</p>
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shall immediately notify the appropriate medical and mental health practitioners. Likewise, interviews with a sample of random first responders (security) each confirmed that if no qualified medical or mental health practitioners are on duty when 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.

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, under professionally accepted standards of care, where medically appropriate.

According to Administrative Directive 6.12 Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 13, inmate victims of sexual abuse while incarcerated shall be offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis under professionally accepted standards of care, where medically appropriate. Further, during an interview with a sample of medical and mental health practitioners, each confirmed that inmate victims of sexual abuse, while incarcerated, shall be offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis under professionally accepted standards of care where medically appropriate.

According to Administrative Directive 8.1 Scope of Health Services, Section H, contraception devices and medications for the purpose of contraception except when medically appropriate for a victim of sexual abuse while incarcerated, when discharged, an inmate may be referred to a family planning clinic.

115.82 (d): 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 out of the incident.

PAQ 115.82 (d)-1 Indicates treatment services are provided to every victim without financial cost, regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident, as confirmed during interviews with a medical practitioner. During this reporting period, the Captain of the PREA Unit indicated one allegation of sexual abuse and 2 sexual harassment. The inmate came forward some two months after, indicating the incident occurred. He indicated no witnesses, and no aggressors were named. DNA evidence could not be obtained. The incident was determined to be unfounded/unsubstantiated. The finding is unclear. The investigation was referred back to the PREA Unit for clarification.

According to Administrative Directive 6.12 Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 13, 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 out of the incident. Interviews with a sample of medical and mental health practitioners confirm AD 6.12 and 8.1.

**Evidence relied upon:**

	<ol style="list-style-type: none"> <li>1. Pre-audit Questionnaire</li> <li>2. CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention (effective date 07/20/2015)</li> <li>3. CDOC Administrative Directive, 8.1, Scope of Health Care (effective date 11/02/2014)</li> <li>4. Examination of a sample health secondary material in Delta</li> <li>5. Interview with a medical practitioner</li> <li>6. Interview with a mental health practitioner</li> <li>7. Interview with offenders who reported sexual abuse</li> <li>8. Examination of relevant investigative reports of sexual abuse</li> <li>9. Examination of referral in Delta</li> </ol> <p><b>Corrective Action:</b></p> <ol style="list-style-type: none"> <li>1. 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. During this reporting period, The Captain of the PREA Unit indicated one allegation of sexual abuse. The inmate came forward some two months after, indicating the incident occurred. He indicated no witness and no aggressor were named. DNA evidence could not be obtained. The incident was determined to be unfounded/unsubstantiated. The finding is unclear. The investigation was referred back to the PREA Unit for clarification.</li> </ol> <p><b>Conclusion:</b></p> <p>Based on the evidence relied upon in making the compliance determination for this standard, the Auditor's analysis, sampling and reasoning, and the Auditor's conclusions, this standard is determined to be compliant. This standard complies with all material requirements for the relevant period.</p>
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<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
	<b>Auditor Discussion</b>
	<p>Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, and Administrative Directive 8.1, Scope of Health Services address this standard.</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</p>

any prison, jail, lockup, or juvenile facility.

PAQ 115.83 (a)-1 Bridgeport Correctional Center confirmed 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.

According to the Connecticut Department of Correction, Administrative Directive 6.12 Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Section 13, Medical Staff Action, 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. PAQ 115.83 (a)-1 indicates that Bridgeport 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, as confirmed by a sample of medical and mental health practitioners interviewed during the audit. By examination of an investigative sexual abuse document (1), this Auditor determined that the victim was provided medical and mental health support by Bridgeport after the inmate came forward some two months after the alleged incident occurred.

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.

By examination of an investigative sexual abuse document (1), this Auditor determined that the victim was provided medical and mental health support by Bridgeport after the inmate came forward some two months after the alleged incident occurred. 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. By examination of an investigative sexual abuse document (1), this Auditor determined that the victim was provided medical and mental health support by Bridgeport after the inmate came forward some two months after the alleged incident occurred.

115.83 (c): The facility shall provide such victims with medical and mental health services consistent with the community level of care.

According to the 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, Section 11, Continuity of Care, the facility shall provide such victims with medical and mental health services consistent with the community level of care. In separate interviews, a sample of medical and mental health practitioners confirmed that Bridgeport provides victims with medical and mental health services consistent with the community level of care.

115.83 (d): Inmate victims of sexually abusive vaginal penetration while incarcerated

shall be offered pregnancy tests.

PAQ 115.83 (d)-1 Bridgeport Correctional Center indicated "not applicable," female victims of sexual abusive vaginal penetration while incarcerated are offered pregnancy tests.

Where applicable, CDOC provides inmate victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests. It should be noted that Bridgeport is an adult male facility with zero transgender males assigned during this audit period.

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.

PAQ 115.83 (e)-1 Bridgeport Correctional Center "not applicable," 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.

Where applicable, 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. It should be noted that Bridgeport is an adult male facility with zero transgender males assigned during this audit period.

115.83 (f): Inmate victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections as medically appropriate.

PAQ 115.83 (f)-1 Bridgeport Correctional Center confirmed that offenders victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate.

According to the 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, Section H, inmate victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections as medically appropriate contraception devices and medications for the purpose of contraception except when medically appropriate for a victim of sexual abuse while incarcerated, when discharged, an inmate may be referred to a family planning clinic.

115.83 (g): 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 out of the incident.

PAQ 115.83 (g)-1 Bridgeport Correctional Center confirmed that treatment services are provided to the victim without financial cost, regardless of whether the victim names the abuser or cooperates with any investigation arising from the incident.

During the interview process, the medical practitioner sampled confirmed that all treatment services are provided to alleged victims without financial cost, regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

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.

PAQ 115.83 (h)-1 Bridgeport Correctional Center confirmed that 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.

According to the Connecticut Department of Correction, Administrative Directive 6.12 Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Section 13, Medical Staff Action, all prisons will 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 as confirmed by a sample mental health practitioner interviewed during this audit.

**Evidence relied upon:**

1. Pre-audit Questionnaire
2. CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention (effective date 07/20/2015)
3. CDOC Administrative Directive, 8.1, Scope of Health Care (effective date 11/02/2014)
4. Facility tour and observations
5. Interview with a medical practitioner
6. Interview with a mental health practitioner
7. **Interview with an offender who reported sexual abuse**
8. **Examination of medical records that demonstrate victims received medical and mental health services**
9. **Examination of treatment records that support sexual abuse victims was offered tests for sexually transmitted infection where medically appropriate.**
10. Examination of secondary documentation from **St. Vincent Hospital, SANE Examiner**

**Conclusion:**

Based on the evidence relied upon in making the compliance determination for this standard, the Auditor's analysis, sampling and reasoning, and the Auditor's conclusions, this standard is determined to be compliant. This standard complies with all material requirements for the relevant period.

115.86	Sexual abuse incident reviews
	<p data-bbox="256 185 959 219"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="256 264 544 297"><b>Auditor Discussion</b></p> <p data-bbox="256 342 1437 421">Connecticut Department of Correction, Administrative Directive 6.12 Inmate Sexual Abuse Sexual Harassment Prevention and Intervention addresses this standard.</p> <p data-bbox="256 454 1469 577">115.86 (a): The facility shall conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded.</p> <p data-bbox="256 611 1417 768">115.86 (a)-1 Bridgeport Correctional Center confirmed that the facility conducts a sexual abuse incident review at the conclusion of every criminal or administrative sexual abuse investigation, unless the allegation has been determined to be unfounded.</p> <p data-bbox="256 801 1477 1305">According to the 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, the facility shall conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded. By examination, Bridgeport investigated 3 PREA-related incidents during this reporting period, 2 sexual harassment and one sexual abuse allegations. All were unfounded; therefore, incident reviews are not required. During an interview with the PCM, he confirmed the requirement under AD 6.12, Section 22, Review by Facility of Sexual Abuse Incidents to conduct an 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.</p> <p data-bbox="256 1339 1453 1417">115.86 (b): Such review shall ordinarily occur within 30 days of the conclusion of the investigation.</p> <p data-bbox="256 1451 1461 1574">PAQ 115.86 (b)-1 Bridgeport Correctional Center confirmed that the facility ordinarily conducts a sexual abuse incident review within 30 days of the conclusion of the criminal or administrative sexual abuse investigation.</p> <p data-bbox="256 1608 1477 1776">PAQ 115.86 (b)-2 Bridgeport Correctional Center confirmed that in the past 12 months, the number of criminal and/or administrative investigations of alleged sexual abuse completed at the facility that were followed by a sexual abuse incident review within 30 days, excluding only "unfounded" incidents: was 0.</p> <p data-bbox="256 1809 1477 2101">According to the 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, the facility shall conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded. By examination, Bridgeport investigated 3 PREA-related incidents during this reporting period, 2 sexual harassment and one sexual abuse allegations.</p>

All were unfounded; therefore, incident reviews are not required. During an interview with the PCM, he confirmed the requirement under AD 6.12, Section 22, Review by Facility of Sexual Abuse Incidents to conduct an 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 but within 30 days of the conclusion of the investigation.

115.86 (c): The review team shall include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners.

PAQ 115.86 (c)-1 Bridgeport Correctional Center confirmed 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.

According to the 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, the review team shall include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners. The PCM confirmed that an incident review would include members of upper management with input from line supervisors, investigators, and medical or mental health practitioners. Bridgeport investigated 3 PREA-related incidents during this reporting period: 2 sexual harassment and one sexual abuse allegation. All were unfounded; therefore, incident reviews are not required.

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.

PAQ 115.86 (d)-1 Bridgeport Correctional Center confirmed 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.

During the facility audit, this Auditor interviewed a member of the incident review team. That team member confirmed that the team would (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. Bridgeport investigated 3 PREA-related incidents during this reporting period: 2 sexual harassment and one sexual abuse allegation. All were unfounded; therefore, incident reviews are not required.

115.86 (e): The facility shall implement the recommendations for improvement or shall document its reasons for not doing so.

PAQ 115.86 (e)-1 Bridgeport Correctional Center confirmed that the facility implements the recommendations for improvement or documents its reasons for not doing so.

According to the 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, Bridgeport investigated 3 PREA-related incidents during this reporting period, 2 sexual harassment and one sexual abuse allegation. All were unfounded; therefore, incident reviews are not required. During an interview with the PCM he confirmed that the facility would implement the recommendations for improvement or document its reasons for not doing so.

**Evidence relied upon:**

1. Pre-audit Questionnaire
2. CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention (effective date 07/20/2015)
3. Documentation of sexual abuse review
4. Sample documentation of completed criminal investigations
5. Sample documentation of completed administrative investigations
6. Interview with the facility Warden
7. Interview with the PCM
8. **Interview with a member of the PREA Committee (Incident Review Team)**
9. **Documentation of review team minutes or report and findings**
10. **Select documentation supporting the implementation of recommendations of the incident review team**
11. **Select documentation of reasons for not implementing recommendations**



	<p><b>Conclusion:</b></p> <p>Based on the evidence relied upon in making the compliance determination for this standard, the Auditor's analysis, sampling and reasoning, and the Auditor's conclusions, this standard is determined to be compliant. This standard complies with all material requirements for the relevant period.</p> <p><b>Conclusion:</b></p>
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<b>115.87</b>	<b>Data collection</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></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 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>PAQ 15.87 (a)-1 CDOC confirmed 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>According to Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, Section 23, Internal Reporting, 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. During an interview with the PREA Coordinator, he confirmed for the Auditor that he collects accurate data from each CDOC facility, including 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> <p>According to Administrative Directive 6.12, Inmate According to Sexual Abuse Sexual Harassment Prevention and Intervention, Section 23, Internal Reporting, all sexual abuse and sexual harassment incidents are documented on form CN 6601, Incident Report under Administrative Directive 6.6, Reporting of Incidents and included in the monthly STARS report per Administrative Directive 1.6, Monthly and Annual Reports. Each documented report of sexual abuse and sexual harassment shall be reviewed by</p>

the facility's PREA Compliance Manager. Such review shall be documented on CN 61203, PREA Incident Post-Investigation Facility Review. The STARS report shall list all the reports of sexual abuse/ sexual harassment, including substantiated, unsubstantiated, and unfounded allegations. The same information is compiled for residential/community facilities with which the CDOC contracts to house inmates.

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.

PAQ 115.87 (c)-1 CDOC confirmed that the standardized instrument employed by the agency includes, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence (SSV) conducted by the Department of Justice.

According to Administrative Directive 6.12, Inmate According to Sexual Abuse Sexual Harassment Prevention and Intervention, Section 23, Internal Reporting and by examination the data collected, 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.

According to the PREA Coordinator, the incident-based data collected by the agency from each CDOC facility 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. A sample of incident-based and aggregated data from CDOC-run facilities and a private facility on the agency's formal website confirmed this substandard.

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.

According to Administrative Directive 6.12, Inmate According to Sexual Abuse Sexual Harassment Prevention and Intervention, Section 23, the PREA Coordinator maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews, from each CDOC facility. The agency PREA Coordinator shall review data collected and aggregated to assess and improve the effectiveness of the Department's sexual abuse prevention, detection, and response, policies, practices, and training by (1) identifying problem areas; (2) recommending corrective action on an ongoing basis; and (3) preparing an annual report of the findings and corrective actions for each facility as well as the Department as a whole. This 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. The Commissioner shall approve the report and be made readily available to the public through the Department's website. Before being made publicly available, information that would present a safety and security threat to the public can be redacted from the report with an explanation as to the nature of the redacted information.

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.

PAQ 115.87 (e)-1 CDOC confirmed that the agency obtains incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates.

PAQ 115.87 (e)-2 CDOC confirmed that data from private facilities is complied with SSV reporting regarding content.

According to Administrative Directive 6.12, Inmate According to Sexual Abuse Sexual Harassment Prevention and Intervention, Section 23, Internal Reporting, all sexual abuse and sexual harassment incidents are documented on form CN 6601, Incident Report under Administrative Directive 6.6, Reporting of Incidents and included in the monthly STARS report per Administrative Directive 1.6, Monthly and Annual Reports. Each documented report of sexual abuse and sexual harassment shall be reviewed by the facility's PREA Compliance Manager. Such review shall be documented on CN 61203, PREA Incident Post-Investigation Facility Review. The STARS report shall list all the reports of sexual abuse/ sexual harassment, including substantiated, unsubstantiated, and unfounded allegations. The same information is complied for residential/community facilities with which the CDOC contracts for the housing of 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.

PAQ 115.87 (f)-1 CDOC confirmed that the agency provided the Department of Justice (DOJ) with data from the previous calendar year upon request.

According to Administrative Directive 6.12, Inmate According to Sexual Abuse Sexual Harassment Prevention and Intervention, Section 23, Internal Reporting, and as confirmed by the PREA Coordinator upon request, CDOC shall provide all such data from the previous calendar year to the Department of Justice no later than June 30.

**Evidence relied upon:**

1. Pre-audit Questionnaire
2. CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention (effective date 07/20/2015)
3. CDOC Administrative Directive 6.6, Reporting of Incidents (effective date 10/01/2018)
4. CDOC Administrative Directive 1.6, Monthly and Annual Reports (effective date 06/03/2022)
5. **Set of definitions**
6. **Data collection instrument**
7. **CDOC PREA Report App**
8. **Survey of Sexual Victimization (adult), Form SSV2, OMB No. 1121-0292 (effective date 06/07/2022)**

	<p>9. <b>Examination of Adult SSV Reports 2019, 2018, 2017, 2016, 2015, 2014, 2013, 2012 and 2011</b></p> <p>10. <b>Examination of the CDOC Sexual Abuse Prevention Program Annual Report, 2023, 2022, 2021</b></p> <p><b>Conclusion:</b></p> <p>Based on the evidence relied upon in making the compliance determination for this standard, the Auditor's analysis and reasoning, and the Auditor's conclusions, this standard is determined to be compliant. This standard complies with all material requirements for the relevant period.</p>
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<b>115.88</b>	<b>Data review for corrective action</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; Survey of Sexual Victimization (Form SSV-2); PREA Annual Data Report; and Website Address for CDOC <a href="https://portal.ct.gov/DOC/Miscellaneous/PREA">https://portal.ct.gov/DOC/Miscellaneous/PREA</a> address this standard.</p> <p>115.88 (a): The agency shall review data collected and aggregated pursuant to § 115.87 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.</p> <p>PAQ 115.88 (a)-1 CDOC confirmed 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:</p> <ul style="list-style-type: none"> <li>• Identifying problem areas;</li> <li>• Taking corrective action on an ongoing basis; and</li> <li>• 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.</li> </ul> <p>According to the Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, the agency shall review data collected and aggregated pursuant to § 115.87 to assess and improve the effectiveness of its sexual abuse prevention, detection, and response</p>

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.

During an interview with the PREA Coordinator, confirmed collecting the data for the agency, reviewing data collected and aggregated pursuant to § 115.87 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. Further, a review of the agency's formal website provided this Auditor with evidence that CDOC (1) Identifies problem areas, (2) Takes corrective action on an ongoing basis, and (3) Prepares an annual report of its findings and corrective actions for each facility, as well as the agency as a whole. The PREA Coordinator also confirmed that the report is reviewed and approved by the CDOC Commissioner before being posted on the agency's website.

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.

PAQ 115.88 (b)-1 CDOC confirmed that the annual report includes a comparison of the current year's data and corrective actions with those from prior years.

PAQ 115.88 (b)-2 CDOC confirmed that the annual report provides an assessment of the agency's progress in addressing sexual abuse.

By examination, this Auditor reviewed the CDOC's annual report and determined that the report included a comparison of the current year's data and corrective actions with those from prior years. The same report also provides an assessment of the agency's progress and identifies corrective action noted to address sexual abuse and improve the sexual safety of inmates and staff alike. This annual report was located on the CDOC formal website at: <https://portal.ct.gov/DOC/Miscellaneous/PREA>.

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.

PAQ 115.88 (c)-1 CDOC confirmed it makes annual reports readily available to the public at least annually through its website.

PAQ 115.88 (c)-3 CDOC confirmed the annual reports are approved by the agency head.

By examination, this Auditor reviewed the CDOC's annual report and determined that it was approved by the CDOC Commissioner agency head and made readily available to the public through its website. This annual report was located on the CDOC formal website at: <https://portal.ct.gov/DOC/Miscellaneous/PREA>.

	<p>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.</p> <p>PAQ 115.88 (d)-1 CDOC confirmed that when the agency redacts material from an annual report for publication, the redactions are limited to specific materials where publication would present a clear and specific threat to the safety and security of the facility.</p> <p>PAQ 115.88 (d)-2 CDOC confirmed that the agency indicates the nature of material redacted.</p> <p>According to the Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, 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.</p> <p><b>Evidence relied upon:</b></p> <ol style="list-style-type: none"> <li>1. Pre-audit Questionnaire</li> <li>2. CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention (effective date 07/20/2015)</li> <li>3. <b>CDOC Annual PREA Report 2023</b></li> <li>4. <b>CDOC Annual PREA Report 2022</b></li> <li>5. <b>CDOC Annual PREA Report 2021</b></li> <li>6. <b>Documentation of corrective action 2023</b></li> <li>7. Interview with the CDOC Commissioner</li> <li>8. Interview with the PREA Coordinator</li> <li>9. Interview with the PREA Compliance Manager</li> <li>10. <b>Internet search agency website where annual report is available</b></li> </ol> <p><b>Conclusion:</b></p> <p>Based on the evidence relied upon in making the compliance determination for this standard, the Auditor's analysis and reasoning, and the Auditor's conclusions, this standard is determined to be compliant. This standard complies with all material requirements for the relevant period.</p>
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<b>115.89</b>	<b>Data storage, publication, and destruction</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>

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.

PAQ 115.89 (a)-1 CDOC confirmed the agency ensures that incident-based and aggregate data are securely retained.

Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 23 indicates that CDOC shall ensure that data collected pursuant to § 115.87 are securely retained. During the interview with the PREA Coordinator, he indicated that the agency retains data under AD 6.12. Sensitive data is retained electronically with strict accessibility monitored and limited to staff who need to know.

During the facility tour, this Auditor observed physical storage areas where sensitive information/documentation (e.g., risk screening information, medical records, sexual abuse allegations) was collected and maintained in hard copy files, pursuant to the PREA Standards to determine whether the area was secured (e.g., key card, lock and key). The room contained a lock and the files were in locked cabinets with limited access. Computer stations were password-protected with electronic safeguards and role-based security. Informal conversation with Bridgeport staff indicated access to secure information, including medical and mental health files, sexual abuse and sexual harassment reports, etc. (e.g., where, how, and security of information is stored electronically and in hard copy, specifically who has access and how access is restricted) is limited based on role and area of responsibility.

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.

PAQ 115.89 (b)-1 CDOC confirmed that the agency policy requires that aggregated sexual abuse data from facilities under its direct control and private facilities with which it contracts, be made readily available to the public at least annually through its website.

By examination of the agency's website and according to the Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 23, the agency makes 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.

115.89 (c): The agency shall remove all personal identifiers before making aggregated sexual abuse data publicly available.

PAQ 115.89 (c)-1 CDOC confirmed that before making aggregated sexual abuse data publicly available, the agency removes all personal identifiers.

By examination of the agency's website this Auditor did not observe personal identifiers.

PAQ 115.89 (c)-2 CDOC indicated that the agency maintains sexual abuse data collected pursuant to §115.87 for at least 10 years after the date of initial collection, unless federal, state, or local law requires otherwise.

According to the Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, Section 23, before making aggregated sexual abuse data publicly available, the agency removes all personal identifiers.

115.89 (d): The agency shall maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the initial collection date unless Federal, State, or local law requires otherwise.

Connecticut Department of Correction (CDOC), Administrative Directive 6.12, Inmate Sexual Abuse Sexual Harassment Prevention and Intervention, indicates that data is retained securely for ten years, and criminal and administrative investigation records shall be retained for as long as the alleged abuser is incarcerated or employed by the agency, plus five (5) years. The Auditor reviewed data from previous years, as required by the PREA compliance standard.

**Observe the physical storage area of any information/documentation collected and maintained in hard copy pursuant to the PREA Standards (e.g., risk screening information, medical records, sexual abuse allegations) to determine if the area is secured (e.g., key card, lock and key).**

**Observe electronic safeguards of any information/documentation collected and maintained electronically pursuant to the PREA Standards (e.g., risk screening information) to determine how access to the information is secured (e.g., password protected, accessible only in certain areas, role-based security). Note that the Auditor may have to speak with the agency/facility information technology staff person to understand the secure storage of electronic information and who has access to that information.**

**Additionally, the auditor should:**

**Evidence relied upon:**



	<ol style="list-style-type: none"> <li>1. Pre-audit Questionnaire</li> <li>2. CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention (effective date 07/20/2015)</li> <li>3. Policy on data storage</li> <li>4. Interview with the PREA Coordinator</li> <li>5. Interview with the CDOC Commissioner</li> <li>6. Interview with the PREA Compliance Manager</li> <li>7. Facility tour and observations</li> <li>8. Examination of physical storage areas</li> <li>9. <b>Observed electronic safeguards of information electronically being stored</b></li> <li>10. <b>Observed physical storage of files in file cabinets with locked doors</b></li> <li>11. <b>Informal conversation with staff</b></li> <li>12. <b>Internet search for a website a sample of publicly available sexual abuse data confirm that personal identifiers have been removed</b></li> <li>13. <b>Review a sample of historical data since August 20, 2012</b></li> </ol> <p><b>Conclusion:</b></p> <p>Based on the evidence relied upon in making the compliance determination for this standard, the Auditor's analysis and reasoning, and the Auditor's conclusions, this standard is determined to be compliant. This standard complies with all material requirements for the relevant period.</p>
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115.401	Frequency and scope of audits
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <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></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>According to the PREA Coordinator, during the three-year period starting on August 20, 2013, and during each three-year period thereafter, CDOC has ensured that each facility operated by the agency or by a private organization on behalf of the agency is audited at least once.</p> <p>115.401 (b): 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 during each one-year period.</p>

	<p>According to the PREA Coordinator, starting in August 20, 2013, CDOC ensured 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 during each one-year period.</p> <p>115.401 (h): The Auditor shall have access to and shall observe all areas of the audited facilities.</p> <p>The Auditor had access to and observed all areas of the audited facility.</p> <p>115.401 (i): The Auditor shall be permitted to request and receive copies of any relevant documents (including electronically stored information).</p> <p>The Auditor was permitted to request and receive copies of any relevant documents (including electronically stored information).</p> <p>115.401 (m): The Auditor shall conduct private interviews with inmates.</p> <p>The Auditor was allowed 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>Inmates were permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel.</p> <p><b>Evidence relied upon:</b></p> <ol style="list-style-type: none"> <li>1. Pre-audit Questionnaire</li> <li>2. CDOC Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention (effective date 07/20/2015)</li> <li>3. Offender interviews</li> <li>4. Staff Interviews</li> <li>5. Facility tour and observations</li> </ol> <p><b>Conclusion:</b></p> <p>Based on the evidence relied upon in making the compliance determination for this standard, the Auditor's analysis and reasoning, and the Auditor's conclusions, this standard is determined to be compliant. This standard complies with all material requirements for the relevant period.</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>

Connecticut Department of Corrections publicly accessible website:  
<https://portal.ct.gov/DOC/Org/PREA-Unit>

115.403 (f): The agency shall ensure that the auditor's final report is published on its website if it has one, or is otherwise made readily available to the public.

By examination, this Auditor determined that CDOC final reports are published on its website.

**Evidence relied upon:**

1. Final report for previous cycle
2. Facility tour and observation

**Conclusion:**

Based on the evidence relied upon in making the compliance determination for this standard, the Auditor's analysis and reasoning, and the Auditor's conclusions, this standard is determined to be compliant. This standard complies with all material requirements for the relevant period.

<b>Appendix: Provision Findings</b>		
<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.)	na
<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).)	na
<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).)	na
	In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
<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).)	na
	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
<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.)	yes
	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	yes

	facility does not have female inmates.)	
<b>115.15 (c)</b>	<b>Limits to cross-gender viewing and searches</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>	<b>Limits to cross-gender viewing and searches</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>	<b>Limits to cross-gender viewing and searches</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>	<b>Limits to cross-gender viewing and searches</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



115.16 (a)	Inmates with disabilities and inmates who are limited English proficient	
	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?	no
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	no
<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?	no
<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>	<b>Hiring and promotion decisions</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>	<b>Hiring and promotion decisions</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>	<b>Hiring and promotion decisions</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?	no
<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.)	yes
	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) 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) 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) 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)</b>	<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)</b>	<b>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)</b>	<b>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)</b>	<b>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)</b>	<b>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)</b>	<b>Inmate education</b>	
	Does the agency maintain documentation of inmate participation in these education sessions?	no
<b>115.33 (f)</b>	<b>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)</b>	<b>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)</b>	<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

	Garrrity 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)</b>	<b>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)</b>	<b>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

	suspicious 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.)	no
<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)</b>	<b>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)</b>	<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)</b>	<b>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 decree, 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 decree, 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)</b>	<b>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)</b>	<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)</b>	<b>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 EVERY 30 DAYS?	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)</b>	<b>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)</b>	<b>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)</b>	<b>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)</b>	<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)</b>	<b>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)</b>	<b>Exhaustion of administrative remedies</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)</b>	<b>Exhaustion of administrative remedies</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)</b>	<b>Exhaustion of administrative remedies</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,	yes

	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	no



	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?	no
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	no
	Except in instances where the agency determines that a report of	no

	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?	no
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?	no
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	no
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	no
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?	no
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	no
<b>115.67 (d)</b>	<b>Agency protection against retaliation</b>	
	In the case of inmates, does such monitoring also include periodic status checks?	no
<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?	no

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

	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?	no
<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.)	na
<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.)	na
<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.)	yes
	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.)	na
	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.)	na
<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)	
	<div data-bbox="320 185 1273 555"> <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> </div> <div data-bbox="1302 185 1353 219">yes</div>