

Virginia Department of Corrections

Authority, Inspection, and Auditing

Operating Procedure 038.3

Prison Rape Elimination Act (PREA)

Authority:

Directive 038, Incident Reporting

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REVIEW

The Content Owner will review this operating procedure annually and re-write it no later than three years after the effective date.

COMPLIANCE

This operating procedure applies to all units operated by the Virginia Department of Corrections. Practices and procedures must comply with applicable State and Federal laws and regulations, ACA standards, PREA standards, and DOC directives and operating procedures.

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PURPOSE

This operating procedure provides guidance for the Department of Corrections on the requirements of the Prison Rape Elimination Act (PREA) of 2003 and compliance with the *Prison Rape Elimination Act National Standards*.

PROCEDURE

- I. Prison Rape Elimination Act (PREA)
 - A. The Prison Rape Elimination Act (PREA) signed into law in 2003 is found in 34 U.S.C. Chapter 303, *Prison Rape Elimination*, and established the requirement for the adoption of national standards for the prevention, detection, and reduction of sexual abuse and sexual harassment in confinement. (See 28 CFR Part 115, *Prison Rape Elimination Act National Standards*.)
 - B. This operating procedure applies to all staff, contractors, volunteers, offenders, and all persons who conduct business with the Virginia Department of Corrections (DOC).
 - C. Compliance with PREA is a priority for the DOC and this agency strives to provide a safe environment where offenders are free from sexual misconduct and makes every effort to detect, prevent, and reduce sexual abuse, assault, harassment, and misconduct.
 - 1. The Director has designated the PREA/ADA Supervisor as the statewide PREA coordinator to work in the office of the Chief of Corrections Operations with sufficient time and authority to develop, implement, and oversee DOC efforts to comply with the *Prison Rape Elimination Act (PREA) National Standards* in all DOC facilities. (§115.11[b], §115.211[b])
 - 2. Regional PREA Analysts have been designated to oversee facility efforts to comply with the *PREA National Standards* and to direct facility PREA activities within in their assigned Region.
 - 3. Each Facility Unit Head has designated a PREA Compliance Manager, with sufficient time and authority, to coordinate the facility's efforts to comply with the *PREA National Standards*. (§115.11[c])
 - D. The DOC has a Zero Tolerance Policy that strictly prohibits any fraternization, sexual misconduct by staff, contractors, or volunteers with offenders, or between offenders as defined in this operating procedure. The DOC actively works to prevent, detect, report, and respond to any violation. (5-3D-4281-6; \$115.11[a], \$115.211[a])
 - 1. All staff, contractors, and volunteers are expected to provide a positive role model for offenders, promote a safe, secure, and healing environment, and observe the rules of conduct established in Operating Procedure 135.2, *Rules of Conduct Governing Employees Relationships with Offenders*, when interacting with offenders. (5-3D-4281-6; 4-4281-6)
 - a. Any behavior of a sexual nature (abuse, assault, harassment, misconduct) between staff, volunteers, or contractors, and offenders, regardless of consensual status, is prohibited and may be prosecuted under the Code of Virginia. (4-ACRS-6A-05; 2-CO-1C-11)
 - b. Sexual conduct by staff, volunteers, and contractors with offenders is a violation of <u>COV</u> §18.2-64.2 and §18.2-67.4.
 - c. Staff are further subject to a Group III offense under Operating Procedure 135.1, *Standards of Conduct*. Termination is the presumptive discipline for violations.
 - i. Any violation of Operating Procedure 135.2, *Rules of Conduct Governing Employees Relationships with Offenders*, will result in disciplinary action as outlined in Operating Procedure 135.1, *Standards of Conduct*, and the staff member may be subject to possible criminal prosecution.
 - ii. Staff with knowledge of fraternization or sexual misconduct by staff, contractors, or volunteers with offenders have a duty to report, and any staff member who fails to report such behavior may be subject to disciplinary action.

- 2. Through contracts and Board of Corrections operating standards, facilities and jails that contract for the confinement of DOC offenders must include in any new contract or contract renewal the entity's obligation to adopt and comply with the PREA standards. (§115.12[a], §115.212[a]) Any new contract or contract renewal will provide for DOC contract monitoring to ensure that the contractor is complying with the PREA standards. (§115.12[b], §115.212[b])
- 3. DOC has zero tolerance for offender-on-offender sexual harassment, assault, or abuse. (4-ACRS-6A-05; 2-CO-1C-11)
 - a. Sexual harassment, assault, and abuse by incarcerated offenders is prohibited and subject to disciplinary action per Operating Procedure 861.1, *Offender Discipline, Institutions*, and Operating Procedure 940.4, *Community Corrections Alternative Program*, and may result in criminal charges.
 - b. Consensual sexual activity among offenders is prohibited. Offenders who engage in this type of activity will be subject to disciplinary action in accordance with Operating Procedure 861.1 *Offender Discipline, Institutions*, and Operating Procedure 940.4, *Community Corrections Alternative Program*.

II. Prevention

A. Offender Training

- 1. All offenders newly received into the DOC from a jail or other non-DOC facility will receive information explaining the DOC's Zero Tolerance Policy for sexual abuse and sexual harassment and instructions on how to report incidents or suspicions of sexual abuse or sexual harassment. (5-3D-4281-1; 4-4281-1; §115.33[a], §115.233[a])
 - a. This information must be communicated verbally and in writing, in language clearly understood by the offender and will include the following topics: (5-3D-4281-1; 4-4281-1)
 - i. Definition of sexual misconduct/assault, and behaviors prohibited by staff, contractors, volunteers and offenders
 - ii. DOC Zero Tolerance Policy
 - iii. Prevention/ Intervention
 - iv. Self-protection
 - v. Reporting sexual abuse/assault/harassment
 - vi. Treatment and counseling
 - vii. Offender telephone sexual abuse Hotline Number #55
 - viii. Free Emotional Support through Hotline Number #55, Option 2
 - b. Facilities must make arrangements for offenders that speak languages other than English or Spanish, and with offenders who are deaf, visually impaired, or otherwise disabled, as well as to offenders with limited reading skills, to receive training and materials in a language understood by the offender. (§115.33[d] §115.233[c])
 - c. On the day of arrival, the offender will receive an initial intake PREA training, utilizing Attachment 2a, *Preventing Sexual Abuse & Sexual Assault Trainer Outline (Intake)*.
 - i. The offender will watch Section 1 of the PREA: What You Need to Know video.
 - ii. The offender will be provided with a copy of the *Zero Tolerance for Sexual Abuse and Sexual Harassment* attachment that includes the Sexual Assault Hotline Number. (See Attachment 1E, Attachment 1H for Hearing Impaired, or Attachment 1S for Spanish Version.)
 - iii. Upon completion of the intake PREA training, the offender must document receiving the *Preventing Sexual Abuse and Sexual Assault Trainings* (Intake) and the *Zero Tolerance for Sexual Abuse and Sexual Harassment* attachment by signing the *Preventing Sexual Abuse and Assault Training Acknowledgement* 038_F4 (*Spanish* 038_F4S)
 - d. Within 10 days of arrival, the offender will receive a comprehensive PREA training, utilizing Attachment 2b, *Preventing Sexual Abuse & Sexual Assault Trainer Outline (Comprehensive)* and the video *PREA: What You Need to Know.* (§115.33[b], §115.233[a])

i. The offender must document receiving the *Preventing Sexual Abuse and Sexual Assault Trainings (Comprehensive)* by signing the *Preventing Sexual Abuse and Assault Training Acknowledgement* 038_F4 (*Spanish* 038_F4S). (§115.33[e], §115.233[d])

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- ii. The signed *Acknowledgement* documenting offender completion of the initial and the comprehensive training must be uploaded as an external document in VACORIS and identified as a *Special Entry Note* on the date the training was completed. Once uploaded, the paper form does not need to be retained.
- e. It is mandatory that offenders attend both the intake and the comprehensive PREA training. Offenders who refuse will be charged with Offense Code 200, *Refusing to work or refusing to attend school or other program assignments mandated by procedure or by law, or failure to perform work or program assignment as instructed*, in accordance with Operating Procedure 861.1, *Offender Discipline, Institutions*.
- 2. Offenders received from another DOC facility must be provided a copy of the *Zero Tolerance for Sexual Abuse and Sexual Harassment* attachment that includes the Sexual Assault Hotline Number. (See Attachment 1E, Attachment 1H for Hearing Impaired, or Attachment 1S for Spanish Version.) (§115.33[c]), §115.233[b])
 - a. If the signed <u>Preventing Sexual Abuse and Assault Training Acknowledgement</u> 038_F4 (<u>Spanish</u> 038_F4S) is not available in VACORIS, the offender must be provided the comprehensive PREA training as described for an offender newly received into the DOC.
 - b. The signed *Acknowledgement* must be uploaded as an external document in VACORIS and identified as a *Special Entry Note* on the date the training was completed. Once uploaded, the paper form does not need to be retained.
- 3. In addition to providing such training and education, each facility will ensure that key information is continuously and readily available or visible to offenders through posters, offender handbooks, or other written formats. (§115.33[f] §115.233[e])

B. Staff and Volunteer Training

- 1. All staff who regularly enter facilities will be trained on prevention, detection, response, reporting, investigation, and disciplinary sanctions related to sexual abuse/assault/misconduct/harassment. (See Operating Procedure 350.2, *Training and Development*.)
 - a. All staff are trained on prevention strategies, recognizing indicators of inappropriate relationships, first responder duties, dynamics of sexual abuse/harassment in confinement, professional searches, interacting professionally with Lesbian, Gay, Bisexual, Transgender/Transsexual, and Intersex (LGBTI) offenders, and their duty to report any knowledge or allegations or incidents of sexual abuse, sexual assault, sexual harassment, and sexual misconduct.
 - b. Staff will assist in the prevention of sexually abusive behavior by complying with DOC training and operating procedures, maintaining an awareness of their environment, detecting incidents of sexual abuse or behavior that may lead to abuse, and being responsive to offender reporting.
- 2. All contractors and volunteers with the DOC who have physical, visual, or auditory contact (or could have contact) with offenders will be trained on their responsibilities to prevent, detect, monitor, and report allegations and incidents of sexual abuse and sexual harassment of offenders. (§115.32[a], §115.232[a])
 - a. 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 offenders. (§115.32[b], §115.232[b])
 - i. At minimum, such persons will be notified of the DOC's Zero Tolerance Policy regarding sexual abuse and sexual harassment and informed how to report such incidents.
 - ii. All volunteers and contractors will be provided with a copy of Attachment 4, A Guide to Maintaining Appropriate Boundaries with Offenders for Contractors and Volunteers of the Virginia Department of Corrections, and will be required to sign Attachment 6, Prison Rape Elimination Act (PREA) Training Acknowledgement.

b. See Operating Procedure 027.1, Volunteer Program, for additional guidance on volunteer training.

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c. See Operating Procedure 102.6, Staff Orientation, for additional guidance on contractor training.

C. Staff, Contractor, and Volunteer Screening

A background investigation with a criminal history record investigation (e.g. VCIN) will be conducted every five years on all current and prospective staff and contractors to ensure against the hiring of any person with a history of perpetrating sexual abuse, assault, misconduct, or harassment. (See Operating Procedure 102.3, *Background Investigation Program.*)

D. Offender Screening and Use of Screening Information

- 1. Utilizing the results of the offender's *Classification Assessment* in VACORIS and available offender records, all offenders are screened for potential vulnerabilities or tendencies for acting out with sexually aggressive or other violent behavior at intake, transfer, and as needed. (See Operating Procedure 730.2, *Mental Health Services: Screening, Assessment, and Classification*, Operating Procedure 810.1, *Offender Reception and Classification*, and Operating Procedure 810.2, *Transferred Offender Receiving and Orientation*.)
- 2. Facility staff will use information from the offender's *Classification Assessment* in determining appropriate housing, bed, work, education, and program assignments with the goal of keeping separate those offenders at high risk of being sexually victimized from those at high risk of being sexually abusive. (§115.42[a], §115.242[a])
 - a. Staff will make individualized determinations about how to ensure the safety of each offender. (§115.42[b], §115.242[b])
 - b. In deciding whether to assign a transgender or intersex offender to a facility for male or female offenders, and in making other housing and programming assignments for transgender and intersex offenders; staff will take into consideration whether an assignment would ensure the offender's health and safety, and whether the assignment would present management or security problems. (§115.42[c], §115.242[c])
 - i. A transgender or intersex offender's own views with respect to their own safety will be given serious consideration. (§115.42[e], §115.242[d])
 - ii. Lesbian, gay, bisexual, transgender, or intersex offenders will not be placed in a dedicated facility, housing unit, or wing solely on the basis of such identification or status. (§115.42[g], §115.242[f])
 - iii. Transgender and intersex offenders must be given the opportunity to shower separately from other offenders. (§115.42[f], §115.242[e])
 - iv. Specialized decisions to provide specific individual accommodations to transgender or intersex offenders and offenders diagnosed by Mental Health staff with Gender Dysphoria must be made by the Gender Dysphoria Committee.
- 3. Facility housing and programming assignments for each transgender and intersex offender must be reassessed at least twice each year to review any threats to safety experienced by the offender. (§115.42[d])
 - a. The Institutional Program Manager (IPM) or designated staff for facilities without an IPM will pull the *Facility Offender Alert* custom report from VACORIS in the months of January and July in order to complete a six month reassessment of housing and programs for all transgender and intersex offenders.
 - b. The staff member must meet with the offender to discuss their housing and program needs and to ensure their current assignments are still appropriate.
 - c. A note must be placed in VACORIS indicating the "six month housing and program assignment reassessment completed" and documenting any necessary action taken regarding changes to housing and programs.
 - d. The IPM or designated staff will refer the offender to QMHP for follow-up, as needed.

- e. All reassessments must be completed by the last day of the designated months.
- E. Offenders with disabilities and offenders who are limited English proficient (§115.16, §115.216)
 - 1. Facility staff must take appropriate steps to ensure that offenders with disabilities have an equal opportunity to participate in or benefit from all aspects of the DOC's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. Such disabilities include but are not limited to offenders who are deaf or hard of hearing, blind or have low vision, and those who have intellectual, psychiatric, or speech disabilities.
 - a. When necessary to ensure effective communication with offenders who are deaf or hard of hearing, access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary must be provided.
 - b. Written materials will be provided in formats or through methods that ensure effective communication with offenders with disabilities, including offenders who have intellectual disabilities, limited reading skills, and who are blind or have low vision.
 - c. The facility is not required to take actions that it can demonstrate would result in a fundamental alteration in the nature of a service, program, or activity, or in undue financial and administrative burdens, as those terms are used in regulations promulgated under title II of the *Americans With Disabilities Act*, 28 CFR 35.164.
 - 2. Facility staff must take reasonable steps to ensure offenders who are limited English proficient, are afforded meaningful access to all aspects of the DOC's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary.
 - 3. Facility staff cannot rely on offender interpreters, offender readers, or other types of offender assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the offender's safety, the performance of first-response duties under, or the investigation of the offender's allegations. Video Remote Interpreting (VRI) should be utilized to effectively communicate with deaf offenders when American Sign Language interpreters are not available onsite.
 - 4. Facility staff should consult with their PREA Compliance Manager and Regional PREA Analyst, as necessary, to obtain information on available resources to provide equal opportunity and meaningful access to offenders with disabilities and offenders who are limited English proficient.

F. Management of Sexual Aggressors

- 1. Any offender designated as a High Risk Sexual Aggressor (HRSA) by the *Classification Assessment* will be referred to Mental Health staff for assessment and follow-up in accordance with Operating Procedure 730.2, *Mental Health Services: Screening, Assessment, and Classification*.
 - a. Mental Health staff will complete an annual follow-up to monitor and assess current level of functioning, risk, and needs for those offenders who are designated HRSA.
 - b. An offender's risk level will 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 abusiveness.
 - c. The Psychology Associate will meet with the offender upon the offender's request, upon referral by the staff, and/or annually to offer available services, encourage participation in relevant programming, and monitor progress for a period of no less than one year.
- 2. An aggressor legally convicted of a sexual assault while incarcerated will be considered a sex offender by statute and subject to the requirement of the Sex Offender Registry. (See Operating Procedure 735.1, Sex Offender and Crimes Against Minors Registry.)
- 3. Offenders who are convicted of sexual assault should be given the opportunity to participate in sex offender treatment programs; consistent with resource availability and facility security considerations.

(See Operating Procedure 735.2, Sex Offender Treatment Services (Institutions).)

III. Detection and Reporting

A. Offender Responsibilities

- 1. Offenders can report sexual abuse and sexual harassment, retaliation by other offenders or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents to any staff member including chaplains, medical, mental health or counseling staff, security staff, or administrators. (4-4281-7; 4-4281-7; §115.51[a], §115.251[a])
 - a. Any offender who is sexually assaulted must immediately notify staff that a sexual assault has occurred.
 - b. Any offender who observes, is involved in, or has any knowledge or suspicion of a sexual assault or unauthorized relationship must immediately notify staff.
 - c. Offenders are not required to report only to the immediate point-of-contact line officer; an offender may report such incidents to any staff member using any available manner to include:
 - i. Verbally in person to a staff member or through another third party who can assist the offender in filing requests for administrative remedies
 - ii. Verbally through the offender telephone system Sexual Assault Hotline Number #55
 - iii. Written using an *Offender Request* or *Informal Complaint, Regular Grievance, or Emergency Grievance.* (See Operating Procedure 801.6, *Offender Services*, and Operating Procedure 866.1, *Offender Grievance Procedure.*)
 - d. There is no time limit on when an offender may submit a *Complaint, Informal Complaint,* or *Regular Grievance,* regarding an allegation of sexual abuse. (See Operating Procedure 866.1, *Offender Grievance Procedure,* and Operating Procedure 866.2, *Offender Complaints, Community Corrections.*) (§115.52[b], §115.252[b])
- 2. Third parties including other offenders, staff members, family members, attorneys, and outside advocates are permitted to assist offenders in filing requests for administrative remedies relating to allegations of sexual abuse, and are also permitted to file such requests on behalf of offenders. (§115.52[e], §115.252[e])
 - a. If a third party files such a request on behalf of an offender, the alleged victim must agree to have the request filed on their behalf, as a condition of processing the request. The alleged victim will also be required to personally pursue any subsequent steps in the administrative remedy process.
 - b. If the offender declines to have the request processed on their behalf, facility staff must document the offender's decision.
 - c. Contact information on how to report sexual abuse and sexual harassment on behalf of an offender is provided on the DOC public web site. (§115.54, §115.254)
- 3. Offenders can choose to report abuse and harassment to an advocate with the Action Alliance, a non-DOC organization, who is able to receive and immediately forward offender reports of sexual abuse and sexual harassment to the DOC while allowing the offender to remain anonymous upon request. (§115.51[b], §115.251[b])
 - a. An advocate with Action Alliance can be contacted verbally through the offender telephone system Sexual Assault Hotline Number #55, Option 2.
 - b. Offenders can also anonymously report sexual abuse and sexual harassment in writing directly to the Action Alliance at P.O. Box 17115, Richmond, Virginia 23226.
- 4. Any offender who makes a report of offender-on-offender sexual violence or staff sexual misconduct or harassment that is determined to be false may be charged with a disciplinary offense if it is determined in consultation with the Regional PREA Analyst that the report was made in bad faith. (§115.78[f], §115.278[f])

a. Offenders will not be charged for reports of sexual abuse made in good faith, based upon a reasonable belief that the alleged conduct occurred.

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b. Even if an investigation does not establish sufficient evidence to substantiate the allegation, reports of sexual abuse made in good faith will not constitute falsely reporting an incident or lying.

B. Staff, Volunteer, and Contractor Responsibilities

- 1. When a staff member, volunteer, or contractor learns that an offender is subject to a substantial risk of imminent sexual abuse, the individual must notify their supervisor, or the Officer-in-Charge (OIC) so that immediate action can be taken to protect the offender. (§115.62, §115.262)
- 2. Staff must accept all reports made verbally, in writing, anonymously and from third parties alleging sexual assault and must promptly document verbal reports as an *Internal Incident Report* with PREA checked in the description field in accordance with Operating Procedure 038.1, *Reporting Serious or Unusual Incidents*. (§115.51[c], §115.251[c])
- 3. Staff, volunteers, and contractors must immediately report to their supervisor, or the OIC any knowledge, suspicion, or information on the following incidents; and if applicable, an *Incident Report* will be submitted in accordance with Operating Procedure 038.1 *Reporting Serious or Unusual Incidents*. (§115.61[a], §115.261[a])
 - a. Staff, volunteers, and contractors must immediately report the following: (§115.61[a], §115.261[a])
 - i. Any incident of sexual abuse or sexual harassment that occurred in a facility, whether or not the facility is part of the DOC
 - ii. Any incident of retaliation against staff or offenders who reported sexual abuse or sexual harassment
 - iii. Any incident of staff neglect or violation of responsibilities that may have contributed to the sexual abuse or sexual harassment and/or retaliation
 - b. If the alleged victim is under the age of 18, aged, incapacitated, or offenders who are receiving services from a Licensed DOC Mental Health Program, the Organizational Unit Head, or Administrative Duty Officer in their absence, is required to immediately report any alleged abuse to the local Department of Social Services. (§115.61[d], §115.261[d])
 - c. Apart from reporting to designated supervisors or officials, staff must not reveal any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in operating procedures, to make treatment, investigation, and other security and management decisions. (§115.61[b], §115.261[b])
 - d. Staff can privately report the sexual abuse and sexual harassment of offenders through the established reporting hotline at 855-602-7001. (§115.51[d], §115.251[d])
- 4. Staff, volunteers, and contractors must report to the supervisor, Organizational Unit Head or OIC any suspicion or knowledge of other staff, volunteer, or contractor fraternization with offenders. (See Operating Procedure 135.2, *Rules of Conduct Governing Employees Relationships with Offenders*.)
- 5. Any staff member, volunteer, or contractor, who receives an allegation that an offender was sexually abused while confined at another facility, must notify the Organizational Unit Head.
 - a. The Organizational Unit Head or designee will notify the head of the facility or appropriate office of the agency where the alleged abuse occurred. (§115.63[a], §115.263[a])
 - i. Notification must be provided as soon as possible, but no later than 72 hours after receiving the allegation. (§115.63[b], §115.263[b])
 - ii. The Organizational Unit Head or designee must document that it provided such notification. (§115.63[c], §115.263[c])
 - b. The facility head or agency office that receives the notification is responsible for ensuring that the allegation is investigated in accordance with the requirements of the *Prison Rape Elimination Act National Standards*. (§115.63[d], §115.263[d])

IV. Response

A. Each facility will develop a written 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. (See <u>Sexual Assault Response Checklist</u> 038_F6.) (§115.65, §115.265)

B. Facility Staff Responsibilities

- 1. Upon learning of an allegation that an offender was sexually assaulted or abused, the first security staff member to respond to the report will be required to: (§115.64[a], §115.264[a])
 - a. Separate the alleged victim and abuser to ensure the victim's safety. (§115.82[b], §115.282[b])
 - b. Notify the OIC and preserve and protect the crime scene until appropriate steps can be taken to collect any evidence and.
 - c. Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, showering, brushing teeth, changing clothes, urinating, defecating, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence
 - d. Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, showering, 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.
 - e. If the first staff responder is not a security staff member, the responder will be required to ensure the victims safety, request that the alleged victim not take any actions that could destroy physical evidence such as showering, eating, brushing teeth, or drinking until after evidence collection, and notify the OIC. (§115.64[b], (§115.82[b], §115.264[b], §115.282[b])
- 2. The OIC will immediately initiate necessary action, or verify that action has been taken, to protect all physical evidence and the safety and welfare of the offender. The OIC will: (See Attachment 5, *Sexual Assault Victim Search/Evidence Collection Protocol.*)
 - a. Ensure that the victim is immediately escorted to the facility's medical unit area for examination, treatment, and evaluation per *Medical and Nursing Guidelines* and Operating Procedure 720.7, *Emergency Medical Equipment and Care*
 - i. If there are no qualified medical or mental health practitioners on duty at the time a report of sexual assault or sexual abuse is made, the OIC must immediately notify the facilities designated medical and mental health practitioner. (§115.82[b], §115.282[b])
 - ii. If there is indication of a recent sexual assault, ensure the victim is transported to the local hospital for further treatment, examination, documentation, collection of forensic evidence (PERK), and testing for sexually transmitted diseases.
 - (a) With the victim's consent, the examination will include the collection of evidence from the victim, using a kit approved by the appropriate authority (PERK kit recommended).
 - (b) Although it is recommended that a PERK be collected within 72 hours, it should be used beyond that time whenever there is possibility of evidence remaining.
 - iii. Administrative staff must be careful not to impede an offender's access to health care when needed.
 - b. Notify the Facility Unit Head, Administrative Duty Officer, PREA Compliance Manager, and the Facility Investigator, immediately.
 - c. Contact the Special Investigation Unit (SIU), immediately. (See Operating Procedure 030.4, *Special Investigations Unit.*) An investigator will ensure protocol is followed to investigate the sexual abuse, misconduct, or assault.
 - d. Complete an *Incident Report* marked PREA and Confidential for all recent sexual assaults (those occurring within the previous 72-90 hours)
 - e. Notify the Operations and Logistics Unit (Notification to OLU will only include the statement

- "Alleged recent sexual assault at (facility name)."
- i. If an *Incident Report* has been completed, the OLU should be provided with the *IR Number* from VACORIS).

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- ii. No additional information will be reported.
- f. Notify the PREA/ADA Supervisor or PREA Analyst
- g. Notify the Psychology Associate for counseling and mental health service needs and ensure follow up medical treatment and/or mental health service needs are arranged
- 3. The Facility Investigator or OIC in the absence of the Facility Investigator will:
 - a. Immediately question the victim to determine the suspect(s), where and when the sexual assault occurred, and if facts warrant further investigation
 - b. Ensure that photographs are taken to document any physical evidence such as torn clothing, bruises, abrasions, etc.
 - c. While all available information must be gathered and confirmed, medical assessment and physical evidence collection must not be delayed pending any investigation of the incident
 - d. Take necessary, appropriate action to preserve the physical and testimonial evidence until it is released to the responding SIU Investigator
 - e. Interview the victim upon their return from the hospital emergency room for protective custody needs
- 4. In order to protect the offender or offenders involved, facility staff may make a temporary administrative housing reassignment of the victim and/or abuser in accordance with Operating Procedure 425.4, *Management of Bed and Cell Assignments* (Restricted).

V. Investigation

- A. An administrative or criminal investigation conducted in accordance with PREA standards must be completed and documented for all allegations of sexual abuse and sexual harassment. (5-3D-4281-3; 4-4281-3; §115.22[a], §115.222[a], §115.71[k], §115.271[k])
 - 1. If the alleged abuser is staff, the staff member must be reassigned to a post with no offender contact, suspended, or placed on pre-disciplinary leave with pay based on circumstance or situation, pending completion of the investigation as outlined in Operating Procedure 135.2, *Rules of Conduct Governing Employees Relationships with Offenders*.
 - 2. Upon receipt of an allegation of sexual abuse, investigative staff will have 30 days to complete an administrative investigation into the allegation.
 - a. The initial investigation will be conducted by the Facility Investigator or other staff member who has received the required specialized training to conduct sexual abuse investigations.
 - b. If it is determined that the investigation will not be completed within 30 days, the Facility Investigator must contact the Regional PREA Analyst to discuss an extension.
 - c. When the Regional PREA Analyst determines that an extension is needed, periodic updates must be provided at an interval deemed appropriate by the Regional PREA Analyst.
 - d. If a determination is made that the sexual abuse allegation will be handled by SIU, the Facility Investigator will notify the Regional PREA Analyst.
 - 3. Unless the Facility Investigator quickly and definitively determines that the allegation is unfounded, allegations of sexual abuse or sexual harassment must be referred for investigation to SIU. The Facility Investigator will document all such referrals. (§115.22[b], §115.222[b])
 - a. SIU conducts investigations into criminal behavior, procedural or administrative violations, and staff misconduct affecting the operations of the DOC. (See Operating Procedure 030.4, *Special Investigations Unit.*)
 - b. The Chief of SIU or designee will review the nature of the allegations received and determine if an

investigation by SIU is warranted.

- c. During the investigation, facility staff will cooperate with SIU and the Facility Investigator must endeavor to remain informed about the progress of the investigation. (§115.71[1], §115.271[1])
- 4. Investigative staff will follow Operating Procedure 030.4, *Special Investigations Unit*. (§115.22[d], §115.222[d])
 - a. All evidence collected at the facility and at the hospital (PERK, evidence collection, etc.) must be handled in accordance with Operating Procedure 030.1, *Evidence Collection and Preservation*.
 - b. Investigations must be documented and recorded as required in Operating Procedure 030.4, *Special Investigations Unit*.
- 5. Upon completion of the investigation, a <u>PREA Investigative Report</u> 038_F9 must be completed and submitted to the facility PREA Compliance Manager who will review the *Investigative Report* and ensure that each required component of the *Report* is addressed.
 - a. The investigative report must include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and any investigative facts and findings. (§115.71[f(2)], §115.271[f(2)])
 - b. The facility PREA Compliance Manager will complete a <u>PREA Investigative Report Checklist</u> 038_F10, and submit a copy of the <u>PREA Investigative Report</u> 038_F9 and the <u>PREA Investigative Report Checklist</u> to the Facility Unit Head, Regional PREA Analyst, PREA/ADA Supervisor, and PREA Hotline Coordinator within seven working days.

B. Reporting to offenders

- 1. Following an investigation into an offender's allegation that they suffered sexual abuse in a DOC facility, the offender must be informed as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. (See Attachment 3, *Response to Offender PREA Allegation Sample Letters.*) (§115.73[a], §115.273[a])
 - a. Following an offender's allegation that a staff member committed sexual abuse against the offender, the PREA Compliance Manager or investigator must subsequently inform the offender whenever: (§115.73[c], §115.273[c])
 - i. The allegation has been determined to be unfounded
 - ii. The allegation has been determined to be unsubstantiated
 - iii. The staff member is no longer posted within the offender's unit
 - iv. The staff member is no longer employed at the facility
 - v. The DOC learns that the staff member has been indicted on a charge related to sexual abuse within the facility
 - vi. The DOC learns that the staff member has been convicted on a charge related to sexual abuse within the facility.
 - b. Following an offender's allegation that they have been sexually abused by another offender, the PREA Compliance Manager or investigator must subsequently inform the alleged victim whenever: (§115.73[d], §115.273[d])
 - i. The allegation has been determined to be unfounded
 - ii. The allegation has been determined to be unsubstantiated
 - iii. The DOC learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility
 - iv. The DOC learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility
 - c. All such notifications or attempted notifications must be documented and sent to the offender in the same manner as legal mail. (See Operating Procedure 803.1, *Offender Correspondence*, for legal mail requirements.) (§115.73[e], §115.273[e])
 - d. Any obligation to report under this standard terminates if the offender is released from DOC

custody. (§115.73[f], §115.273[f])

VI. Victim Advocate/Emotional Support

- A. The DOC will attempt to make available to the victim a victim advocate from a rape crisis center. (§115.21[d], §115.221[d])
 - 1. If a rape crisis center is not available to provide victim advocate services, the services of a qualified staff member or a qualified staff member from a community-based organization must be made available.
 - 2. As requested by the victim, a victim advocate, qualified staff member, or qualified community-based organization member will accompany and support the victim through the forensic medical examination process and investigatory interviews and will provide emotional support, crisis intervention, information, and referrals. (§115.21[e], §115.221[e])
 - 3. The qualified staff member or community-based member must 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. (§115.21[h], §115.221[h])
- B. Offender access to free outside confidential support services
 - 1. The DOC maintains a Memorandum of Understanding (MOU) with a community service provider who is able to provide offenders with access to free confidential emotional support services related to sexual abuse. A copy of this agreement is available from the PREA/ADA Supervisor. (§115.53[c], §115.253[c])
 - 2. Offenders should contact their facility PREA Compliance Manager, Unit Manager, or Mental Health staff for information on accessing outside victim advocates for free emotional support services related to sexual abuse or may utilize the Sexual Abuse Hotline (#55), Option 2. (§115.53[a], §115.253[a])
 - 3. The facility will inform offenders, 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. (§115.53[b], §115.253[b])
 - 4. The facility will enable reasonable communication between offenders and these organizations and agencies, in as confidential a manner as possible. (§115.53[a], §115.253[a])

VII. Protection against Retaliation

- A. All staff and offenders who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations will be protected from retaliation by other offenders or staff. (§115.67[a], §115.267[a])
 - 1. Allegations of retaliation will be reported through the same methods as available for reporting sexual abuse or sexual harassment.
 - 2. Such allegations must be investigated in the same manner as allegations of sexual abuse.
- B. Multiple measures are available to protect staff and offenders from retaliation; such measures include housing changes or transfers for offender victims or abusers, removal of alleged staff or offender abusers from contact with victims, and emotional support services for offenders and staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations. (§115.67[b], §115.267[b])
 - 1. For at least 90 days following a report of sexual abuse, the PREA Compliance Manager or other designated facility staff will monitor the conduct and treatment of offenders and staff who reported sexual abuse or cooperated with a sexual abuse investigation, and of offenders who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by offenders or staff, and will act promptly to remedy any such retaliation. (§115.67[a], §115.67[c], §115.267[a], §115.267[c])

a. Items to be monitored include any offender disciplinary reports, housing, or program changes, or negative performance reviews or reassignments of staff.

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- b. The PREA Compliance Manager must continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need.
- 2. In the case of offenders, such monitoring will also include periodic status checks. (§115.67[d], §115.267[d])
- 3. If any other individual who cooperates with an investigation expresses a fear of retaliation, the Facility Unit Head must take appropriate measures to protect that individual against retaliation. (§115.67[e], §115.267[e])
- 4. The obligation to monitor will terminate if the investigation determines that the allegation is unfounded. (§115.67[f], §115.267[f])

VIII. Data Collection

- A. The DOC collects accurate, uniform data on every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions. (§115.87[a], §115.287[a])
 - 1. The agency aggregates the incident-based sexual abuse data at least annually. (§115.87[b], §115.287[b])
 - 2. The incident-based data collected includes, at a minimum, the data necessary to answer all questions from the most recent version of the *Survey of Sexual Violence* conducted by the Department of Justice. (§115.87[c], §115.287[c])
 - 3. The DOC maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews. (§115.87[d], §115.287[d])
 - a. A sexual abuse incident review will be conducted at the conclusion of every sexual abuse investigation unless the allegation has been determined to be unfounded. (See Operating Procedure 038.1, *Reporting Serious or Unusual Incidents.*) (§115.86[a], §115.286[a])
 - i. Sexual abuse incident reviews will be conducted at the conclusion of every investigation into an allegation of sexual harassment where the allegation is determined to be substantiated
 - ii. Sexual abuse incident reviews must be completed within 14 calendar days of completion of the investigation and will be documented on a *PREA Report of Incident Review* 038_F11.
 - iii. If the <u>PREA Report of Incident Review</u> 038_F11 will not be completed within 14 calendar days, the PREA Compliance Manager must notify the Regional PREA Analyst.
 - b. The PREA Compliance Manager will submit the completed <u>PREA Report of Incident Review</u> 038_F11 to the Regional Office. Prior to submission to the Regional Office, the Incident Review must be forwarded to the Regional PREA Analyst for review and approval.
 - 4. Incident-based and aggregated data is collected from every private facility with which with the DOC contracts for the confinement of offenders. (§115.87[e], §115.287[e])
 - 5. Upon request, all such data from the previous calendar year will be provided to the Department of Justice no later than June 30. (§115.87[f], §115.287[f])

B. Data Review for Corrective Action

- 1. The DOC reviews collected and aggregated data in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, by: (§115.88[a], §115.288[a])
 - a. Identifying problem areas
 - b. Taking corrective action on an ongoing basis
 - c. Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole

- 2. The annual report will include a comparison of the current year's data and corrective actions with those from prior years and must provide an assessment of the DOC's progress in addressing sexual abuse. (§115.88[b], §115.288[b])
 - a. The report must be approved by the PREA/ADA Supervisor and the Director and made readily available to the public through the DOC Public website. (§115.88[c], §115.288[c])
 - b. Specific material may be redacted from the reports, when publication of the material would present a clear and specific threat to the safety and security of a facility. If material is redacted, the report must indicate the nature of the redacted material. (§115.88[d], §115.288[d])

C. Data storage, publication, and destruction

- 1. The Organizational Unit Head must ensure that all case records associated with claims of sexual abuse or sexual harassment, including *Incident Reports*, investigative reports, offender information, case disposition, medical and counseling evaluation findings, and recommendation for post-release treatment or counseling are retained for as long as the alleged abuser is incarcerated or employed by the agency, plus five years. (5-3D-4281-8; 4-4281-8; §115.71[i], §115.271[i])
- 2. All data collected on allegations of sexual abuse at DOC facilities must securely retained. (§115.89[a], §115. 289[a])
 - a. Aggregated sexual abuse data, from DOC facilities and contract facilities, will be made readily available to the public at least annually through the DOC Public website. (§115.89[b], §115.289[b])
 - b. Before making aggregated sexual abuse data publicly available, all personal identifiers must be removed. (§115.89[c], §115.289[c])
- 3. All sexual abuse data collected must be maintained for at least 10 years after the date of the initial collection unless Federal, State, or local law requires otherwise. (§115.89[d], §115.289[d])

DEFINITIONS OF TERMS USED IN THIS OPERATING PROCEDURE

Abuse - The improper act or treatment of an offender by a trusted individual or care taker that causes physical, financial, or emotional injury to the offender

 $\textbf{Carnal Knowledge} \text{ - The acts of sexual intercourse, cunnilingus, fellatio, anallingus, anal intercourse, and animate and inanimate object sexual penetration. } (\underline{COV} \$18.2\text{-}64.2)$

Fraternization - Employee association with offenders, or their family members, outside of employee job functions, that extends to unacceptable, unprofessional and prohibited behavior; examples include non-work related visits between offenders and employees, non-work related relationships with family members of offenders, discussing employee personal matters (marriage, children, work, etc.) with offenders, and engaging in romantic or sexual relationships with offenders. (See Operating Procedure 135.2, *Rules of Conduct Governing Employees Relationships with Offenders*.)

Intersex - A person whose sexual or reproductive anatomy or chromosomal pattern does not seem to fit typical definitions of male or female; intersex medical conditions are sometimes referred to as disorders of sex development. (§115.5)

Offender - An inmate, probationer, parolee or post release supervisee or other person placed under the supervision (conditional release) or investigation of the Department of Corrections

Officer-in-Charge (OIC) - A Unit Manager or designated ranking security officer of a correctional facility; normally the Shift Commander, or the Assistant Shift Commander

Physical Evidence Recovery Kit (PERK) - An examination administered by specially trained professional medical practitioners to collect forensic evidence for criminal investigations of sexual assaults and other sexual violations; if possible, PERK examinations should be administered within 72 hours of an alleged incident of sexual intercourse and/or sodomy.

Rape - 34 U.S.C. §30309 defines rape as "the carnal knowledge, oral sodomy, sexual assault with an object, or sexual fondling of a person, forcibly or against that person's will; or not forcibly or against the person's will,

where the victim is incapable of giving consent because of his or her youth, or his or her temporary or permanent mental or physical incapacity; or the carnal knowledge, oral sodomy, sexual assault with an object, or sexual fondling of a person achieved through the exploitation of the fear or threat of physical violence or bodily injury."

<u>COV</u> §18.2-61 defines rape as any person who has "sexual intercourse with a complaining witness, whether or not his or her spouse, or causes a complaining witness, whether or not his or her spouse, to engage in sexual intercourse with any other person and such act is accomplished (i) against the complaining witness's will, by force, threat or intimidation of or against the complaining witness or another person; or (ii) through the use of the complaining witness's mental incapacity or physical helplessness; or (iii) with a child under age 13 as the victim, he or she shall be guilty of rape."

Recent Sexual Assault - A Sexual Assault that is alleged to have occurred within the previous 72 hours or previous 90 hours if there is a possibility of collecting forensic evidence (PERK Kit), as determined by a forensic nurse.

Sexual Abuse (§115.6)

- Sexual abuse of an offender by another offender includes any of the following acts, if the victim does not consent, is coerced into such act by overt or implied threats of violence, or is unable to consent or refuse:
 - o Contact between the penis and the vulva or the penis and the anus, including penetration, however slight
 - o Contact between the mouth and the penis, vulva, or anus
 - O Penetration of the anal or genital opening of another person, however slight, by a hand, finger, object, or other instrument
 - Any other intentional touching, either directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or the buttocks of another person, excluding contact incidental to a physical altercation.
- Sexual abuse of an offender by a staff member, contractor, or volunteer includes any of the following acts, with or without consent of the offender:
 - o Contact between the penis and the vulva or the penis and the anus, including penetration, however slight
 - o Contact between the mouth and the penis, vulva, or anus
 - Contact between the mouth and any body part where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire
 - O Penetration of the anal or genital opening, however slight, by a hand, finger, object, or other instrument, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire
 - O Any other intentional contact, either directly or through the clothing, of or with the genitalia, anus, groin, breast, inner thigh, or the buttocks, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire
 - O Any attempt, threat, or request by a staff member, contractor, or volunteer to engage in the activities described as sexual abuse in this section
 - o Any display by a staff member, contractor, or volunteer of his or her uncovered genitalia, buttocks, or breast in the presence of an offender
 - o Voyeurism by a staff member, contractor, or volunteer
 - This definition does not include incidental touching during security searches, medical personnel engaged in evidence gathering or legitimate medical treatment, or to health care personnel performing body cavity searches in order to maintain security and safety within a facility.

Sexual Assault - Any sexual touching or contact that is non-consensual, forced, or coerced in any manner, including but not limited to rape, sodomy, or unlawful touching (See <u>COV</u> §18.2-67.10.)

Sexual Assault Hotline - A toll free telephone number maintained to allow offenders to report sexual abuse or misconduct by dialing #55 from any offender telephone system phone

Sexual Harassment - (1) Repeated and unwelcome sexual advances, requests for sexual favors, or verbal comments, gestures, or actions of a derogatory or offensive sexual nature by one offender directed toward another; and (2) Verbal comments or gestures of a sexual nature to an offender by a staff member, contractor, or volunteer, including demeaning references to gender, sexually suggestive or derogatory comments about body or clothing, or obscene language or gestures. (§115.6)

Sexual Misconduct - Any behavior or act of a sexual nature directed toward an offender by an employee, volunteer, visitor, contractor, or agency representative; this includes but is not limited to acts or attempts to commit such acts of sexual assault, sexual abuse, sexual harassment, sexual contact, conduct of a sexual nature or implication, obscenity, and unreasonable invasion of privacy. Sexual misconduct also includes but is not limited to conversations or correspondence that suggests a sexual relationship between an offender and any party mentioned above.

Substantiated Allegation - An allegation that was investigated and determined to have occurred (§115.5)

Transgender - A person whose gender identity (i.e., internal sense of feeling male or female) is different from the person's assigned sex at birth (§115.5)

Unfounded Allegation - An allegation that was investigated and determined not to have occurred (§115.5)

Unsubstantiated Allegation - An allegation that was investigated and the investigation produced insufficient evidence to make a final determination as to whether or not the event occurred (§115.5)

Volunteer - Any citizen of the community who, of their own free will, provides goods or services to the DOC without any financial gain

Voyeurism (by an offender) - An invasion of privacy of an offender by another offender, such as intentionally peering at an offender who is showering or using a toilet to perform bodily functions; or requiring an offender to expose their buttocks, genitals, or breasts

Voyeurism (by a staff member, contractor, or volunteer) - An invasion of privacy of an offender by staff for reasons unrelated to official duties, such as peering at an offender who is using a toilet in his or her cell to perform bodily functions; requiring an offender to expose his or her buttocks, genitals, or breasts; or taking images of all or part of an offender's naked body or of an offender performing bodily functions (§115.6)

REFERENCES

28 CFR Part 115, Prison Rape Elimination Act National Standards

28 CFR 35.164, Nondiscrimination on the Basis of Disability in State and Local Government Services, Duties

34 U.S.C., Chapter 303, Prison Rape Elimination

COV §18.2-61, Rape

 \underline{COV} §18.2-64.2, Carnal knowledge of an inmate, parolee, probationer, detainee, or pretrial or post trial offender; penalty

<u>COV</u> §18.2-67.4, *Sexual battery*

COV §18.2-67.10, General definitions

Medical and Nursing Guidelines

Operating Procedure 027.1, Volunteer Program

Operating Procedure 030.1, Evidence Collection and Preservation

Operating Procedure 030.4, Special Investigations Unit

Operating Procedure 038.1, Reporting Serious or Unusual Incidents

Operating Procedure 102.3, Background Investigation Program

Operating Procedure 102.6, Staff Orientation

Operating Procedure 135.1, Standards of Conduct

Operating Procedure 135.2, Rules of Conduct Governing Employees Relationships with Offenders

Operating Procedure 350.2, Training and Development

Operating Procedure 425.4, Management of Bed and Cell Assignments (Restricted)

Operating Procedure 720.7, Emergency Medical Equipment and Care

Operating Procedure 730.2, Mental Health Services: Screening, Assessment, and Classification



Operating Procedure 735.1, Sex Offender and Crimes Against Minors Registry

Operating Procedure 735.2, Sex Offender Treatment Services (Institutions)

Operating Procedure 801.6, Offender Services

Operating Procedure 803.1, Offender Correspondence

Operating Procedure 810.1, Offender Reception and Classification

Operating Procedure 810.2, Transferred Offender Receiving and Orientation

Operating Procedure 861.1, Offender Discipline, Institutions

Operating Procedure 866.1, Offender Grievance Procedure

Operating Procedure 866.2, Offender Complaints, Community Corrections

Operating Procedure 940.4, Community Corrections Alternative Program

ATTACHMENTS

Attachment 1E, Zero Tolerance for Sexual Abuse and Sexual Harassment

Attachment 1H, Zero Tolerance for Sexual Abuse and Sexual Harassment (Hearing Impaired)

Attachment 1S, Zero Tolerance for Sexual Abuse and Sexual Harassment (Spanish)

Attachment 2a, Preventing Sexual Abuse & Sexual Assault - Trainer Outline (Intake)

Attachment 2b, Preventing Sexual Abuse & Sexual Assault - Trainer Outline (Comprehensive)

Attachment 3, Response to Offender PREA Allegation - Sample Letters

Attachment 4, A Guide to Maintaining Appropriate Boundaries with Offenders

Attachment 5, Sexual Assault Victim Search/Evidence Collection Protocol

Attachment 6, Prison Rape Elimination Act (PREA) Training Acknowledgement

FORM CITATIONS

Preventing Sexual Abuse and Assault Training Acknowledgement 038_F4 Spanish 038_F4S

Sexual Assault Response Checklist 038_F6

PREA Investigative Report 038_F9

PREA Investigative Report Checklist 038_F10

PREA Report of Incident Review 038_F11