



REALITY HOUSE PROGRAMS, INC

PREA

STANDARD

OPERATING PROCEDURES

What is PREA?

The Prison Rape Elimination Act (PREA) was enacted by the United States Congress in 2003 to address the problem of sexual abuse of people in the U.S. correctional agencies. The act applies to all public and private institutions that house adult or juvenile offenders/residents. It addresses both resident-on-resident sexual abuse and staff sexual misconduct.

REALITY HOUSE PROGRAMS, INC PREA POLICY

PURPOSE

Reality House Programs, Inc. is committed to zero tolerance of any form of sexual abuse and sexual harassment in facilities it operates directly or with which it holds contracts for the confinement of residents.

The purpose of this policy is to describe Reality House Programs, Inc.'s mandate of zero tolerance toward all forms of sexual abuse and sexual harassment; and to outline our approach

to preventing, detecting, and responding to sexual abuse and harassment.

ZERO TOLERANCE POLICY [DOJ § 115.11(a)]

Reality House Programs, Inc. mandates zero tolerance toward all forms of sexual abuse and sexual harassment. Sexual abuse of a resident and sexual harassment of a resident are prohibited.

A. Definitions

(1) "Resident" means any person confined to RHP Community Correctional Facility;

(2) "Staff" means an agency employee;

(3) "Contractor" means a person who provides services on a recurring basis pursuant to a contractual agreement with the agency; +and

(4) "Volunteer" means an individual who donates time and effort on a recurring basis to enhance the activities and programs of the agency.

(5) "Consent" refers to cooperation in act or attitude pursuant to an exercise of free will and with full understanding of the nature of the act. Residents cannot consent to sexual contact with staff members, volunteers or contractors.

B. Sexual Abuse

(1) "Sexual abuse" includes—

(a) Sexual abuse of a resident by another resident; and

(b) Sexual abuse of a resident by a staff member, contractor, or volunteer.

(2) Sexual abuse of a resident by another resident includes any of the following acts, if the victim does not consent, is coerced into such an act by overt or implied threats of violence, or is unable to consent or refuse:

(a) Contact between the penis and the vulva or the penis and the anus, including penetration, however slight;

(b) Contact between the mouth and the penis, vulva, or anus;

(c) Penetration of the anal or genital opening of another person, however slight, by a hand, finger, object, or other instrument; and

(d) Any other intentional touching, either directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or the buttocks of another person, excluding contact incidental to a physical altercation.

(3) Sexual abuse of a resident by a staff member, contractor, or volunteer includes any of the following acts, with or without consent of the resident:

(a) Contact between the penis and the vulva or the penis and the anus, including penetration, however slight;

(b) Contact between the mouth and the penis, vulva, or anus;

(c) Contact between the mouth and any body part where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;

(d) Penetration of the anal or genital opening, however slight, by a hand, finger, object, or other instrument, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;

(e) Any other intentional contact, either directly or through the clothing, of or with the genitalia, anus, groin, breast, inner thigh, or the buttocks, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;

(f) Any attempt, threat, or request by a staff member, contractor, or volunteer to engage in the activities described in paragraphs (a) through (e) of this section;

(g) Any display by a staff member, contractor, or volunteer of his or her uncovered genitalia, buttocks, or breast in the presence of an inmate; and

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

C. Sexual Harassment

(1) "Sexual harassment" includes—

(a) Sexual harassment of a resident by another resident; and

(b) Sexual harassment of a resident by a staff member, contractor, or volunteer.

(2) Sexual harassment of a resident by another resident includes:

Repeated and unwelcome sexual advances, requests for sexual favors, or verbal comments, gestures, or actions of a derogatory or offensive sexual nature by a resident directed toward another.

(3) Sexual harassment of a resident by a staff member, contractor, or volunteer includes:

Repeated verbal comments or gestures of a sexual nature to a resident 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.

3. PREA COORDINATOR [DOJ § 115.11(b)]

Reality House Programs, Inc. has designated a PREA Coordinator with sufficient time and authority to develop, implement, and oversee its efforts to comply with the PREA standards. The PREA Coordinator shall be Chante Wright, Human Resources Manager or someone designated by that person, in writing.

PREVENTING AND DETECTING SEXUAL ABUSE AND HARASSMENT [DOJ § 115.11]

RHP shall adopt and implement the following measures to prevent and detect sexual abuse and sexual harassment in its facility:

A. Staffing Plan/Video Monitoring [DOJ §115.13]

(1) In the process of creating and revising a staffing plan to provide for adequate levels of staffing and video monitoring to protect residents against sexual abuse, RHP shall ensure that the following factors are taken into consideration:

- (a) Generally accepted detention and correctional practices;
- (b) Any judicial findings of inadequacy;
- (c) Any findings of inadequacy from Federal investigative agencies;
- (d) Any findings of inadequacy from internal or external oversight bodies;
- (e) All components of the facility's physical plan;
- (f) The composition of the resident population;
- (g) The number and placement of supervisory staff;
- (h) Programs occurring on a particular shift;
- (i) Any applicable State or local laws, regulations, or standards;
- (j) The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and
- (k) Any other relevant factors.

(2) RHP shall make its best efforts to comply with the staffing and video monitoring plan and, in circumstances where it is not complied with, shall document and justify all deviations.

(3) Staffing adjustments are addressed as each schedule is prepared. Schedules are prepared for two week time periods by the Security Director. All changes must be approved by the Security Director. At least once every year, and in collaboration with the PREA Coordinator, RHP shall conduct an assessment to determine whether adjustments are needed to the staffing plan and the deployment of video monitoring systems and other technologies.

Unannounced Rounds [DOJ §115.13(d)]

(1) Supervisors and security staffs shall conduct and document unannounced rounds covering all shifts, and all areas of the facility, to identify and deter staff sexual abuse or harassment. Staff members who are aware of these rounds will not alert other staff as to when or where these rounds are occurring, unless related to the legitimate operational needs of the facility.

(2) The Security Director shall determine how and when the unannounced rounds will be conducted and shall review all documentation from the rounds.

Cross Gender Viewing and Searches/Searches of Transgender Residents [DOJ §115.15]

(1) Searches

a) The facility shall not conduct cross-gender strip searches (meaning a search that a person to remove or arrange clothing so as to permit a visual inspection of their breasts, buttocks, or genitalia) 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.

Note: "Medical practitioner" means a health professional who, by virtue of education, credentials, and experience, is permitted by law to evaluate and care for patients within the scope of his or her professional practice.

(b) Effective August 20, 2015 [or August 20, 2017 for a facility whose rated capacity does not exceed 50 residents] the facility shall not permit cross-gender pat-down searches (a running of the hands over the clothed body of a resident by an employee to determine whether the individual possesses contraband) of female resident, absent exigent circumstances. The facility shall not restrict female residents' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision.

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

(d) No staff member shall conduct a search of a transgender or intersex resident solely for the purpose of determining genital status. If the resident's genital status is unknown, it may be determined during conversations with the resident, 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.

Note: "Transgender" means a person whose gender identity (internal sense of feeling male or female) is different from the person's assigned sex at birth. "Intersex" means a person whose sexual or reproductive anatomy or chromosomal pattern does not seem to fit typical definitions of male or female.

RHP, Inc. policy prohibits all strip searches, body cavity searches, and does not permit cross gender pat down searches.

Viewing [DOJ §115.15 (d)]

(a) The facility shall enable residents 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.

(b) Staff members of the opposite gender shall announce their presence when entering a residents housing unit.

Residents with Disabilities or Who Have Limited English Proficiency

(1) Disabled Residents [DOJ § 115.16 (a)]

(a) RHP, Inc. shall take appropriate steps, by partnering with Service for Independent Living, to ensure that residents with disabilities have equal opportunity to benefit from all aspects of our efforts to prevent, detect, and respond to sexual abuse and sexual harassment. Such steps shall include – when necessary to ensure effective communication with residents who are deaf or hard of hearing – providing access to interpreters who can interpret effectively, accurately, and impartially.

Note: Residents with disabilities includes residents who are deaf, hard of hearing, blind or have low vision, and those who have intellectual, psychiatric, or speech disabilities.

(b) In addition, RHP, Inc. shall ensure that written materials are provided in formats and through methods that ensure effective communication with residents with disabilities.

(2) Residents Who Have Limited English Proficiency [DOJ § 115.16(b)]

RHP 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 to resident's who have limited English proficiency, including by providing interpreters who can interpret effectively, accurately, and impartially. RHP has employed the services of Columbia Interpreting Services when such services are needed.

(3) Use of resident Interpreters [DOJ § 115.16(c)]

RHP shall not rely on resident interpreters, resident readers, or other types of resident assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise a resident's safety, the performance of first-responder duties, or the investigation of a resident's allegations.

Screening of Residents

(1) Screening for Risk of Victimization and Abusiveness [DOJ §115.41]

(a) All residents shall be assessed during an intake screening and upon transfer from another facility for their risk of being sexually abused by other residents or sexually abusive toward other residents.

(a1) State residents shall be assessed by the State Agency prior to placement at RHP.

(b) Intake screening shall ordinarily take place within 72 hours of arrival at the facility.

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

- (d) The intake screening shall consider, at a minimum, the following criteria to assess for risk of sexual victimization:
- (d1) Whether the resident has a mental, physical, or developmental disability;
 - (d2) The age of the resident;
 - (d3) The physical build of the resident;
 - (d4) Whether the resident has previously been incarcerated;
 - (d5) Whether the resident's criminal history is exclusively nonviolent;
 - (d6) Whether the resident has prior convictions for sex offenses against an adult or child;
 - (d7) Whether the resident is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming;
 - (d8) Whether the resident has previously experienced sexual victimization;
 - (d9) The resident's perception of his or her own vulnerability to sexual abuse or sexual harassment; and
- (e) The initial screening shall consider prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known to RHP, in assessing residents for risk of being sexually abusive.
- (f) Within 72 hours of arrival, RHP shall reassess the resident's risk of victimization or abusiveness based upon any additional, relevant information received since the intake screening.
- (f1) For State residents, the second screening at 30 days shall also be conducted by the State Agency per contract.
- (g) A resident'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 resident's risk of sexual victimization or abusiveness.
- (h) Resident's may not be disciplined for refusing to answer, or for not disclosing complete information related to, (d1), (d7), (d8) and (d9) above.
- (i) Only the Security Director, Federal Program Manager, Probation and Parole Officer and PREA Coordinator will have access to the information from the screening instruments and shall implement appropriate controls on the dissemination of responses to questions asked pursuant to this policy in order to ensure that sensitive information is not exploited to the resident's detriment by staff or other residents.
- (j) Federal, State, and Alternative Sentencing resident's information are confirmed via their resident files. Work Release residents and Boone County resident's information are confirmed via Case Net and current charges.

Use of Information Obtained from Screening [DOJ §115.42]

- (a) The RHP Security Director shall use information from the risk screening to inform housing, bed, work, education, and program assignments with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive. (1)The information is placed in the

database under each individual's name by the Administrative Assistant, (2) Cycles through a query that is printed out and given to the Security Managers (3) The residents are then housed accordingly (4) A housing log binder is kept in the Security Key that has the abbreviations of the risk factors to determine any necessary changes by the Security Director, Security Manager or Security Leader.

(b) RHP will make all effort to house high risk abusers and high risk victims in separate rooms. Should a resident need to be housed in the same room as high risk victims, the resident will be housed closest to the entrance of the door for high visualization by staff when doing rounds.

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

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

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

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

(g) RHP shall not place lesbian, gay, bisexual, transgender, or intersex residents in dedicated facilities, units, or wings solely on the basis of such identification or status unless pursuant to a legal settlement or judgment.

(h) Residents participating in the work program are monitored via the camera, hourly rounds and direct supervision of staff.

RHP will alternate residents when participating in a work and/or program when are not present.

Medical and Mental Health Screenings [DOJ Standards § 115.81]

(a) If the screening required in Section 4. F(1) above indicates that an resident has experienced prior sexual victimization, whether in an institutional setting or in the community, staff shall ensure that the resident is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening.

(b) Any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments.

(c) Medical and mental health practitioners shall obtain informed consent from residents before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the resident is under the age of 18.

Protection of Resident's Facing Substantial Risk

(1) Upon Learning of Substantial Risk [DOJ §115.62]

When RHP learns that a resident is subject to a substantial risk of imminent sexual abuse, it shall take immediate action to protect the resident.

(2) Emergency Grievances [DOJ §115.52 (f)]

(a) RHP has the following procedure for the filing of an emergency grievance alleging that a resident is subject to a substantial risk of imminent sexual abuse.

(3) Sexual Abuse

(b) After receiving an emergency grievance alleging a resident is subject to a substantial risk of imminent sexual abuse, RHP staff shall:

(b1) Immediately forward the grievance to the Security Director for immediate corrective action may be taken;

(b2) Provide an initial response within 48 hours; and

(b3) Issue a final decision within five (5) calendar days.

(c) Documentation and action taken to determine whether the resident was at substantial risk of imminent sexual abuse will be filed with the PREA Coordinator.

Hiring and Promotion Practices [DOJ §115.17]

(1) RHP, Inc. shall not hire or promote anyone who may have contact with residents, or retain the services of any contractor who may have contact with residents, who—

(a) Has engaged in sexual abuse and or sexual harassment in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution; or

(b) Has been convicted of, or civilly or administratively adjudicated for, engaging or attempting to engage in sexual activity in the community facilitated by force, threats of force, or coercion, or if the victim did not consent or was unable to consent.

(2) RHP, Inc. shall consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to retain the services of any contractor, who may have contact with inmates.

(3) Before hiring new employees who may have contact with residents, RHP, Inc. shall:

(a) Perform a criminal background records check; and

Make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse, sexual harassment, or any resignation during a pending investigation of an allegation of sexual abuse or sexual harassment.

(4) RHP shall also perform a criminal background records check before retaining the services of any contractor who may have contact with residents.

(5) RHP shall either conduct criminal background records checks through, State, Federal, and Highway Patrol agencies. For employees working with State residents, the State Agency performs background screenings annually in the employee's birth month. For employees working with Federal offenders, background checks are performed with

the award of each contract as well.

- (6) RHP shall ask all applicants and employees who may have direct contact with residents about previous misconduct described in this section, in:
- (a) Written applications and/or interviews for hiring or promotion; and
 - (b) Interviews or written self-evaluations conducted as part of reviews of current employees.

(7) RHP shall impose on its current employees a continuing affirmative duty to disclose any of the misconduct described in this section.

(8) Material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination.

(9) Unless prohibited by law, RHP 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.

Upgrades to Facilities and Technologies [DOJ §115.18]

(1) When designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, RHP shall consider the effect of the design, acquisition, expansion, or modification on its ability to protect residents from sexual abuse.

(2) When installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, RHP shall consider how such technology may enhance its ability to protect residents from sexual abuse.

RESPONDING TO REPORTS OF SEXUAL ABUSE AND SEXUAL HARASSMENT

To respond to reported incidents of sexual abuse, we have adopted and implemented the following processes:

A. Procedures for Reporting Sexual Abuse and Sexual Harassment

(1) Resident Reporting

(a) Ways for Residents to Report Incidents [DOJ §115.51 (a), (b), and (c)]:

(a1) RHP shall provide multiple internal ways for residents to privately report sexual abuse and sexual harassment, retaliation by other or staff for reporting sexual abuse or sexual harassment, and staff neglect that may have contributed to such incidents. Residents may report concerns by:

i. Reporting the incident to a staff member

ii. Reporting the incident to the Security Director of PREA Coordinator

iii. In the locked grievance box

iv. Anonymously through a third party (i.e. counselor, family member, etc.)

(a2) RHP shall also provide at least one way for residents to report abuse, harassment, retaliation, and staff neglect to a public or private entity that is not part of RHP, and that is able to receive and immediately forward resident reports of sexual abuse and sexual harassment to agency officials, allowing the resident to remain anonymous upon request. Residents may report concerns by:

i. The use of the telephone

ii. The use of their cell phones

(a3) Staff shall accept reports made verbally, in writing, and anonymously. Staff shall promptly document any verbal reports.

(b) Resident Grievances [DOJ] § 115.52 (a), (b), (c), (e) and (g)]

(b1) RHP shall not impose a time limit on when a resident may submit a grievance regarding an allegation of sexual abuse.

(b2) RHP shall not require a resident to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse.

(b3) RHP shall ensure that—

i. A resident who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint, and

ii. Such grievance is not referred to a staff member who is the subject of the complaint.

(b4) RHP shall issue a final 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 shall not include time consumed by resident in preparing any administrative appeal.

(b5) RHP may claim an extension of time to respond, of up to 70 days, if the normal time period for response is insufficient to make an appropriate decision, and shall notify the resident in writing of any such extension and provide a date by which a decision shall be made.

b6) At any level of the administrative process, including the final level, if the resident does receive a response within the time allotted for reply, including any properly noticed extension, the resident may consider the absence of a response to be a denial at that level.

(b7) RHP along with the contracted agency may discipline a resident for filing a grievance related to alleged sexual abuse only where the agency demonstrates that the inmate filed the grievance in bad faith.

(2) Staff Reporting Rules [DOJ §115.51(d) and §115.61]

(a) Any staff member who has knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment; retaliation against residents or staff who reported such an incident; and any staff neglect that may have contributed to such incident or retaliation, shall immediately report such incident or retaliation, to the Executive Director, Security Director or PREA Coordinator.

(b) Apart from reporting to designated supervisors or officials, staff shall not reveal any information related to a sexual abuse report to anyone except those who have a need to know.

Note: Medical and mental health practitioners shall report knowledge, suspicion, or information regarding sexual abuse, sexual harassment, retaliation, or staff neglect pursuant to this section. This information shall be provided to residents, in writing, at the initiation of services.

(c) RHP staff may privately report sexual abuse and sexual harassment of residents to the Executive Director at P.O. Box 1507, Columbia, MO 65205.

(3) Rules for Third Parties to Report Abuse and to Assist Residents with Grievances [DOJ §115.51(c), §115.52 (e), and § 115.54]

(a) Third-party reports of sexual abuse and sexual harassment can be made to fellow residents, family members, attorneys, and outside advocates. Information on how to report sexual abuse and sexual harassment on behalf of a resident can be found at www.realityhouse.org.

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

(c) Third parties, including fellow residents, staff members, family members, attorneys, and outside advocates, shall be permitted to assist residents in filing requests for administrative remedies relating to allegations of sexual abuse, and shall also be permitted to file such requests on behalf of residents.

(d) If a third party files such a request on behalf of a resident, 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. If the resident declines to have the request processed on his or her behalf, RHP shall document the resident's decision.

Coordinated Response [DOJ § 115.65]

In an effort to ensure that the victim receives the best possible care and that investigators have the best chance of apprehending the perpetrator, RHP will coordinate the following:

- Assess the victim's acute medical needs.
 - (a) This shall be done by the first responder
- (2) Inform the victim of his/her rights under relevant Federal and State law.
 - (a) This shall be done by the responding Local Law Enforcement
- (3) Explain the need for a forensic medical exam and offering the victim the option of undergoing one, within 92 hours.
 - (a) This shall be done by the responding Local Law Enforcement
- (4) Offer the presence of victim advocate or qualified staff member during the

exam.

- (a) This shall be done by the PREA Coordinator
 - (5) Provide crisis intervention counseling Kristie Loveall
 - (a) This shall be done by the PREA Coordinator
 - (6) Interview the victim and any witnesses.
 - (a) This shall be done by the PREA Coordinator
 - (7) Collect evidence.
 - (a) First responders' duties are to protect the evidence until Local Law Enforcement respond.
 - (b) First Responder and staff on duty will secure the area, making sure no evidence is removed, tampered with or destroyed.
 - (8) Provide for any special needs the victim may have.
 - (a) This shall be done by the PREA Coordinator
- During this process, first responder will have delegated to other staff to contact 911, Security Director, PREA Coordinator and Executive Director.

Immediate Steps After Receiving Report of Incident [DOJ §115.64 and §115.82 (b)]

- When a security staff first-responder learns that a resident has been sexually abused, they shall take immediate action by;
 - Separate the victim from the alleged perpetrator;
 - (a1) Victim shall be escorted to the administrative office
 - Contact Law Enforcement (Boone County Sheriff's Department);
- (c) Preserve and protect any crime scene by remaining at the scene of the alleged crime until Law Officials arrive; and
- (d) If the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim—and ensure that the alleged abuser—not take any actions that could destroy physical evidence, including washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating; and
- (d) Immediately notify the appropriate medical and mental health practitioners. [115.82 (b)]

(2) When the first staff responder is not a security staff member, they shall request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff.

Note: The Department of Justice (DOJ) defines “first responder” as the staff person (or persons) who first arrive at the scene of an incident.

Medical and Mental Health Services

(1) Emergency [DOJ §115.82

- (a) Resident 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.

(b) Resident victims of sexual abuse while incarcerated shall be offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate.

(c) Treatment services shall be provided to the victim—without financial cost to the victim—and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

(2) Ongoing Medical and Mental Health Care [DOJ §115.83]

(a) The facility shall offer medical and mental health evaluation and, as appropriate, treatment to all residents who have been sexually abused in a prison, jail, lockup, community corrections facility, or juvenile justice facility.

(b) The evaluation and treatment of such victims shall include, as appropriate, follow-up services, treatment plans, and referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody.

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

(d) Resident victims of sexually abusive vaginal penetration at Reality House shall be offered pregnancy tests, as medically necessary.

(e) If pregnancy results from the conduct described in this section, victims shall receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services, such as prenatal care and access to pregnancy termination services, where available.

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

(g) Ongoing treatment services shall be provided to the victim without financial cost to the victim and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

Support Services for Victims of Sexual Abuse

(1) Victim Advocate [DOJ § 115.21(d)(e) and (h)]

(a) RHP shall attempt to make available to the victim an advocate from a rape crisis center (True North). If a rape crisis center is not available to provide victim advocacy services, a qualified staff member from a community-based organization, or a qualified agency staff member will be made available to provide these services.

Note: A “qualified agency staff member” or a “qualified community-based staff member” means 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.

(b) When requested by the victim, the victim advocate, qualified agency staff member, or qualified community-based organization staff member shall accompany the victim throughout the forensic medical examination process and

investigatory interviews and shall provide emotional support, crisis intervention, information, and referrals.

(2) Emotional Support Services [DOJ § 115.53]

(a) RHP residents can access outside victim advocates for emotional support services related to sexual abuse by contacting the agencies on the PREA bulletin board outside the Human Resources Manager's door in the main dayroom. The information contains the mailing addresses and telephone numbers, of local, State, or national victim advocacy or rape crisis organizations, and for persons detained solely for civil immigration purposes, immigrant services agencies. Reasonable communication between residents/inmates and these organizations and agencies, will be available in as confidential a manner as possible.

(b) Communication between the resident and outside agencies will be monitored and forwarded to authorities in accordance with mandatory reporting laws.

(c) True North is the community service provider that will be used to provide inmates with confidential emotional support services related to sexual abuse.

Investigation of Incidents [DOJ §§ 115.21(a)(b)(c)(f) and(h) , 115.22, 115.71, 115.72, 115.73 and 115.86]

- RHP shall ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment.

(2) It is RHP policy to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to a law enforcement agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior. This policy can be viewed on the Reality House website- www.realityhouse.org.

(3) All investigations into allegations of sexual abuse and sexual harassment conducted by Reality House Security Director and PREA Coordinator services will be done promptly, thoroughly, and objectively and include third party and anonymous reports.

(4) Where sexual abuse is alleged, Reality House shall use law enforcement officials to investigate. RHP shall request that the investigating agency follow the DOJ requirements pertaining to investigations of incidents.

(a) Boone County Sheriff's Department will be immediately be notified through Joint Communications in the event of a sexual assault.

(b) RHP will obtain the report number from the responding Deputies

(c) RHP will stay in contact with the Boone County Prosecuting Attorney's Office for determination of prosecution and further findings.

(5) Reality House shall retain all written reports required by this section for as long as the alleged abuser is incarcerated or employed by the agency, plus five years.

(6) 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.

(7) When other agencies investigate sexual abuse, RHP shall cooperate with outside investigators and shall endeavor to remain informed about the progress of the investigation.

Following an investigation into a resident's allegation that he or she suffered sexual abuse, RHP shall inform the resident as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded.

(8) If RHP did not conduct the investigation, it shall request the relevant information from the investigative agency in order to inform the resident.

(9) Following a resident's allegation that a staff member committed sexual abuse against him or her, RHP shall subsequently inform the resident whenever:

- (a) The staff member is no longer posted within the resident's unit;
- (b) The staff member is no longer employed at the facility;
- (c) RHP learns that the staff member has been charged with or indicted on a charge related to sexual abuse within the facility; or
- (d) RHP learns that the staff member has been convicted on a charge related to sexual abuse within the facility.

(10) Following a resident's allegation that he or she has been sexually abused by another resident, RHP shall subsequently inform the alleged victim whenever:

- (a) RHP learns that the alleged abuser has been charged with or indicted on a charge related to sexual abuse within the facility; or
- (b) RHP learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.

All such notifications or attempted notifications shall be documented. RHP's obligation to report under this standard shall terminate if the inmate is released from the agency's custody. [DOJ § 115.73]

(11) Sexual abuse incident reviews [DOJ § 115.86]

(a) A review team, consisting of the RHP Security Director, PREA Coordinator, Executive Director, upper-level management and Security Shift Managers shall conduct a sexual abuse incident review within 30 days of the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded. Information from investigators and medical personnel will be included. 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

Following the review, a report of its findings, determinations, and any recommendations for improvement will be submitted to the Executive Director. Improvements that were implemented as a result of the review will be documented in the final report.

Protection from Retaliation [DOJ §115.67]

Note: For rules regarding reporting by residents and staff of retaliation after it has occurred, see Section 5. A. (Procedures for Reporting Sexual Abuse/Sexual Harassment) above.

- (1) Reality House shall protect all residents and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other residents or staff.
- (2) Protection measures will include housing changes or transfers for resident victims or abusers, removal of alleged staff or resident abusers from contact with victims, and emotional support services for resident or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations.
- (3) For at least 90 days following a report of sexual abuse, RHP shall monitor the conduct and treatment of residents or staff who reported sexual abuse, and of resident who were reported to have suffered sexual abuse, to see if there are changes that may suggest possible retaliation by residents or staff, and shall act promptly to remedy any such retaliation.
Monitoring past 90 days shall continue if the initial monitoring indicates an ongoing need and shall include:
 - (a) Periodic in-person conversations with residents and/or staff;
 - (b) Review of disciplinary incidents involving residents;
 - (c) Review of housing or program changes; and
 - (d) Review of negative performance reviews or reassignments of staff.

Sanctions for Individuals Found to have Participated in Sexual Abuse or Harassment

- (1) Disciplinary Sanctions for Staff [DOJ Standards §115.76]
 - (a) Staff shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies.
 - (b) Termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual abuse.
 - (c) Disciplinary sanctions for violations of Reality House policies relating to sexual abuse or sexual harassment shall be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and

the sanctions imposed for comparable offenses by other staff with similar histories.

(d) All terminations for violations of 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.

Corrective Action for Contractors and Volunteers [§115.77]

(a) Any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with residents and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies.

(b) Reality House shall take appropriate remedial measures, and shall consider whether to prohibit further contact with residents, in the case of any other violation of sexual abuse or sexual harassment policies by a contractor or volunteer.

Disciplinary Sanctions for Residents [DOJ Standards §115.78]

(a) Residents shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in resident-on-resident sexual abuse or following a criminal finding of guilt for resident-on-resident sexual abuse.

(b) Sanctions shall be commensurate with the nature and circumstances of the abuse committed, the resident's disciplinary history, and the sanctions imposed for comparable offenses by other residents with similar histories.

(c) The disciplinary process shall consider whether a resident's mental disability or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed.

(d) On a case by case basis, therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, may be required as a condition of access to programming or other benefits.

(e) RHP may discipline a resident for sexual contact with staff only upon a finding that the staff member did not consent to such contact.

(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, even if an investigation does not establish evidence sufficient to substantiate the allegation.

Notifying Other Confinement Agencies [DOJ § 115.63]

(1) Upon receiving an allegation that a resident was sexually abused while confined at another facility, the Executive Director shall notify the head of the facility or agency where the alleged abuse occurred.

Such notification shall be documented and provided as soon as possible, but no later than 72 hours after receiving the allegation.

TRAINING AND EDUCATION

Reality House is committed to communicating to the residents at its jail, to its employees, and to contractors and volunteers, the following information through the training, education and orientation. The PREA Resource Center will be utilized for training curricula.

A. Employee Training [DOJ §115.31]

- (1) RHP shall train all employees who may have contact with residents on:
 - (a) Its zero-tolerance policy for sexual abuse, sexual harassment and retaliation;
 - (b) How to fulfill their responsibilities regarding prevention, detection, reporting, and response to sexual abuse and sexual harassment;
 - (c) Resident's right to be free from sexual abuse and sexual harassment;
 - (d) The right of residents and employees to be free from retaliation for reporting sexual abuse and sexual harassment;
 - (e) The dynamics of sexual abuse and sexual harassment in confinement;
 - (f) The common reactions of sexual abuse and sexual harassment victims;
 - (g) How to detect and respond to signs of threatened and actual sexual abuse;
 - (h) How to avoid inappropriate relationships with residents;
 - (i) How to communicate effectively and professionally with residents, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming residents;
 - (j) How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.

(2) Security staff employees shall be trained in how to conduct searches of transgender and intersex residents, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs. Cross gender pat down searches are not permitted.

(3) Training shall be tailored to the gender of the residents at the employee's facility. The employee shall receive additional training if the employee is reassigned from a facility that houses only male residents to a facility that houses only female residents, or vice versa.

(4) All current employees shall receive this training, and the PREA Coordinator or designee shall provide each employee with refresher training every two years to ensure that all employees know current sexual abuse and sexual harassment policies and procedures. Refresher information shall also be provided in annual trainings.

Resident Orientation and Education [DOJ §115.33]

During the intake process, residents shall receive information explaining RHP's zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment.

(2) Within 72 hours of intake, RHP Case Managers shall provide and document

comprehensive education to residents regarding their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents, and RHP's policies and procedures for responding to such incidents. This information shall be available in alternate formats for those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to residents who have limited reading skills.

Additionally, key information is continuously and readily available to residents in the participant rule book and the PREA bulletin board.

Volunteer and Contractor Training [DOJ § 115.32]

(1) The Human Resources Manager or Administrative designee shall ensure that all volunteers and contractors who have contact with residents have been trained on their responsibilities under RHP's sexual abuse and sexual harassment prevention, detection, and response policies and procedures.

- The level and type of training provided to volunteers and contractors shall be based on the services they provide and the level of contact they have with residents, but all volunteers and contractors who have contact with residents shall be notified of our zero-tolerance policy regarding sexual abuse and sexual harassment and how to report such incidents. All contractors and volunteers shall confirm, with their signature, that they have received and understand the training provided.
 - Volunteers will be required to receive the same training as a newly hired employee,
 - Contractors and vendors will receive the PREA informational brochure and confirm with their signature on the zero-tolerance policy of understanding

Data Collection and Review [DOJ §§ 115.87- 89]

Data Collection [DOJ § 115.87]

RHP PREA Coordinator:

(1) shall collect accurate, uniform data for every allegation of sexual abuse using a standardized instrument and set of definitions.

(2) shall aggregate the incident-based sexual abuse data at least annually.

(3) 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.

(4) shall maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.

(5) shall also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its residents.

(6) shall provide (upon request) all such data from the previous calendar year to the Department of Justice no later than June 30.

Data Review for Corrective Action [DOJ § 115.88]

Data that is collected shall be presented to the Executive Director for review. The review will be used to assess and improve the effectiveness of the sexual abuse prevention, detection, and response policies, practices, and training, including by:

- (a) Identifying problem areas;
- b) Taking corrective action on an ongoing basis; and
- (c) Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole.

(2) 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 progress made in addressing sexual abuse.

(3) The Executive Director shall present the report for approval by the Board of Directors and subsequently be published on the Reality House website. Specific material from the report may be redacted when publication would present a clear and specific threat to the safety and security of a facility. The nature of the material redacted shall be noted.

Data Storage, Publication, and Destruction [DOJ § 115.89]

RHP PREA Coordinator shall be responsible for securely maintaining all data collected, and annually publishing all aggregated sexual abuse data. Personal identifiers shall be removed prior to publication.

All sexual abuse data collected shall be retained for at least 10 years after the date of the initial collection unless Federal, State, or local law requires otherwise.

Collective Bargaining Agreements [DOJ § 115.66]

Reality House is not involved with collective bargaining.

Auditing and Corrective Action [DOJ § 115.401-405]

A. Frequency and Scope of Audits [DOJ § 115.401]

(1) During the three-year period starting on August 20, 2013, and during each three-year period thereafter, [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.

(2) RHP shall bear the burden of demonstrating compliance with the standards, and permit the auditor to review all relevant agency-wide policies, procedures, reports,

internal and external audits, and accreditations for each facility. We will provide copies of all relevant documents and allow auditors to conduct private interviews with inmates.

- (3) Additionally, RHP shall make available to the auditor, at a minimum:
- (a) A sampling of relevant documents and other records and information for the most recent one-year period;
 - (b) A sampling of any available videotapes and other electronically available data that may be relevant to the provisions being audited.
 - (c) Access to all areas of the facility being audited.
 - (d) Cooperation of all RHP staffs and a sample of residents to be interviewed.
 - (e) At least one way for inmates to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel.

Auditor Qualifications [DOJ § 115.402]

Reality House shall ensure that audits are conducted by a qualified, certified auditor by the Department of Justice, which includes:

- (a) A member of a correctional monitoring body that is not part of, or under the authority of, RHP;
- (b) A member of an auditing entity such as an inspector general's or ombudsperson's office that is external to the agency; or
- (c) Other outside individuals with relevant experience.

No audit shall be conducted by an auditor who has received financial compensation from RHP, except for compensation received for conducting prior PREA audits, within the three years prior to the agency's retention of the auditor. Furthermore, RHP shall not employ, contract with, or otherwise financially compensate the auditor for three years subsequent to the retention of the auditor, with the exception of contracting for subsequent PREA audits.

Audit Contents and Findings [DOJ § 115.403]

(1) Each audit shall include a certification by the auditor that no conflict of interest exists with respect to his or her ability to conduct an audit of the agency under review.

(2) Audit reports shall state whether agency-wide policies and procedures comply with relevant PREA standards.

(3) For each PREA standard, the auditor shall determine whether the audited facility reaches one of the following findings:

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

(4) The audit summary shall indicate, among other things, the number of provisions the facility has achieved at each grade level.

(5) Audit reports shall describe the methodology, sampling sizes, and basis for the auditor's conclusions with regard to each standard provision for each audited facility, and shall include recommendations for any required corrective action.

(6) Reality House Programs, Inc. shall ensure that the auditor's final report is published on the corporate website.

Audit Corrective Action Plan [DOJ § 115.404]

(1) A finding of "Does Not Meet Standard" with one or more standards shall trigger a 180-day corrective action period.

(2) The auditor and RHP shall jointly develop a corrective action plan to achieve compliance.

(3) The auditor shall take necessary and appropriate steps to verify implementation of the corrective action plan, such as reviewing updated policies and procedures or re-inspecting portions of a facility.

(4) After the 180-day corrective action period ends, the auditor shall issue a final determination as to whether the facility has achieved compliance with those standards requiring corrective action.

(5) If RHP does not achieve compliance with each standard, it may request a subsequent audit once it believes that it has achieved compliance.

Audit Appeals [DOJ § 115.405]

(1) RHP may lodge an appeal with the Department of Justice regarding any specific audit finding that it believes to be incorrect.

(a) Such appeal must be lodged within 90 days of the auditor's final determination.

(2) If the Department determines that Reality House has stated good cause for a re-evaluation, a re-audit may be commissioned (at RHP expense) with an auditor mutually agreed upon by the Department and the agency.

(3) The findings of the re-audit shall be considered final.