

Disclaimer: This report, as required per 28 CFR §115.403, details the findings of an audit that was conducted by an outside contractor to determine the Federal Bureau of Prisons' (FBOP) compliance with the Prison Rape Elimination Act (PREA). As the work product of independent auditors subcontracted by [PREA Auditors of America \(PAOA\)](#), the FBOP is **not** responsible for grammatical or typographical errors. Additionally, any questions or comments regarding the discrepancies or inaccuracies found within this report should be directed to the subcontracted independent auditor (name and email address can be found on page one of the report), for explanation and resolution.

PREA Facility Audit Report: Final

Name of Facility: FDC Philadelphia
Facility Type: Prison / Jail
Date Interim Report Submitted: NA
Date Final Report Submitted: 05/17/2024

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input type="checkbox"/>
Auditor Full Name as Signed: Grace A Franks	Date of Signature: 05/17/2024

AUDITOR INFORMATION	
Auditor name:	Franks, Grace
Email:	gaf001984@gmail.com
Start Date of On-Site Audit:	04/02/2024
End Date of On-Site Audit:	04/04/2024

FACILITY INFORMATION	
Facility name:	FDC Philadelphia
Facility physical address:	700 Arch Street, Philadelphia, Pennsylvania - 19106
Facility mailing address:	

Primary Contact

Name:	Kimberly Shivers, Associate Warden of Programs, PREA Compliance Manager
Email Address:	PHL-PREAComplianceMgr-S@bop.gov
Telephone Number:	215-521-4000

Warden/Jail Administrator/Sheriff/Director	
Name:	Raphael Ramos
Email Address:	PHL-PREAComplianceMgr-S@bop.gov
Telephone Number:	215-521-4000

Facility PREA Compliance Manager	
Name:	
Email Address:	
Telephone Number:	

Facility Health Service Administrator On-site	
Name:	Kevin Cassano
Email Address:	PHL-PREAComplianceMgr-S@bop.gov
Telephone Number:	215-521-4000

Facility Characteristics	
Designed facility capacity:	1123
Current population of facility:	994
Average daily population for the past 12 months:	948
Has the facility been over capacity at any point in the past 12 months?	No
Which population(s) does the facility hold?	Both females and males

Age range of population:	18 to 79
Facility security levels/inmate custody levels:	Administrative, Low/Community, In, Out, Max
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	223
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	7
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	52

AGENCY INFORMATION

Name of agency:	Federal Bureau of Prisons
Governing authority or parent agency (if applicable):	U.S. Department of Justice
Physical Address:	320 1st Street Northwest, Washington , Dist. Columbia - 20534
Mailing Address:	
Telephone number:	2023073250

Agency Chief Executive Officer Information:

Name:	Colette S. Peters, Director
Email Address:	bop-rsd-preacoordinator@bop.gov
Telephone Number:	(202) 307-3250

Agency-Wide PREA Coordinator Information

Name:	Adriana Restrepo	Email Address:	arestrepo@bop.gov
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Facility AUDIT FINDINGS

Summary of Audit Findings

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

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

Number of standards exceeded:

6

- 115.13 - Supervision and monitoring
- 115.15 - Limits to cross-gender viewing and searches
- 115.17 - Hiring and promotion decisions
- 115.42 - Use of screening information
- 115.43 - Protective Custody
- 115.71 - Criminal and administrative agency investigations

Number of standards met:

35

Number of standards not met:

0

Not audited at the facility level:

Audited at the agency-level, and not relevant to the facility-level audit because the facility has no independent responsibility for the operation of these standards.

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AGENCY AUDIT FINDINGS

Summary of Audit Findings

These standards were audited at the agency-level. For more information, please see the attached agency audit report found at the end of this document.

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

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

Number of standards exceeded:

0

Number of standards met:

10

Number of standards not met:

0

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2024-04-02
2. End date of the onsite portion of the audit:	2024-04-04

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	Women Organized Against Rape (WOAR). Emailed them to notify of the audit and directed them to call or email with any concerns. Spoke to an operator when called that verified that they provided services to the facility.

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	1123
15. Average daily population for the past 12 months:	948
16. Number of inmate/resident/detainee housing units:	10
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

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

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

36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	868
38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	7
39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	129
40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	14
41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	2
42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	6
43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	14

44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:	11
45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:	4
46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:	2
47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:	176
48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):	This auditor was provided with a roster of inmates who fell into these targeted populations.
Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit	
49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:	216
50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	70

51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	7
52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	No text provided.
INTERVIEWS	
Inmate/Resident/Detainee Interviews	
Random Inmate/Resident/Detainee Interviews	
53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	16
54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	<input checked="" type="checkbox"/> Age <input checked="" type="checkbox"/> Race <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input checked="" type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input checked="" type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> None
55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	I chose a sample of inmates from each housing unit.
56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?	<input checked="" type="radio"/> Yes <input type="radio"/> No

57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
Targeted Inmate/Resident/Detainee Interviews	
58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	21
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	
60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	1
61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:	3
62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:	1

63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:	1
64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:	2
65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	3
66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	4
67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:	3
68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:	3

69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<div> <input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. </div> <div> <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed. </div>
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	<p>FDC Philadelphia had no occurrences of housing individuals in segregated housing involuntarily for risk of sexual victimization. This auditor inquired with victims who were interviewed and those who reported as well as segregated housing staff.</p>
70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	No text provided.
Staff, Volunteer, and Contractor Interviews	
Random Staff Interviews	
71. Enter the total number of RANDOM STAFF who were interviewed:	13

72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	<input type="checkbox"/> Length of tenure in the facility <input type="checkbox"/> Shift assignment <input type="checkbox"/> Work assignment <input type="checkbox"/> Rank (or equivalent) <input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken) <input type="checkbox"/> None
If "Other," describe:	gender
73. Were you able to conduct the minimum number of RANDOM STAFF interviews?	<input checked="" type="radio"/> Yes <input type="radio"/> No
74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	Selected staff from various disciplines and shifts.
Specialized Staff, Volunteers, and Contractor Interviews	
Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.	
75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	27
76. Were you able to interview the Agency Head?	<input checked="" type="radio"/> Yes <input type="radio"/> No

77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	<input checked="" type="radio"/> Yes <input type="radio"/> No
78. Were you able to interview the PREA Coordinator?	<input checked="" type="radio"/> Yes <input type="radio"/> No
79. Were you able to interview the PREA Compliance Manager?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

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

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

	<input checked="" type="checkbox"/> Other
If "Other," provide additional specialized staff roles interviewed:	Health Service Administrator, Chief Psychiatrist, Employee Development staff
81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	<input type="radio"/> Yes <input checked="" type="radio"/> No
82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of CONTRACTORS who were interviewed:	1
b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Security/detention <input type="checkbox"/> Education/programming <input checked="" type="checkbox"/> Medical/dental <input type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input type="checkbox"/> Other
83. Provide any additional comments regarding selecting or interviewing specialized staff.	There were no volunteers on-site to interview during the on-site audit.

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

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

84. Did you have access to all areas of the facility?

☒ Yes

☐ No

Was the site review an active, inquiring process that included the following:

85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?

☒ Yes

☐ No

86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?

☒ Yes

☐ No

87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?

☒ Yes

☐ No

88. Informal conversations with staff during the site review (encouraged, not required)?

☒ Yes

☐ No

89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).	No text provided.
Documentation Sampling	
Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.	
90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?	<input checked="" type="radio"/> Yes <input type="radio"/> No
91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).	No text provided.
SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY	
Sexual Abuse and Sexual Harassment Allegations and Investigations Overview	
Remember the number of allegations should be based on a review of all sources of allegations (e.g., hotline, third-party, grievances) and should not be based solely on the number of investigations conducted. Note: For question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, or detainee sexual abuse allegations and investigations, as applicable to the facility type being audited.	

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

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual abuse	3	1	2	1
Staff-on-inmate sexual abuse	0	0	0	0
Total	3	1	2	1

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

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	3	0	3	0
Staff-on-inmate sexual harassment	1	0	1	0
Total	4	0	4	0

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual abuse	1	0	0	0	0
Staff-on-inmate sexual abuse	0	0	0	0	0
Total	1	0	0	0	0

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	1	0	2	0
Staff-on-inmate sexual abuse	0	0	0	0
Total	1	0	2	0

Sexual Harassment Investigation Outcomes

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	0	0	3	0
Staff-on-inmate sexual harassment	0	0	1	0
Total	0	0	4	0

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

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

3

99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)
Inmate-on-inmate sexual abuse investigation files	
100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	3
101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
Staff-on-inmate sexual abuse investigation files	
103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	0
104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)

105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
Sexual Harassment Investigation Files Selected for Review	
106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	4
107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)
Inmate-on-inmate sexual harassment investigation files	
108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	3
109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)

Staff-on-inmate sexual harassment investigation files

111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:

1

112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?

☐ Yes

☒ No

☐ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)

113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?

☒ Yes

☐ No

☐ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)

114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.

One inmate on inmate sexual abuse investigation is pending with the FBI, this auditor was able to review the pending file and all other information requested regarding the alleged perpetrators and alleged victim. All staff related investigations are conducted by the SIA through the Office of Internal Affairs. The PREA Compliance Manager shared all information she was able to from her local file in reviewing the allegation and findings including retaliation monitoring and the after-action review. There were no staff on inmate sexual abuse investigation files to review from the audit look back period.

SUPPORT STAFF INFORMATION

DOJ-certified PREA Auditors Support Staff

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

☐ Yes

☒ No

Non-certified Support Staff

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

☐ Yes

☒ No

AUDITING ARRANGEMENTS AND COMPENSATION

121. Who paid you to conduct this audit?

☐ The audited facility or its parent agency

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

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

☐ Other

Identify the name of the third-party auditing entity

Corrections Consulting Services

Standards	
Auditor Overall Determination Definitions	
<ul style="list-style-type: none"> Exceeds Standard (Substantially exceeds requirement of standard) Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period) Does Not Meet Standard (requires corrective actions) 	
Auditor Discussion Instructions	
<p>Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.</p>	

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.11 (a)</p> <p>The Federal Bureau of Prisons (BOP) has a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment. This policy is stated in the Inmate Handbook and BOP Program Statement (P.S.) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program. P.S. 5324.12 is an all-encompassing PREA Policy which outlines the Agency's approach to prevention, detection, and responding to sexual harassment and sexual abuse. P.S. 5324.12 provides definitions of prohibited behaviors regarding sexual abuse and sexual harassment, sanctions for perpetrators of sexual abuse and sexual harassment, and a description of the Agency strategies and responses to reduce and prevent sexual abuse and sexual harassment. This auditor reviewed the BOP P.S. 5324.12 Sexually Abusive Behavior Prevention and Intervention Program and finds that it meets the requirements of provision a. of this standard. "Sexually Abusive Behavior Prevention and Intervention: Information and How to Report, An Overview for Inmates," was provided to this auditor for FDC Philadelphia. The overview states that the BOP has a zero-tolerance policy against</p>

	<p>sexual abuse and sexual harassment and that while incarcerated no one has a right to pressure you to engage in sexual acts. The institutional supplement PHL 5324.12d was also provided to this auditor and further states that the institution has zero tolerance for all forms of sexual abuse and sexual harassment. PHL 5324.12d states that staff are responsible for understanding and participating in the prevention of sexually abusive behavior as outlined in P.S. 5324.12. FDC Philadelphia is compliant with this provision of the standard.</p> <p>115.11 (b)</p> <p>The PREA Coordinator has agency-wide oversight and reports to the Assistant Director of the Reentry Services Division as evidenced by the organizational chart provided to this auditor. The PREA Coordinator was interviewed and stated that she has enough time to manage all PREA responsibilities as the position is full-time. There are 122 PREA Compliance Managers, one per institution, throughout the BOP. The PREA Compliance Managers work with the PREA Coordinator through regular calls, emails, trainings, and in-person meetings. An internal auditing process exists where facilities are audited internally for compliance and where deficiencies are found the PREA Coordinator works with Regional Coordinators, PREA Compliance Managers, and Wardens to bring the facility into compliance. FDC Philadelphia is compliant with this provision of the standard.</p> <p>115.11 (c)</p> <p>FDC Philadelphia has a designated PREA Compliance Manager (PCM). The Associate Warden who reports to the Warden is that designee. The PCM was interviewed on-site and reports that she has enough time to manage all of her PREA-related responsibilities. The PCM outlined some of those duties as being training, reviewing, and maintaining files, retaliation monitoring, after action reviews, working with investigators and psychology to initiate PREA protocols, Warden to Warden notifications, reporting on PREA incidents and concerns during weekly SHU meetings, and being available to answer questions from both inmates and staff regarding PREA. This auditor noted that the PCM was extremely organized and knowledgeable in all PREA related topics and investigations. FDC Philadelphia is compliant with this provision of the standard.</p> <p>FDC Philadelphia is compliant with all provisions of this standard.</p>
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115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.12 (a)</p> <p>As per P.S. 5324.12, all contracts for the confinement of inmates shall include the</p>

	<p>entity's obligation to adopt and comply with the PREA Standards. There are no current open contracts to house inmates.</p> <p>115.12 (b)</p> <p>P.S. 5324.12 states that the BOP must ensure that its contracts with secure privatized facilities, jails, juvenile facilities, and Residential Reentry Centers include their obligation to adopt and comply with the PREA Standards. The Privatization Management Branch and Residential Reentry Management Branch field staff include PREA compliance monitoring within their scheduled contract monitoring activity.</p> <p>This standard is not applicable to FDC Philadelphia. FDC Philadelphia has no contracts with private agencies or other entities for the confinement of inmates. FDC Philadelphia is compliant with all provisions of the standard.</p>
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115.13	Supervision and monitoring
	<p>Auditor Overall Determination: Exceeds Standard</p>
	<p>Auditor Discussion</p>
	<p>115.13 (a)</p> <p>115.13 requires each facility to develop, document and make its best efforts to comply on a regular basis with a staffing plan that provides adequate levels of staffing, and where applicable video monitoring to protect inmates against abuse. This auditor was provided with FDC Philadelphia staffing report and a memo from the Warden dated January 2, 2024 stating that FDC Philadelphia reviews the staffing plan, the deployment of monitoring technology and the allocations of facilities to ensure compliance. The memo references the Work Force Utilization Committee which meets quarterly to evaluate the staffing of the facility. PREA considerations are made during these meetings. This auditor was provided with meeting minutes for the last twelve months. Meeting minutes from October 31, 2023 were provided which indicate that new video cameras systems were being installed and the PREA Compliance Manager (PCM) noted that the new system will enhance the institution's ability to comply with PREA. The PCM also notes that the staffing levels are adequate for the protection of inmates from sexual assault. The PAQ states that the average daily population since the last PREA Audit in June of 2021, is 891, and the staffing plan is predicated on 891 inmates. The PCM and Warden both indicated in their interviews that the facility has a staffing plan and in developing that staffing plan staffing levels to protect inmates against sexual abuse are considered. The Warden stated that Workforce Utilization Committee Meetings are held quarterly and at those meetings if there are areas of concerns requests are made for additional positions. The Warden further stated that areas of concern are brought up and discussed at SHU meetings, which are held weekly. As per the PCM and the Warden when assessing adequate staffing levels and the need for video monitoring, the facility staffing plan considers all considerations required by this standard. These considerations are discussed at</p>

the Workforce Utilization Committee Meeting, which is held quarterly and during regular Department Head meetings. The Warden stated that he checks for compliance with the staffing plan by reviewing staffing reports with Human Resources and executive staff, continuously reviewing vacancies, projecting when people are going to retire and requesting to fill those vacancies in advance and requesting that the Bureau offer incentives to promote recruitment and retention. The PCM noted that discussions regarding staffing are also held during after action reviews. This auditor observed the staffing and video monitoring technology at FDC Philadelphia and finds it to exceed compliance with this provision of the standard.

115.13 (b)

As per P.S. 5324.12 Sexually Abusive Behavior Prevention and Intervention Program all deviations are documented in the remarks section of the Salary/Workforce Utilization Committee Meeting Minutes. As per the PAQ and a memo dated January 2, 2024, from the Warden, there were no deviations from the staffing plan in the last twelve months. The Warden stated that the staffing plan is always complied with.

Staff will be mandated to ensure compliance. FDC Philadelphia is compliant with this provision of the standard.

115.13 (c)

P.S. 5312.12 outlines the requirement set forth in this standard regarding considerations for the staffing plan. The staffing plan is reviewed quarterly during the Work Force Utilization Committee meetings. This auditor was provided with minutes from the last four quarterly meetings indicating that PREA is considered when making staffing decisions as well as considerations for video monitoring. A memo from the Warden dated January 2, 2024, states that FDC Philadelphia reviews the staffing plan, the deployment of monitoring technology and the allocation of facilities to ensure compliance. As per the PREA Coordinator, an annual review of the staffing plan is provided to her for review. FDC Philadelphia is compliant with this provision of the standard.

115.13 (d)

P.S. 5324.12 states that unannounced rounds by supervisory staff are conducted with the intent of identifying and deterring sexual abuse and sexual harassment. The unannounced rounds are conducted at a minimum weekly to include all shifts and areas of the facility. The Institutional Duty Officer is tasked with conducting the unannounced rounds. A memo from the Warden dated January 2, 2024, states that to help detect and prevent sexual abuse and sexual harassment, the Institution Duty Officer conducts weekly rounds through each area of the institution, to incorporate all shifts. As per the memo the rounds are documented. The institution supplement PHL 5324.12d states that Department Heads, Lieutenants, Institutional Duty Officers, and Executive Staff are responsible for maintaining documentation of unannounced daily rounds within their respective areas of responsibilities. Documented unannounced rounds by intermediate-level or higher-level supervisors to identify and deter staff sexual abuse and sexual harassment are required and will be conducted and documented on the Institutional Duty Officer "Unannounced Institution Rounds" form

	<p>for all shifts. This documentation will be sent to the PREA Compliance Manager for retention. PHL 5324.12d also states that staff are prohibited from alerting other staff when unannounced rounds are being conducted. This auditor reviewed ten Unannounced Institution Duty Officer Rounds indicating that rounds are conducted on various shifts and throughout all locations of the facility. Three staff responsible for conducting rounds were interviewed and all report that they conduct unannounced PREA rounds which they document on the Duty Officer form and in TruScope. All three described to the auditor how they conduct rounds in order to prevent staff from alerting other staff that they are conducting such rounds. The staff reported that they do rounds randomly, unscheduled, and unannounced. The staff report conducting rounds on all three shifts and in all areas of the facility. The staff indicated that when they conduct these rounds they look for blind spots, functioning equipment, check that doors are locked, check random cells, talk to staff and inmates, look for security issues, attire of inmates, appearance of inmates, and listen. FDC Philadelphia is compliant with this provision of the standard.</p> <p>FDC Philadelphia exceeds the requirements of this standard. The layout of the facility, coupled with staff placement, mirrors, video surveillance placement, and upper-level staff availability to inmates regularly is evidence that FDC Philadelphia exceeds the expectation of this standard.</p>
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115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.14</p> <p>FDC Philadelphia does not house youthful offenders. All inmates are 18 years of age or older as evidenced by inmate rosters, this auditor's observations, and interviews with staff and inmates while on-site. FDC Philadelphia is compliant with this standard, as it is not applicable.</p>

115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>115.15 (a)</p> <p>As per P.S. 5324.12 Sexually Abusive Behavior Prevention and Intervention Program and the institution supplement PHL 5324.12d, the facility shall not conduct cross-gender strip searches or cross-gender visual body cavity searches except in exigent</p>

circumstances or when performed by medical practitioners. Visual searches are to be conducted by staff of the same gender as the inmate, except where circumstances are such that a delay would mean the loss of contraband. In such a case, this exception would be documented in the inmate's file. As per the PAQ there were no cross-gender strip or visual body cavity searches in the last twelve months. As per informal interviews with inmates and staff on-site, cross-gender searches are not allowed unless exigent circumstances exist at FDC Philadelphia. FDC Philadelphia is compliant with this provision of the standard.

115.15 (b)(c)

As per P.S. 5324.12 and the institution supplement PHL 5324.12d, the facility documents all cross-gender strip searches and cross gender visual body cavity searches as well as cross gender pat down searches of female inmates and maintains that documentation in the inmates' file. As per the PAQ there were no pat searches of female inmates by male staff. As per informal interviews with inmates and staff on-site, cross-gender searches are not allowed unless exigent circumstances exist at FDC Philadelphia. Two random female inmates were interviewed on-site, and both indicate that they have never been unable to participate in activities outside their cell because female staff was not available, the inmates indicated that female staff is always on-site. The thirteen random staff interviewed all report that female's staff are always on-site, therefore female inmates are never prohibited from participating in activities outside their cells because a female staff member is not available to pat search them. FDC Philadelphia is compliant with this provision of the standard.

115.15 (d)

P.S. 5324.12 states that the facility shall implement policies and procedures that enable inmates to shower, perform bodily function, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. The program statement states that inmates are only to shower, perform bodily functions, and change clothing in designated areas of the housing unit. P.S. 5324.12 also outlines the requirements for announcing the presence of opposite-gender staff members. The policy provides four notifications to inmates. 1) Inmates are advised of the requirement to remain clothed, and the presence of cross-gender staff at intake and orientation. 2) Notices are posted on inmate bulletin boards and signs within housing units stating that both male and female staff routinely work and visit inmate housing areas. 3) For housing unit officers, an announcement is made at the beginning of the shift or at a designated time to notify that staff of the opposite gender will be working in that unit. 4) For staff that are assigned to work within the unit a schedule is available for inmates to view that indicates when staff of the opposite gender will be on the housing unit. Opposite gender staff who are not assigned to the housing unit area and must go into the individual cells, showers, or bathroom areas must announce themselves when entering the unit. A memo dated January 2, 2024, from the Warden states that FDC Philadelphia has implemented policies and procedures that enable inmates to shower, perform bodily functions, and change clothing without normal non-medical staff of the opposite gender viewing

their buttocks, or genital area except in exigent circumstances or when such viewing is incidental to routine cell checks. The memo further states that there have been no exigent circumstances at FDC Philadelphia which required cross gender viewing of an inmate by a staff member in the last 12 months. The thirteen staff and fourteen of sixteen random inmates interviewed report that staff of the opposite gender announce their presence when entering a housing unit of the opposite gender. One inmate stated that this does not occur, and the other inmate was uncertain. This auditor observed various notifications to inmates while on-site. This auditor observed painted signage on a pole in all the housing units indicating that staff of the opposite gender work in the facility. This auditor overheard the announcement made at shift-change notifying inmates that staff of the opposite gender work at the facility. This auditor observed staff ringing a bell two times prior to entering a housing unit to notify the inmates that staff of the opposite gender is entering the housing unit. This auditor observed staff announcing "female" or "male" (depending on the housing unit) on unit, upon entering the housing unit. The random inmates and staff interviewed, except for the two who were unaware or denied this occurring, referenced these various ways in which inmates are notified of staff of the opposite gender entering a housing unit. All thirteen random staff interviewed, and all sixteen random inmates interviewed reported that inmates are able to dress, shower, and use the toilet without being viewed by staff of the opposite gender unless the viewing occurs incidentally during rounds. This auditor finds that FDC Philadelphia exceeds this provision of the standard by providing multiple ways of notifying inmates of staff entering the housing unit who are the opposite gender.

115.15 (e)

P.S. 5324.12 and the institution supplement PHL 5324.12d states that the facility shall not search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. If the genital status is unknown, it may be determined through conversation with the inmate, reviewing medical records, or if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner. A memo from the Warden dated January 2, 2024 states that a staff member at FDC Philadelphia shall not search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. All sixteen random staff interviewed noted that they are aware that inmates cannot be searched solely to determine an inmate's genital status. The four transgender inmates interviewed all report that they were never searched for the sole purpose of determining their genital status. FDC Philadelphia is compliant with this provision of the standard.

115.15 (f)

As per the PAQ, 100 percent of security staff are trained on conducting cross-gender pat-downs searches and searches of transgender and intersex inmates in a professional and respectful manner, consistent with security needs. This auditor was provided with training records indicating that all staff completed the Search and Restraint Procedures for Special Populations. The Escort Procedures training PowerPoint was provided to this auditor as well as instructor notes. Signed

	<p>acknowledgements of the training were also provided. This auditor finds that the training satisfies the requirement of this provision by providing appropriate training on how to conduct cross-gender pat searches in a professional and respectful manner and how to conduct searches of transgender and intersex inmates in a professional and respectful manner. All sixteen random staff interviewed, and the Employee Development Manager interviewed report that staff receive training on cross-gender, transgender, and intersex inmate pat-searches annually. Some staff showed this auditor with their hands how these searches should be conducted, others explained. Staff interviewed and transgender inmates interviewed discussed the card that transgender inmates can get that they carry indicating what their search preference is. FDC Philadelphia is compliant with this provision of the standard.</p> <p>FDC Philadelphia exceeds this standard due to the multiple efforts in place to notify inmates of staff who are of the opposite gender entering the housing unit. The various methods in place for notification exceed what is required of the standard and assist in the facility's efforts to limit the occurrence of cross- gender viewing.</p>
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115.16	Inmates with disabilities and inmates who are limited English proficient
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>115.16 (a)</p> <p>P.S. 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states and the Agency Head noted during interview that Institution PREA Compliance Managers are responsible for reaching out to the local disability assistance offices, as a resource to ensure the facility is providing effective communication accommodations when needed. P.S. 5324.12 states that staff are to take reasonable action to ensure that available methods of communication are provided to all inmates with disabilities for complete access to its efforts of preventing, detecting, and responding to sexual abuse and sexual harassment. The Inmate Admission and Orientation Handbook states that inmates with disabilities or who are limited English proficient will be informed of the BOP's efforts to prevent, detect, and respond to sexual abuse and harassment by using a professional translation service. A memo from the Warden dated January 2, 2024, states that upon identification of an inmate with a disability, the Unit Team staff will coordinate the procurement of accommodations commensurate with the inmate's disability. A memo from the Warden dated January 2, 2024, states that upon identification of an inmate that needs the language line, the procedures are available in the LanguageLine memo. This auditor reviewed the memo, a list of languages available as well as the purchase order for LanguageLine. This auditor was provided with various signage and notices which are in both English and Spanish regarding PREA. Eight inmates with disabilities or limited English proficient were interviewed. One had a physical disability, three</p>

	<p>cognitive disabilities, one was hard of hearing, one was visually impaired, and two were limited English proficient. All inmates indicated that they are able to understand the sexual abuse and sexual harassment policy and procedures for reporting incidents. One Spanish speaking inmate reported that he was not provided information in Spanish at intake, but the postings on the unit are in Spanish and other inmates or Spanish speaking staff assist him. FDC Philadelphia is compliant with this provision of the standard.</p> <p>115.16 (b)</p> <p>P.S. 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states that Institution PREA Compliance Managers are responsible for reaching out to available interpretation services to ensure the facility is providing effective communication accommodations when a need for such an accommodation is known. P.S. 5324.12 states that staff are to take reasonable action to ensure that available methods of communication are provided to all inmates who are limited English proficient (LEP) for complete access to its efforts of preventing, detecting, and responding to sexual abuse and sexual harassment. Both LEP inmates who were interviewed stated that they understood the zero-tolerance policy for sexual abuse and sexual harassment and that they knew how to report incidents of sexual abuse or sexual harassment. The two inmates noted that the facility has information throughout the facility in English and Spanish and that other inmates and Spanish speaking staff assist them if needed. This auditor observed information throughout the facility in both English and Spanish. The intake staff walked this auditor through the intake process and indicated that the inmates who cannot read in English are provided information in Spanish and the staff showed this auditor the stacks of the Spanish paperwork. FDC Philadelphia is compliant with this provision of the standard.</p> <p>115.16 (c)</p> <p>P.S. 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states that the agency shall not rely on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay could compromise an inmate's safety, the performance of first responder duties, or the investigation. As per the PAQ there were no instances where inmate interpreters, readers, or other types of inmate assistance have been used. All thirteen random staff interviewed indicate that the facility never uses inmate interpreters for investigative purposes. The staff noted that at times an inmate interpreter will assist with the initial notification of the incident, but they have never seen the investigative staff use inmate interpreters for any kind of investigation at the facility. FDC Philadelphia is compliant with this provision of the standard.</p> <p>FDC Philadelphia is compliant with all provisions of this standard.</p>
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115.17	Hiring and promotion decisions
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Auditor Overall Determination: Exceeds Standard

Auditor Discussion

115.17 (a)

P.S. 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states that the agency will not hire or promote anyone who may come in contact with inmates, and shall not enlist the services of any contractor who may have contact with inmates if they have: engaged in sexual abuse in prison, jail, lockup or any other institution; been convicted of engaging or attempting to engage in sexual activity in the community or has been civilly or administratively adjudicated to have engaged in sexual abuse by force, overt or implied threats of force or coercion. The Pre-Employment Guide and the Human Resource Management Manual (P.S. 3000.03) outlines the background check requirement as well as exceptions, responsibilities, and how derogatory information uncovered is handled. This auditor reviewed personnel files with the Human Resource staff. This auditor reviewed that the questions were asked upon hire regarding prior work in institutions and background checks were completed initially and again in five years. The background check is very extensive for the BOP, for this reason this auditor finds FDC Philadelphia to exceed this provision of the standard.

115.17 (b)

The BOP considers incidents of sexual harassment in determining whether to hire or promote or enlist the services of any contractor who may have contact with inmates. The General Employment Considerations for Staff indicates that the applicant's character or past conduct might impose a statutory bar to employment or impede employment by adversely impacting on the Bureau's efficiency by jeopardizing the ability to accomplish its mission successfully. As per the Human Resource staff interviewed, BOP utilizes USAJobs which contains the PREA questionnaire. This questionnaire would also have to be filled out for promotions. FDC Philadelphia is compliant with this provision of the standard.

115.17 (c)

The BOP Recruitment pamphlet indicates that employment is subject to satisfactory completion of a background investigation, which also includes law enforcement and criminal records checks, credit checks, inquiries with previous employers and personal references. As per the PAQ, 32 people who have contact with inmates have been hired and had their criminal background check completed in the last twelve months. This auditor reviewed employee files with the Human Resource staff on site and identified background checks and investigations were completed. Not only does the facility do an NCIC check, but a domestic violence check, credit check, and an in-depth background investigation by the Security and Background Investigation Section (SBIS). FDC Philadelphia is compliant with this provision of the standard.

115.17 (d)

P.S. 3000.03, indicates that the agency performs criminal background checks before enlisting the services of any contractor who may have contact with inmates via a check of the National Crime Information Center (NCIC). As per the PAQ, there were 7 contracts for services where criminal background record checks were conducted on all staff covered in the contract who might have contact with inmates in the last twelve months. The Human Resource staff interviewed stated that depending on the pre-determined level, contractors who are full-time with the facility would be required to go through the same checks and investigations as the BOP staff. All volunteers and contractors have an NCIC background check completed prior to being allowed access to the facility. Human Resource manages the contractors' background checks and files, the volunteer files are maintained by the Reentry Affairs Coordinator. FDC Philadelphia is compliant with this provision of the standard.

115.17 (e)

The Bureau of Prisons utilizes the National Background Investigation Bureau (NBIB). All employees are fingerprinted, and all subsequent FBI criminal arrest information is forwarded through NBIB back to the agency. P.S. 3000.03 states that all positions are subject to five-year reinvestigations. As per the HR staff interviewed, every five years SBIS will contact them to notify them of the five-year background check. Every five years a thorough background check is completed on all staff and contractors. FDC Philadelphia exceeds this provision of the standard.

115.17 (f)

As per the Human Resources staff interviewed all applicants and employees who may have contact with inmates are asked about previous PREA related misconducts when applying for a job or a promotion, and during the interview and background investigation process. As per the Human Resources staff interviewed, staff have a duty to disclose any previous PREA-related misconduct and once a conditional offer of employment is given the individual has a duty to report any changes regard PREA related misconducts. FDC Philadelphia is compliant with this provision of the standard.

115.17 (g)

The Questionnaire for Public Trust Positions indicates that falsifying or concealing facts is a felony which can result in fines and up to five years in prison. FDC Philadelphia is compliant with this provision of the standard.

115.17 (h)

As per the Human Resources staff interviewed, when a former employee applies for work at another institution, and they receive a request for information on if their were any prior PREA related substantiated allegations, the Human Resource staff will provide such information after contacting Office of Internal Affairs to verify if their were any issues or the Warden will do the notification if it is another BOP facility as a Warden to Warden memo. FDC Philadelphia is complaint with this provision of the standard.

	Due to the thoroughness and multiple layers of the background investigation process, this auditor finds FDC Philadelphia to exceed compliance with this standard.
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115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.18 (a)</p> <p>As per the PAQ there has been no new facility, expansion, or modification of existing facility since the last PREA Audit in June 2021. FDC Philadelphia is compliant with this provision of the standard.</p> <p>115.18 (b)</p> <p>As per P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, all new facility designs and upgrades of technology will include consideration of how it could enhance the BOP's ability to protect against sexual abuse. As per the PAQ, FDC Philadelphia has installed or updated a video monitoring system. A review of documentation provided indicates that an additional camera was added in a designated "quiet room" for female inmates. The camera was added to ensure that there were no blind spots. The PREA Compliance Manager (PCM) stated that the camera was put in place to prevent any sexual misconduct in that area. The room has not yet been implemented but will allow for one inmate to utilize it at a time. This auditor was provided with a work order, presentation, and meeting minutes from a special population meeting regarding the room and the camera installation. This auditor toured this area on-site and the camera placement was a proactive approach to preventing any PREA incidents. The Agency Head noted that institution reviews are ongoing to determine if upgrades or additions to our existing technology would enhance the protection of inmates from incidents of sexual abuse. She further stated that technology serves as a deterrent but also allows BOP to identify unreported victims and perpetrators of sexually abusive behavior. It also aids in successful criminal prosecutions. As per the Warden, PREA considerations are made for all modifications to the facility. FDC Philadelphia is compliant with this provision of the standard.</p> <p>FDC Philadelphia is compliant with all provisions of this standard.</p>

115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard

Auditor Discussion

115.21 (a)

P.S. 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states that the agency shall follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. The OneSource First Responder Reference Guide Sexual Assault Crisis Intervention checklist and the Guide for First Responders/Operations Lieutenant when approached with an inmate allegation of sexual abuse or harassment was provided to this auditor. A review of the checklist and guide indicate that the protocol is appropriate and meets this provision of the standard. The checklist includes instructions for the following disciplines: first responder, Operations Lieutenant, SIS/ Operations Lieutenant, and Psychology Services. This auditor also notes that psychology and medical services are to be provided to the perpetrator as well as the victim. This auditor interviewed 13 random staff on site, and all 13 indicate that they are aware of and understand the agency's protocol for obtaining usable physical evidence if an inmate alleges sexual abuse. The staff elaborated by stating they would secure the cell, or area where the alleged abuse occurred, maintain supervision of the alleged victim and the alleged perpetrator to ensure that they do not do anything that could destroy evidence such as change their clothes, use the bathroom, eat or drink, brush their teeth, or wash. All staff interviewed stated that their first responsibility is to secure and ensure the safeguarding of the alleged victim. FDC Philadelphia is compliant with this provision of the standard.

115.21 (b)

P.S. 5324.12 states that the P.S. 5324.12 states that the Bureau's response to sexual assault follows the standards set forth in "A National Protocol for Sexual Assault Medical Forensic Examinations, Adult/Adolescents," DOJ Office of Violence Against Women, second edition, April 2013. FDC Philadelphia is compliant with this provision of the standard.

115.21 (c)

P.S. 5324.12 states that medical forensic examinations are conducted in accordance with standards set forth in "A National Protocol for Sexual Assault Medical Forensic Examinations, Adult/Adolescents, DOJ Office of Violence Against Women, second edition, April 2013. P.S. 5324.12 and the institution supplement PHL 5324.12d state that when there is a report of a recent incident of sexual abuse, or there is a strong suspicion that a recent serious assault may have been sexual in nature, a physical examination of the alleged victim is conducted. As per P.S. 5324.12 and the institution supplement PHL 5324.12d, the victim is provided with the opportunity for a forensic examination as soon as possible. A memo from the Warden dated January 2, 2024, FDC Philadelphia affords inmates SAFE/SANE medical exams in PREA related cases at no cost to the inmate. The institution supplement PHL 5324.12d states that forensic medical assessments will occur at the specific local hospital identified as the Philadelphia Sexual Assault Response Center (PSARC). As per the PAQ, there have

been no forensic medical exams conducted in the last twelve months. FDC Philadelphia is compliant with this provision of the standard.

115.21 (d)

P.S. 5324.12, states that the institution PREA Compliance Manager (PCM) is to attempt to enter into an agreement with a rape crisis center to make available a victim advocate for inmates being evaluated for the collection of forensic evidence.

This auditor received a copy of the MOU between FDC Philadelphia and Women Organized Against Rape (WOAR). The MOU indicates that WOAR will provide an address that inmates may write if they wish to receive advocacy services related to a sexual abuse incident that occurs at FDC Philadelphia. WOAR also provides a hotline to inmates, a staff member to meet in person on-site, and responds 24/7 to PSARC when called for advocacy during a forensic examination. The MOU also indicates that WOAR will provide inmates who have been victims of sexual abuse at FDC Philadelphia with resources to continue supportive services related to their sexual assault for their release to the community. This auditor was also provided with training records and professions licenses of nine staff who are identified as being victim advocates. All nine completed the course "Forensic Medical Exams: An Overview for Victim Advocates." The PREA Compliance Manager (PCM) stated that if the victim requests support services a victim advocate, qualified agency staff member, or qualified community-based organization staff member will accompany and provide emotional support, crisis intervention, information, and referrals during the forensic medical examination process and investigatory interviews. As per the PCM an Mou with WOAR is in place and this information is available to inmates in the inmate handbook. Of the three inmates interviewed who reported sexual abuse, one reported being able to contact their minister and continues to have contact with the minister to get support for the alleged sexual abuse, the other reports being able to contact her mother, and the third was unable to answer the question due to his mental instability. The information is widely available throughout the institution. This auditor observed the contact information for support services on all the housing units, in the elevators, and in the inmate visitation area. FDC Philadelphia is compliant with this provision of the standard.

115.21 (e)

BOP Program Statement 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that as requested by the victim, the victim advocate, qualified agency staff member or qualified community-based organization staff member shall accompany and support the victim through the forensic medical examination process and investigatory interviews. As indicated in provision d., this auditor was provided with records indicating 9 staff are trained in victim advocacy and the MOU was reviewed which states that WOAR will provide a victim advocate for the forensic medical examination. As per a memo dated January 3, 2024, from the Warden, there have been no instances where an alleged victim of sexually abusive behavior requested a qualified agency staff member or qualified community-based organization staff member to accompany and support them through the forensic medical examination process or investigatory interviews. As per the PCM, the MOU in

	<p>place addresses the assurance of whether the WOAR staff are qualified to provide such services. All FDC Philadelphia staff who provide such services have been trained and have the qualifications to provide such services. Documentation was provided to this auditor indicating this. FDC Philadelphia is compliant with this provision of the standard.</p> <p>115.21 (f)</p> <p>The Federal Bureau of Investigation (FBI) and the Office of the Inspector General (OIG) are responsible for conducting criminal investigations for the Bureau of Prisons. Both investigating entities follow the requirements of this standard. A memo dated January 3, 2024, from the Warden states that FDC Philadelphia refers all criminal investigations to FBI and/or OIG. As per the memo the referral is done when evidence is discovered warranting a criminal investigation. The memo indicates that this referral is generated by the Warden, but the Captain and SIS Lieutenant will ensure cooperation with investigators from the OIG and FBI and stay up to date on the status of the investigation. FDC Philadelphia is compliant with this provision of the standard.</p> <p>115.21 (h)</p> <p>P.S. 5324.12 states that a qualified agency staff member shall be an individual who has been screened for appropriateness to serve in the role of advocate and has received education concerning sexual assault and forensic examination issues in general. A qualified agency staff member meets the education requirement of this section by virtue of his or her degree or vocational training or through specialized training offered by the Bureau. As indicated in provision c of this standard, four staff member licenses were provided evidencing their qualifications to act as an advocate and 9 staff member training records were provided indicating completion of victim advocacy training. FDC Philadelphia is compliant with this provision of the standard.</p> <p>FDC Philadelphia is compliant with all provisions of this standard.</p>
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115.22	Policies to ensure referrals of allegations for investigations
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>115.22 (a)</p> <p>P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that the agency shall ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment. As per the Agency Head, all allegations are investigated. The Agency Head further stated that</p>

	<p>the investigative process is initiated immediately following the receipt of an allegation of sexual abuse or sexual harassment. The Agency Head described the investigation process as such; the Office of the Inspector General (OIG) of the Department of Justice investigates potential criminal cases involving staff on inmate sexual abuse. The Office of Internal Affairs (OIA) of the Bureau of Prisons investigates administrative cases of staff on inmate sexual abuse or harassment. Institution investigative staff, the Special Investigative Services (SIS) investigates all other cases. When an inmate-on-inmate allegation of sexual abuse is deemed possibly criminal in nature, it is referred to the Federal Bureau of Investigation (FBI) for investigation. OIG, OIA, SIS and FBI, review the allegation and predicated information. Substantiated allegations for administrative investigations or criminal prosecutions are based on corroboration of witnesses and victim statements, predicated information, along with physical evidence. As per the PAQ, over the last twelve months there were seven sexual abuse and sexual harassment allegations received, six resulted in administrative investigations and one was referred for criminal investigation. FDC Philadelphia is compliant with this provision of the standard.</p> <p>115.22 (b)</p> <p>P.S. 5324.12 outlines the administrative and criminal investigative process. The Agency Head described how criminal and administrative investigations are completed for allegations of sexual abuse and sexual harassment. Administrative investigations are conducted by SIS, criminal investigations regarding staff are conducted by OIG, and criminal investigations which are inmate-on-inmate are conducted by the FBI. All referrals to OIG would be documented in the administrative investigation file and maintained with updates by the SIS. The investigation process is available on the BOP website under policies, "Sexual Abusive Behavior Prevention and Intervention Program." The two investigative staff interviewed state that all allegations of sexual abuse or sexual harassment are referred for investigation. If the investigator finds that the allegation may be criminal, it is referred to the FBI for criminal investigation. FDC Philadelphia is compliant with this provision of the standard.</p> <p>115.22 (c)</p> <p>P.S. 5324.12 outlines the administrative and criminal investigative process. FDC Philadelphia is compliant with this provision of the standard.</p> <p>FDC Philadelphia is compliant with all provisions of this standard.</p>
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115.31	Employee training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.31 (a)

P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that all staff will receive the Sexually Abusive Behavior Prevention and Intervention Program training during institutional familiarization and yearly thereafter as part of the annual refresher training. P.S. 5324.12 outlines that the employee training shall include all requirements of this provision of the standard. Institution Supplement PHL 5324.12d states that the PREA Compliance Manager (PCM), in conjunction with the Human Resource Manager, will be responsible for staff training. The institution supplement states that information related to sexually abusive behavior prevention and intervention will be included during Introduction to Correctional Techniques Phase 1 and annual training for current employees. As per the institution supplement all staff will be trained in how to fulfill their responsibilities, as well as prevention, detection, intervention, investigation, discipline, or prosecution. The training will also include inmate's rights to be free from sexual abuse and sexual harassment as well as retaliation for reporting or cooperating with an investigation. This training as per the institution supplement will also include how to conduct cross-gender pat down searches and searches of transgender and intersex inmates in a professional and respectful manner. This auditor was provided with a copy of the annual training instructor notes which indicate that the training complies with all requirements of this provision of the standard. All thirteen random staff interviewed stated they received initial training in PREA and annual refresher training in PREA. The training is classroom based, instructor led, and reviews the zero-tolerance policy, how to respond to incidents of sexual abuse and sexual harassment, defines incidents of sexual abuse and sexual harassment so staff can detect and respond accordingly, how to report incidents, it also touches on transgender and intersex populations. One of the random staff interviewed also discussed being trained by the Women and Special Population Branch on transgender inmates. FDC Philadelphia is compliant with this provision of the standard.

115.31 (b)

P.S. 5324.12 states that the annual refresher training takes into consideration the gender of the inmate population at each facility. FDC Philadelphia is a male and female facility therefore they are trained taken into consideration both genders. FDC Philadelphia is compliant with this provision of the standard.

115.31 (c)

P.S. 5324.12 states that new employees receive the Sexually Abusive Behavior Prevention and Intervention Program training and that current employees receive the training as part of their annual training. Institution Supplement PHL 5324.12d states that information related to sexually abusive behavior prevention and intervention will be included during Introduction to Correctional Techniques Phase 1 and annual training for current employees. As per the PAQ, 223 staff were trained or retrained on PREA requirements as outlined in this standard in the last twelve months. That is 100 percent of all staff employed by the facility who have contact with inmates. This auditor reviewed training records and met with the Employee Development Manager on-site who indicated that the Sexually Abusive Behavior Prevention and Intervention Program training is conducted during Phase 1 of new employee training. FDC

	<p>Philadelphia is compliant with this provision of the standard.</p> <p>115.31 (d)</p> <p>P.S. 5324.12 states that all staff are required to physically sign or electronically acknowledge that they received and understood the PREA training. A memo from the Human Resource Management Division Assistant Director, dated July 24, 2019 states that all staff are required to acknowledge their understanding of the agency's current sexual abuse and sexual harassment policies and procedures. A copy of the signed acknowledgement of the training and understanding of the sexual abuse and sexual harassment policies and procedures was provided to this auditor for all staff trained in 2023. FDC Philadelphia is compliant with this provision of the standard.</p> <p>FDC Philadelphia is compliant with all provisions of the standard.</p>
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115.32	Volunteer and contractor training
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>115.32 (a)</p> <p>P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that all volunteers and contractors who have contact with inmates are to be trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures. As per the PAQ there was 52 volunteers and 7 contractors who have contact with inmates, who have been trained in the agency policies in procedures regarding sexual abuse and sexual harassment prevention, detection, and response. This auditor was provided with a copy of the PowerPoint presentation and the instructor notes from the training provided to the volunteers and contractors. The trainings are compliant with all requirements of the standard. This auditor interviewed one contractor on-site, no volunteers were available during the on-site interview. The contracted staff interviewed reports that they were trained in their responsibilities regarding PREA. The contractor noted that the training was long and consisted of videos. As per the Employee Development Specialist, human resources maintain the training records for contractors and the volunteers training records are maintained by the Reentry Affairs Coordinator. Training records for contractors and volunteers were provided to this auditor. FDC Philadelphia is compliant with this provision of the standard.</p> <p>115.32 (b)</p> <p>P.S. 5324.12 states that volunteers and contractors who have contact with inmates must be notified of the agency's zero-tolerance policy regarding sexual abuse and</p>

	<p>sexual harassment and informed how to report such incidents. This auditor reviewed the trainings provided to contractors and volunteers and the trainings provided notify the volunteers and contractors of the zero-tolerance policy regarding sexual abuse and sexual harassment as well as how to report such incidents. The contractor interviewed stated that the training taught her what to do if an incident of sexual abuse or sexual harassment came to her attention, how to report, and how to respond. The contractor reported that she was informed of the agency's zero-tolerance policy and how to report such incidents. The contractor stated that if she were to become aware of an incident of sexual abuse or sexual harassment, she would report it to the Operations Lieutenant, call psychology services, and safeguard the inmate. FDC Philadelphia is compliant with this provision of the standard.</p> <p>115.32 (c)</p> <p>P.S. 5324.12 states that the BOP will maintain documentation confirming that volunteers and contractors understand the training received. P.S. 5324.12 further states that participation must be documented through volunteer and contractor signature or electronic verification and will indicate that the volunteer and contractor understood the training they have received. At the conclusion of the training, volunteers and contractors are asked to seek additional direction from Bureau staff, if necessary, to ensure understanding of the training. This auditor was provided with training records to include signatures for all volunteers and contractors. FDC Philadelphia is compliant with this provision of the standard.</p> <p>FDC Philadelphia is compliant with all provisions of this standard.</p>
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115.33	Inmate education
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>115.33 (a)</p> <p>P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program outlines the requirement for inmates to receive PREA education, specifically stating that inmates receive information on the agencies zero tolerance policy and how to report incidents or suspicion of sexual abuse or sexual harassment via the Admissions and Orientation Pamphlet on Sexually Abusive Behavior Prevention and Intervention. As per the PAQ, 1,497 inmates were admitted to the facility during the last twelve months and were given information on PREA at intake. A section of the inmate handbook titled "Sexually Abusive Behavior Prevention and Intervention, An Overview for Inmates," was provided to this auditor in both English and Spanish. The handbook states the facility's zero tolerance policy against sexual abuse and sexual harassment, how to prevent sexual abuse and sexual harassment, how to report</p>

incidents, the investigative process, and services for inmates who are victims of sexual abuse in prison. This auditor had the intake staff walk her through an intake. During the intake the inmate is provided with a packet of information to include the PREA information and the inmate handbook. The inmate also meets with Psychology Services, Medical, and Unit Team where they are screened. As per the intake staff interviewed formally and informally, all inmates receive PREA information and information on the agency's zero-tolerance policy at intake. This auditor also observed signs in the intake area regarding the zero-tolerance policy and how to report. Of the sixteen random inmates interviewed, twelve report that they received information regarding the facility's rules against sexual abuse and sexual harassment at intake, two do not recall, and two deny being made aware. This auditor finds that FDC Philadelphia is compliant with this provision of the standard. All inmates are provided with a handbook, and the handbooks have all the rules of the facility in it, including a section on the Sexually Abusive Behavior Prevention and Intervention program.

115.33 (b)

P.S. 5324.12 outlines the requirement for inmates to receive PREA education, specifically the comprehensive education that is provided to the inmates. P.S. 5324.12 indicates that during the Admission & Orientation Program, a designated staff member will present the Sexually Abusive Behavior Prevention and Intervention Program Inmate Education. As per the PAQ, of the 1,497 inmates who were admitted over the last twelve months whose stay was for thirty days or more, 100% received PREA comprehensive education within 30 days of intake. As per the intake staff interviewed, the inmates are provided the inmate handbook which contains the information regarding PREA immediately at intake or the next morning. To ensure that the inmate understands this information, Unit Team will conduct orientation within 30 days of their arrival. Fourteen of the sixteen random inmates interviewed report that they received information on PREA, their right to be free from sexual abuse and sexual harassment, how to report such incidents, and their right to not be retaliated against for reporting such incidents soon after their arrival. Most reported immediately or at orientation. One inmate could not recall, and one inmate denied ever being educated on PREA. This auditor reviewed a random sampling of case files on the Unit and found them to have the orientation checklist completed and signed off on indicating training was conducted on the Sexually Abusive Behavior Prevention and Intervention program. This auditor finds FDC Philadelphia to be compliant with this provision of the standard.

115.33 (c)

P.S. 5324.12 states that the agency requires that all inmates who are transferred from one facility to another be educated regarding their rights under PREA to the extent that the policies and procedures of the new facility differ from those of the previous facility. This auditor interviewed intake staff formally and informally and all indicate that every inmate that comes into the facility is provided with information on the facility's rights under PREA and are provided with a facility specific inmate handbook. All inmates also receive orientation with Unit Team within 30 days of arrival. FDC

Philadelphia is compliant with this provision of the standard.

115.33 (d)

P.S. 5324.12 establishes guidelines to providing disabled inmates and LEP inmates an equal opportunity to benefit from all the aspects of the facility's efforts to prevent, detect and respond to sexual abuse and sexual harassment. As per P.S. 5324.12 the PREA Compliance Manager (PCM) is responsible for reaching out to local disabilities assistance offices as well as available interpretation services to ensure the facility provides effective communication accommodation when needed. The BOP has a contract with LanguageLine for translation services for LEP inmates. Institution Supplement PHL 5324.12d states that inmate education the PCM, or designee, in conjunction with the Admission and Orientation Coordinator and Unit Team are responsible for inmate education regarding sexually abusive behaviors during admissions and orientation (A&O). The institution supplement states that at this orientation inmates will be made aware of their right to be free from sexual abuse and sexual harassment as well as how to report incidents of sexual abuse and sexual harassment. The institution supplement also notes that information is readily available throughout the facility by way of posters on how to report and the agency's zero tolerance policy. The intake staff interviewed formally and informally report that information is available to all inmates in English and Spanish. Other accommodations are made for inmates who speak a language other than those two available or have another need for accommodation such as visual impairment. This auditor observed materials throughout the facility in both English and Spanish. FDC Philadelphia is compliant with this provision of the standard.

115.33 (e)

FDC Philadelphia maintains documentation of inmate participation in Admissions and Orientation via a checklist which is signed off on by the staff who conducted the training and at completion the signature of the inmate. This auditor was provided with 31 inmate's Admission and Orientation Program Checklists indicating that Sexual Abusive Behavior Prevention and Intervention education was received. This auditor also randomly checked inmate files on-site and found the Admission and Orientation Program Checklists completed. FDC Philadelphia is compliant with this provision of the standard.

115.33 (f)

P.S.5324.12 states that the agency shall ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats. P.S. 5324.12 outlines what should be posted in each housing unit including the zero-tolerance policy poster and contact information for reporting sexual abuse allegations. This auditor observed information posted throughout the facility on the zero-tolerance policy and how to report such incidents. FDC Philadelphia is compliant with this provision of the standard.

FDC Philadelphia is compliant with all provisions of this standard.

115.34	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.34 (a)</p> <p>P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program indicates that investigators are required to be trained in conducting sexual abuse investigations in a confinement setting. Two investigative staff were interviewed, and both indicate that they received specific training on conducting sexual abuse investigations in confinement settings. Both investigative staff discussed the training with this auditor, describing it as an NIC online course, which is taken every year and includes the processes in an investigation. The training touches on safety, interviewing, and evidence. This auditor finds FDC Philadelphia to be in compliance with this provision of the standard.</p> <p>115.34 (b)</p> <p>P.S. 5324.12 states that investigators are required to be trained in conducting sexual abuse investigations in a confinement setting. This training is completed through two curriculums: the DOJ/OIG PREA Training or the NIC: Investigating Sexual Abuse in a Confinement Setting. A review of the training curriculums confirmed they included the following, techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings and the criteria and evidence required to substantiate a case for administrative action or criminal prosecution. Training records were reviewed pre-audit and on-site indicating staff are trained in conducting sexual abuse investigations in a confinement setting. The two investigative staff interviewed indicated that the training consists of topics regarding interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative or prosecution referral. FDC Philadelphia is compliant with this provision of the standard.</p> <p>115.34 (c)</p> <p>As per P.S. 5324.12 documentation that investigators have completed the required specialized training in conducting sexual abuse investigations must be maintained. As per the PAQ, FDC Philadelphia has three investigators currently who are trained to conduct investigations as per the standard. This auditor received training records indicating that the investigative staff completed the NIC course "PREA Investigating Sexual Abuse in a Confinement Setting. FDC Philadelphia is compliant with this provision of the standard.</p> <p>FDC Philadelphia is compliant with all provisions of the standard.</p>

115.35	Specialized training: Medical and mental health care
	<p data-bbox="256 185 959 219">Auditor Overall Determination: Meets Standard</p> <p data-bbox="256 264 544 297">Auditor Discussion</p> <p data-bbox="256 342 408 376">115.35 (a)</p> <p data-bbox="256 409 1481 1451"> Program Statement 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that all full-time and part-time medical and mental health care practitioners who work regularly in BOP facilities must be trained in 1) how to detect and assess signs of sexual abuse and sexual harassment. 2) How to preserve physical evidence of sexual abuse. 3) How to respond effectively and professionally to victims of sexual abuse and sexual harassment and 4) How and to whom to report allegations or suspicions of sexual abuse and sexual harassment. P.S. 5324.12 further states that the Health Services Division must ensure that medical staff are appropriately trained under the requirements of this standard and the Reentry Services Division is required to ensure that mental health staff are appropriately trained under this standard. As per the PAQ, 20 medical and mental health care practitioners work regularly at FDC Philadelphia and 100% have received the specialized training required by policy. This auditor reviewed the training outline provided and it indicates that the training includes detecting and assessing signs of sexual abuse and harassment, preserving physical evidence, effective and professional responses, reporting and the PREA standards, a trauma-informed approach, and understanding sexual trauma in custody. All three medical and mental health staff interviewed report that they have received specialized training regarding sexual abuse and sexual harassment which reviewed how to detect and assess signs of sexual abuse and sexual harassment, how to preserve physical evidence of sexual abuse, how to respond effectively and professionally to victims of sexual abuse and sexual harassment, and how and to whom to report allegations or suspicions of sexual abuse and sexual harassment. This training is conducted annually at ART and there is also continuing education available on the computer-based training program. FDC Philadelphia is compliant with this provision of the standard. </p> <p data-bbox="256 1485 408 1518">115.35 (b)</p> <p data-bbox="256 1552 1481 1798"> FDC Philadelphia utilizes the local hospital for forensic medical examinations. All three medical and mental health staff as well as the PREA Compliance Manager, and the Health Service Administrator report that the facility utilizes Thomas Jefferson Hospital for forensic medical examinations. This provision is not applicable to FDC Philadelphia as it does not employ any SAFE or SANEs. FDC Philadelphia is compliant with this provision of the standard. </p> <p data-bbox="256 1832 408 1865">115.35 (c)</p> <p data-bbox="256 1899 1437 2067"> As per P.S. 5324.12, the BOP maintains documentation that medical and mental health practitioners have received the training referenced in this standard. This auditor received records indicating that all medical and mental health practitioners have completed the specialized PREA training for medical and mental health care. </p>

	<p>FDC Philadelphia is compliant with this provision of the standard.</p> <p>115.35 (d)</p> <p>As per P.S. 5324.12, medical and mental health care practitioners employed by the BOP also must complete the mandatory training for PREA that all other employees receive. Contracted and volunteer medical and mental health staff must also complete the volunteer and contractor training provided to all other volunteers and contractors. This auditor was provided with training records indicating that all staff, contractors, and volunteers received training on the facility's PREA policies. FDC Philadelphia is compliant with this provision of the standard.</p> <p>FDC Philadelphia is compliant with all provisions of this standard.</p>
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115.41	Screening for risk of victimization and abusiveness
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>115.41 (a)</p> <p>P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that all inmates shall be assessed during an intake screening and upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates. P.S. 5324.12 further states that all inmates entering an institution are screened as directed by Health Services, Psychology Services and Unit Management policies. For inmates with a history of sexual victimization while in BOP custody a referral shall be sent to psychology services and if not previously documented on BOP records, staff must notify the Chief of Correctional Services of the inmate's report of victimization to ensure the appropriate steps have been taken.</p> <p>If inmates report a history of sexual victimization while in a non-BOP setting, staff must document the information and appropriate psychological treatment and monitoring will be provided if needed. Inmates with a history of sexual predation shall be referred to psychology services when identified. If incidents of sexual predation have not previously been documented on BOP records, staff must notify the Chief of Correctional Services of the inmate's history of predation to ensure that appropriate steps have been taken. The Chief of Correctional Services will also update the SENTRY STG assignments regarding predation and victimization. This auditor was provided with a sample of 30 inmate intake screening forms. A memo from the Warden dated January 5, 2024, states that an all inmates are assessed for risk during the intake screening, this includes inmates transferred into the facility from another BOP facility. Two risk screening staff were interviewed and state that inmates are screened for risk of sexual abuse victimization or sexual abusiveness toward other inmates upon admission to the facility. Both staff report this is completed at intake by Unit Team. Thirteen of the sixteen random inmates interviewed came into the facility within the last twelve months, eleven report being</p>

asked questions indicating they received a risk screening, one does not remember, and the other denies every being screened at this facility. This auditor reviewed random files on-site for inmates and found that all files contained an initial risk screening. FDC Philadelphia is compliant with this provision of the standard.

115.41 (b)

P.S. 5324.12 states that intake screening shall ordinarily take place within 72 hours of arrival at the facility. As per the PAQ, 4,894 inmates were screened for risk at intake within 72 hours of arrival. This auditor was provided with a sampling of 30 inmate intake screening forms and all but one were completed the same day as arrival, the one that was not was completed within 72 hours of arrival. AS per a memo from the Warden dated January 5, 2024, the risk screening is completed at intake and if it is identified that the inmate may be at risk or a risk a referral is sent to Psychology services to conduct a Risk of Sexual Abusiveness or Risk of Sexual Victimization assessment. The staff who perform risk screening note that screening is conducted as soon as the person comes into the facility at intake or within 24 hours of arrival.

The eleven inmates who recall being asked questions indicating that they received a risk screening all remember this occurring at intake. The intake staff walked this auditor through the intake process for inmates coming in. This process included a screening by medical, psychology, and Unit Team. FDC Philadelphia is compliant with this provision of the standard.

115.41 (c)

As per P.S. 5324.12 the assessment shall be conducted using an objective screening instrument. This auditor reviewed the Intake Screening Form and found it to be objective. Inmates are asked yes or no questions which are then utilized on the PREA Intake Objective Screening Instrument which includes sections that are determined based on the inmate's history. As per a memo from the Warden dated January 5, 2024, the risk screening tool is objective. FDC Philadelphia is compliant with this provision of the standard.

115.41 (d)

As per P.S. 5324.12, the intake screening shall consider, at a minimum, the following criteria, 1) whether the inmate has a mental, physical, or developmental disability, 2) age, 3) physical build, 4) previous incarceration history, 5) criminal history, 6) prior convictions for sex offenses, 7) perceived to be gay, lesbian, bisexual, transgender, intersex, or gender non-conforming, 8) previous sexual victimization, 9) inmate's own perception of vulnerability, and 10) whether the inmate is detained solely for civil immigration purposes. This auditor reviewed the PREA Intake Objective Screening Instrument and the Intake Form which indicates that the intake screening and intake form considers all the criteria noted in P.S. 5324.12 and required by the standard.

The two risk screening staff interviewed stated that the risk screening considers all things required by this provision including self-perception, criminal charges, reported history of sexual victimization, physical and behavioral traits, stature, and criminal history. The initial screening is conducted as a one-on-one interview where the Unit Team member asks the questions verbally. If there are any concerns noted in the

screening it is sent to Psychology services for a secondary assessment. FDC Philadelphia is compliant with this provision of the standard.

115.41 (e)

P.S. 5324.12 states that the initial screening shall consider prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse in assessing inmates for risk of being sexually abusive. This auditor reviewed the initial intake screening and the follow up screening conducted by Psychology Services, and both consider prior acts of sexual abuse, prior convictions for violent offenses, and a history of prior institutional violence or sexual abuse. The two staff interviewed who are responsible for performing the risk screening indicate that all considerations of this provision are included in the screening tool. FDC Philadelphia is compliant with this provision of the standard.

115.41 (f)

P.S.5324.12 and Institution Supplement PHL 5324.12d, states that inmates would be reassessed for the inmate's risk of victimization or abusiveness within 30 days from their arrival at the facility by Psychology Services staff. As per the PCM and the PAQ 1497 inmates had a length of stay for 30 days or more and 100% were reassessed for risk of victimization or being sexually abusive within 30 days of their arrival at the facility, however this is an . This auditor received a sampling of 30 assessments. As per a memo from the Warden, dated January 5, 2024, a reassessment is conducted by the Unit Team within 30 days of arrival. Five reassessments from the Unit Team were provided to this auditor for review. The PREA risk factors are reassessed as part of the Individualized Needs Plan which is reviewed with the inmate within 30 days of arrival at the facility. As per the two risk screening staff interviewed, inmates are assessed initially within 24 hours of arrival by the Unit Team at intake. Within 30 days, typically 21-28 days later, the inmates are reassessed by Unit Team. This is documented on the Individualized Needs Plan. This auditor reviewed random inmate files on-site and found that all files reviewed contained an Individualized Needs Plan completed within 30 days of the inmate's arrival at the facility and the inmate's risk was reassessed. Nine of the thirteen random inmates interviewed state that they recall the Unit Team checking in with them within a few weeks after arrival. One inmate has not been there a month yet, one does not recall, and two reported that they were never reassessed. Based on the evidence received in the pre-on-site documentation, the file review on site, and interviews with staff and more than a majority of the random inmates, this auditor finds FDC Philadelphia to be compliant with this provision of the standard.

115.41 (g)

P.S. 5324.12, states that inmates will be reassessed for their risk of victimization or abusiveness when warranted due to referral, request, incident of sexual abuse or receipt of additional information that bears on their risk of sexual victimization or abusiveness. Both staff who were interviewed who are responsible for risk screening stated that they would reassess an inmate for risk if something changed such as an incident, receipt of additional information, or at the request of the management. This

	<p>is typically done by psychology services. FDC Philadelphia is compliant with this provision of the standard.</p> <p>115.41 (h)</p> <p>As per P.S. 5324.12, inmates are not to be disciplined for refusing to answer the following questions during the risk screening: whether or not the inmate has a mental, physical or developmental disability; whether or not the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex or gender nonconforming; whether or not the inmate previously experienced sexual victimization and the inmate's own perception of vulnerability. Both risk screening staff interviewed stated that inmates are never disciplined for refusing to answer risk screening questions. FDC Philadelphia is compliant with this provision of the standard.</p> <p>115.41 (i)</p> <p>P.S. 5324.12 states that the agency has implemented appropriate controls on the dissemination of the screening information to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates. That information is disseminated on a need-to-know basis for staff. Interviews with the PREA Coordinator, PREA Compliance Manager (PCM), intake and screening staff indicate that the information obtained during the risk screening is limited to staff who have a need to know. These staff would include the Unit Team, psychology services, PCM, Health Services, Captain, and SIS. FDC Philadelphia is compliant with this provision of the standard.</p> <p>FDC Philadelphia is compliant with all provisions of this standard.</p>
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115.42	Use of screening information
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>115.42 (a)</p> <p>P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, states that information from the risk screening will be utilized to inform housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive. As per P.S. 5324.12 once an inmate has been identified as a victim or perpetrator, or as "at risk" for victimization or perpetration, unit management should review classification options. The Institution Supplement PHL 5324.12d outlines the</p>

process when an inmate is identified as having a history of sexual victimization or sexual predation as well as inmates found through the risk screening to be “at risk.” When the risk screening tool identifies an inmate as being at risk of being a victim of sexual abuse or sexual harassment or identifies them as being at risk of perpetuating sexual abuse, the screening is sent to Psychology services for further assessment. Once Psychology services completes the more in-depth assessment notification will be made to the captain regarding housing, work, and program assignment considerations. As per a memo dated January 10, 2024 from the Warden, upon an inmate’s arrival to FDC Philadelphia, information from the PREA Intake Objective Screening Instrument is used in Receiving and Discharge to inform inmates of housing bed work education and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive. The PREA Compliance Manager (PCM) stated that the information obtained during the risk screening is used to identify any psychological needs as well as housing and programming designations. The two risk screening staff interviewed report that risk screening information is used to determine housing, program, and work assignments as well as any need for psychology services referral. While on-site the PCM showed this auditor how the designation for risk of sexual victimization and risk of perpetrating sexual abuse is noted in the system. FDC Philadelphia is compliant with this provision of the standard.

115.42 (b)

P.S. 5324.12 states that the agency shall make individualized determinations about how to ensure the safety of each inmate. The risk screening staff and the PCM state that individualized determinations are made regarding inmates based on the information obtained during the risk screening. FDC Philadelphia is compliant with this provision of the standard.

115.42 (c)

P.S. 5324.12 states that in deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, and in making other housing and programming assignments, the agency shall consider on a case-by-case basis whether a placement would ensure the inmates health and safety, and whether the placement would present management or security problems. As per memos dated January 10, 2024, and January 12, 2024, from the Warden, consideration housing and assigning programming, work, and education programming for transgender and intersex inmates is made on a case-by-case basis to ensure the inmate’s health and safety or if the placement would present management or security concerns. As per the PCM, housing and program assignments for transgender or intersex inmates are made considering the inmate’s health and safety. The PCM explained that the housing and program assignments for the transgender and intersex inmates is reviewed weekly after the SHU meeting. The PCM showed this auditor her tracking log where she monitors transgender and intersex inmates in the facility to ensure there are no issues which are not being addressed. Four transgender inmates were interviewed on-site, all four noted that they have not been housed in a housing area only for transgender or intersex inmates. This auditor notes that the transgender

inmates interviewed were housed in various housing units. Three of four transgender inmates interviewed recall being asked about their safety when arriving to the facility and shortly after. The one inmate who could not recall did note that psychology and medical staff have been great working with him on his needs regarding his status. This auditor finds that FDC Philadelphia is compliant with this provision of the standard.

115.42 (d)

As per P.S. 5324.12, placement and programming assignments for each transgender and intersex inmate shall be reassessed at least twice each year to review any threats to safety experienced by the inmate. As per a memo from the Warden dated January 12, 2024, placements and programming assignments for each transgender inmate shall be reassessed at least twice per year to review any threats to safety experienced by the inmate. As per the memo, transgender or intersex inmates housing unit, work, education, and program assignments are discussed and reviewed each week during the SHU/ PREA meeting. As per the memo the review team consists of Correctional Services, Executive Staff, Health Services, Unit Management, and Psychology services. Memos indicating the weekly reviews were provided to this auditor. The PCM showed this auditor her tracking tool to ensure that the transgender or intersex inmates are reviewed weekly. As per the PCM, in addition to the weekly reviews there is a six-month review completed as well. The PCM also noted that the Associate Wardens, including herself, stand in "mainline" four days a week at lunch time so that inmates have the opportunity to approach them with questions and issues. The PCM noted that she will check in at this time with the identified transgender inmates. As per the risk screening staff all inmates are reviewed by Unit Team every 90 days if they are pre-trial and every 6 months if they are sentenced. Transgender and intersex inmates are reviewed weekly by the PCM and every six months as per policy. This auditor finds that FDC Philadelphia exceeds the expectation of this standard by reviewing the status of transgender and intersex inmates weekly to ensure no issues or concerns. Being that the facility holds inmates for short periods of time and has a mixed population of pre-trial and sentenced inmates, this is a good practice and exceeds the requirement of the provision.

115.42 (e)

P.S. 5324.12 states that a transgender or intersex inmates own views with respect to his or her own safety will be given serious consideration. The PCM and the two risk screening staff interviewed stated that transgender or intersex inmates' views of their own safety are given serious consideration in placement and programming assignments within the confines of security. The four transgender and intersex inmates interviewed all noted that psychology and medical services is very supportive of their needs. FDC Philadelphia is compliant with this provision of the standard.

115.42 (f)

P.S. 5324.12 states that transgender and intersex inmates shall be given the opportunity to shower separately from other inmates. The PCM, the two risk screening

	<p>staff, and the four transgender inmates interviewed all noted that the showers are single showers, therefore the need to shower separately is moot. This auditor observed all inmate showers on-site and finds that they are private, single showers, and in the SHU the showers are within the cells. This auditor inquired while touring the SHU with the SHU Lieutenant how they would handle a transgender inmate not wanting to shower in the cell with the cellmate. The Lieutenant stated that they would house that individual single cell to accommodate or provide an alternative option. FDC Philadelphia is compliant with this provision of the standard.</p> <p>115.42 (g)</p> <p>P.S. 5324.12 states that lesbian, gay, bisexual, transgender, or intersex inmates shall not be placed in dedicated facilities, units, or wings solely on the basis of such identification or status, unless such placement is established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting such inmates. As per the PCM and the PREA Coordinator, there are no dedicated housing units for lesbian, gay, bisexual, transgender, and intersex inmates. All four transgender inmates and three lesbian, gay, and bisexual inmates interviewed stated that they have never been housed on a designated housing unit for LGBTQ. This auditor did not observe any housing unit of this type while on-site. All LGBTQ inmates were housed throughout the facility. FDC Philadelphia is compliant with this provision of the standard.</p> <p>FDC Philadelphia exceeds this standard due to exceeding the requirements of provision d. of this standard.</p>
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115.43 Protective Custody	
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>115.43 (a)</p> <p>P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that inmates at high risk for sexual victimization shall not be placed in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no other available alternative means of separation from likely abusers. P.S. 5324.12, further states that if the facility cannot conduct such an assessment immediately it may not hold the inmate in involuntary segregated housing for more than 24 hours. As per the PAQ, there were no inmates at risk of sexual victimization housed in involuntary segregation in the past twelve months for any period of time. As per the Warden and the SHU Lieutenant, the facility prohibits placing inmates at high risk for sexual victimization or who have alleged sexual abuse in involuntary segregated housing in lieu of other housing areas, unless an assessment has determined there are no available alternative means of separation from potential abusers. This auditor reviewed the</p>

SHU population with the SHU Lieutenant and found that all inmates with the exception of one were housed in SHU for disciplinary reasons, one was a voluntary segregation. FDC Philadelphia is compliant with this provision of the standard.

115.43 (b)

P.S. 5324.12 states that when an inmate is placed in segregated housing involuntarily, access to programs, privileges, education, or work should not be interrupted, to the extent possible. P.S. 5324.12, further states that if there are limitations documentation must reflect the limitation, duration, and rationale for the limitation. Two staff from segregated housing were interviewed on-site and both stated that inmates are not typically held in SHU for protection from sexual abuse, there are usually other alternative housing placements. As per both staff, if an inmate were to be housed in segregated housing for protection from sexual abuse, no privileges, programs, education, or work opportunities would be restricted. If there were restrictions, there would be documentation. No inmates were housed in SHU for protection from sexual abuse in the last twelve months. FDC Philadelphia is compliant with this provision of the standard.

115.43 (c)

P.S. 5324.12 states that the facility shall assign inmates to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged and such an assignment shall not ordinarily exceed a period of 30 days. As per the PAQ, there were no inmates at risk of sexual victimization housed in involuntary segregation in the past twelve months for any period of time. As per the Warden and the two staff who work in segregated housing who were interviewed, inmates are not typically placed in segregated housing for risk of victimization, however if they are it is only until an alternative means of separation from likely abusers can be arranged such as moving to another institution or housing unit. As per the Warden and the two segregated housing staff interviewed this has not occurred in the last twelve months. This auditor met with the SHU Lieutenant while on-site and reviewed the roster of inmates housed in the SHU and no inmates were housed for risk of sexual victimization. FDC Philadelphia is compliant with this provision of the standard.

115.43 (d)

P.S. 5324.12 states that States that if an involuntary segregated housing assignment is made the facility shall clearly document the basis for the facilities concern for the inmate safety and the reason why no alternative means of separation can be arranged. P. S. 5324.12, states that when determining an appropriate method of safeguarding the inmate assigned at risk for victimization, the Warden ensures all options are considered by completing, signing, and dating form BP-A1002, Safeguarding of Inmates Alleging Sexual Abuse/Assault Allegation. As per the PAQ, Warden, and segregated housing staff interviewed, there were no inmates at risk of sexual victimization housed in involuntary segregation in the past twelve months for any period of time. FDC Philadelphia is compliant with this provision of the standard.

	<p>115.43 (e)</p> <p>P.S. 5324.12 states that the inmate's status is reviewed weekly during Special Housing Unit (SHU) Meetings. A memo from the Warden dated January 12, 2024, states that during the last 12 months there were no instances in which an inmate was placed in Segregated Housing following concern regarding safety related to a PREA matter. The memo further states that if this were to have occurred a review would be conducted at least every 30 days and would be documented via the Security Review Official log. The memo further elaborates that the inmate if housed in segregated housing for concerns of safety would receive mental health reviews at least once every 30 days by Psychology Services and the case would also be reviewed weekly at the Special Housing Unit meeting. Two staff who work in segregated housing were interviewed on-site and this auditor met with the SHU Lieutenant, and PREA Compliance Manager (PCM) and all confirm that inmate's status is reviewed weekly during SHU Meetings. The SHU Lieutenant showed this auditor documentation of these reviews as well as his daily reviews. It is evident from the documentation, interviews, and this auditor's on-site observations that FDC Philadelphia only houses inmates in SHU for as long as necessary and typically only for disciplinary issues. FDC Philadelphia exceeds this standard due to the weekly reviews of the SHU population.</p> <p>FDC Philadelphia exceeds this standard. The facility works diligently to have only disciplinary inmates housed in SHU. This is evident in their daily, weekly, and monthly reviews. The process in which the Lieutenant reviews the inmates housed in segregation daily and works to move them to alternative housing when able exceeds the requirement of this standard.</p>
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115.51	Inmate reporting
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>115.51 (a)</p> <p>P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program reviews the various internal ways for inmates to privately report sexual abuse and harassment, retaliation by other inmates or staff for reporting sexual abuse or sexual harassment and staff neglect or violation of responsibilities that may have contributed to such incidents. P.S. 5324.12 and the institution supplement PHL 5324.12d states that Bureau inmates are encouraged to report allegations to staff at all levels and are also provided with avenues of internal reporting such as telephonically to specific departments or by mail to an outside entity. The inmate handbook has a section titled Sexually Abusive Behavior Prevention and Intervention: An Overview for Offenders. Within this section of the handbook is the reporting information. Inmates are able to tell staff, write directly to the Warden, Regional</p>

Director, or Director, file an administrative remedy, write to the Office of the Inspector General (OIG), email OIG, or anyone can report via the BOP public website. The address for the OIG is provided in the handbook as well. This auditor was also provided with a sample of the postings observed hanging throughout the facility which provide the various ways to report. The posting also states that the inmate can email the DOJ Sexual Abuse Reporting Mailbox using TRULINCS. All thirteen random staff and sixteen random inmates interviewed were able to identify multiple ways in which an inmate can report incidents of sexual abuse or sexual harassment privately. FDC Philadelphia is compliant with this provision of the standard.

115.51 (b)

P.S. 5324.12 states that at least one way for inmates to report abuse or harassment to a public or private entity or office that is not part of the agency and that is able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials and allows the inmate to remain anonymous upon request shall be provided. P.S. 5324.12 indicates that inmates are provided contact information and access to the Office of the Inspector General to make reports. The institution supplement PHL 5324.12d states that inmates can report to an outside entity. The address for OIG is on the flyers hanging throughout the facility and the inmate Admission and Orientation (A&O) Handbook. A memo from the Warden dated January 12, 2024, states that FDC Philadelphia allows inmates to personally submit a report to the OIG from their email. A memo from the Warden dated January 12, 2024, states that FDC Philadelphia allows inmates to personally submit a report to the OIG from their email. The PREA Compliance Manager (PCM) stated that inmates are able to report abuse or harassment to the OIG and the address is available in the A&O Handbook. The address is also available on posters on the housing units, this was observed by this auditor. Emails or U.S. Mail can be sent to the OIG. If the OIG receives an anonymous report, the facility is contacted, and the allegation is investigated as thoroughly as possible. Of the sixteen random inmates interviewed various methods of reporting were provided to this auditor including via telephone, administrative remedy, writing a letter, email, and telling staff directly. Inmates were all able to provide methods of reporting and indicated they were able to report to an entity or office that is not part of the agency. Ten of the sixteen inmates were aware that they could report incidents anonymously, four were unsure, and two responded that you could not. The posters and instructions by the computers for reporting indicated that inmates could report incidents anonymously. FDC Philadelphia is compliant with this provision of the standards.

115.51 (c)

P.S. 5324.12 states that staff shall accept reports made verbally, in writing, anonymously, and from third parties and shall promptly document any verbal reports. The institution supplement PHL 5324.12d states that inmates are encouraged to report to staff at all levels, by telephone, by mail to an outside entity, or to the anonymous TRULINCS DOJ Sexual Abuse Reporting mailbox. PHL 5324.12d further states that all reports will be referred to the Operations Lieutenant immediately in order to safeguard the inmate, refer to psychology and health services, and start the

	<p>investigation. A memo from the Warden dated January 12, 2024, states that over the last 12 months inmates have made 7 verbal or written reports of sexual abuse or sexual harassment against other inmates and 1 instance where an inmate has reported sexual abuse or sexual harassment by a staff member. All thirteen random staff interviewed indicated that inmates can make reports verbally, in writing, anonymously, and from third parties. The thirteen random staff interviewed indicated that all PREA reports or incidents are documented in a memo. Staff noted that PREA allegations are taken very seriously at the facility. Fifteen of the sixteen random inmates interviewed reported that they could make reports of sexual harassment or sexual abuse in writing, verbally, or through a third party. One random inmate interviewed was unsure. Signage was posted throughout the facility on the various reporting methods. FDC Philadelphia is compliant with this provision of the standard.</p> <p>115.51 (d)</p> <p>P.S. 5324.12 states that staff may contact any supervisory staff at the local institution, regional staff, or Central Office staff, including the Regional PREA Coordinators and the National PREA Coordinator. P.S. 5324.12 further states that allegations involving staff members may also be reported to the Office of Internal Affairs or the office of the Inspector General. All thirteen staff interviewed indicated that they were able to report incidents or information regarding PREA related incidents in various ways privately. Almost all staff interviewed reported feeling most comfortable notifying the Operations Lieutenant. FDC Philadelphia is compliant with this provision of the standard.</p> <p>FDC Philadelphia is compliant with all provisions of this standard.</p>
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115.52	Exhaustion of administrative remedies
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>115.52 (a)</p> <p>P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program references P.S. 1330.18, Administrative Remedy Program for this standard. P.S.1330.18 outlines the Administrative Remedy Program, indicating that FDC Philadelphia is not exempt from this standard.</p> <p>115.52 (b)</p> <p>P.S. 1330.18 describes the grievance process for allegations of sexual abuse and sexual harassment. P.S. 1330.18 states that the agency does not impose a time limit on when an inmate may submit a grievance regarding an allegation of sexual abuse</p>

and that the agency does not require an inmate to use the informal grievance process or attempt to resolve with staff an alleged incident of sexual abuse. FDC Philadelphia is compliant with this provision of the standard.

115.52 (c)

P.S. 1330.18, Administrative Remedy Program states that an inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject to the complaint and such grievance is not referred to a staff member who is the subject of the complaint. The inmate Admission and Orientation Handbook has a section titled Sexually Abusive Behavior Prevention and Intervention: An Overview for Inmates. In this section of the handbook all methods of reporting sexual abuse or sexual harassment are outlined. One method noted is filing of an administrative remedy. FDC Philadelphia is compliant with this provision of the standard.

115.52 (d)

P.S. 1330.18 outlines the grievance process for allegations of sexual abuse and sexual harassment. P.S. 1330.18 states that the agency would issue a final decision on grievances related to sexual abuse within 90 days of the initial filing. The 90 days does not include the time used by the inmate to prepare any administrative appeal. The agency may claim an extension up to 70 days if the normal time period for response is insufficient to make an appropriate decision. The inmate must be notified in writing of the extension and provided with a date by which the decision will be made. P.S. 1330.18 also indicates that if the inmate does not receive a response within the allotted timeframe, the inmate will consider the absence of a response to be a denial. As per the PAQ and memo from the Warden dated January 19, 2024, in the past twelve months there were no grievances filed that alleged sexual abuse, therefore there were no grievances which required an extension. Of the three inmates interviewed who reported sexual abuse, one inmate was unable to complete the interview due to his mental health condition, one had recently made the allegation and the investigation was not yet complete, and the third reported receiving notification at the conclusion of the investigation as to the outcome. This auditor reviewed all investigation files, and no investigations were prompted by an administrative remedy. All files of completed investigations included a letter signed by the inmate making the allegation indicating that the investigation was completed and the outcome. FDC Philadelphia is compliant with this provision of the standard.

115.52 (e)

P.S. 1330.18, outlines the grievance process for third party allegations of sexual abuse and sexual harassment. P.S. 1330.18 states that third parties are permitted to assist inmates in filing requests for administrative remedies for sexual abuse and are permitted to file such requests on behalf of the inmate. In addition, it states that if a third-party files a report on behalf of an inmate that the agency may require the alleged victim to agree with the request prior to filing and if the inmate declines the agency will require the inmate to complete a sworn affidavit stating he does not want the grievance to proceed. As per the PAQ, there were no grievances filed in the last

	<p>twelve months alleging sexual abuse. FDC Philadelphia is complaint with this provision of the standard.</p> <p>115.52 (f)</p> <p>P.S. 1330.18 states that the agency provides inmates the opportunity to file an emergency grievance alleging substantial risk of imminent sexual abuse and the grievance will be addressed immediately. P.S. 1330.18 indicates that that an initial response will be provided within 48 hours and that a final decision will be made within five calendar days. The final decision will document the agency’s determination whether the inmate is at substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance. As per the PAQ, there were no emergency grievances filed in the last 12 months. FDC Philadelphia is compliant with this provision of the standard.</p> <p>115.52 (g)</p> <p>P.S. 1330.18 states that inmates may be disciplined for filing a grievance in bad faith. As per the PAQ, there were no inmate grievances alleging sexual abuse that resulted in disciplinary action against the inmate for having filed the grievance in bad faith. As per the PAQ, there were no grievances in the last twelve months found to have been filed in bad faith alleging sexual abuse. FDC Philadelphia is compliant with this provision of the standard.</p> <p>FDC Philadelphia is compliant with all provisions of the standard.</p>
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115.53	Inmate access to outside confidential support services
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>115.53 (a)</p> <p>P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that inmates shall be provided with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers. P.S. 5324.12 further states that the facility shall enable reasonable communication between the inmates and these organizations and agencies, and as confidential manner as possible. As per P.S. 5324.12, the PREA Compliance Manager, with the assistance of psychology services staff, seeks to establish an agreement with community service providers who can provide confidential emotional support services as it relates to sexual abuse. If an agreement is not feasible the attempts to form such a relationship must be documented. As per the institution supplement PHL 5324.12d, an agreement has been developed with Women Organized Against Rape (WOAR). The contact information for WOAR is provided in the inmate Admissions and Orientation handbook. Thirteen of the sixteen</p>

random inmates interviewed report that they are aware of services available for dealing with sexual abuse if needed outside of the facility. Most of the thirteen inmates referenced the signs throughout the facility and the inmate handbook. Most of the inmates noted that psychology would provide these services as well. The services were defined by the inmates interviewed as psychology services, counseling, and supportive. As per the inmates interviewed the mailing address and phone number are provided in the inmate handbook and posted throughout the facility. The thirteen inmates who were aware of these services noted that they were available whenever needed. This auditor notes that while on-site, signs were observed in all the housing units and elevators providing a phone number for WOAR. One of the three inmates who reported sexual abuse who were interviewed reported that they were able to contact their minister for emotional support, one inmate reported that they were not provided information to access an outside victim advocate and the third inmate who reported sexual abuse who was interviewed was unable to answer the question due to having to end the interview because of his mental illness. This auditor finds that FDC Philadelphia is compliant with this provision of the standard. This auditor observed the signage throughout the facility, contacted WOAR to verify services were active, and fourteen of the sixteen inmates asked about the services were aware of them.

115.53 (b)

P.S. 5324.12 states that inmates shall be informed prior to giving them access, the extent of which such communications will be monitored and the extent in which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws. One of the three inmates who reported sexual abuse noted that communications with supportive services for sexual abuse victims is confidential and if not, they are made aware of the limitations of confidentiality, another one of the inmates said confidentiality is addressed in the inmate handbook regarding mail and phone calls, and the third inmate was unable to answer the question. Thirteen of the sixteen random inmates interviewed stated that the services provided for victims of sexual abuse allow for confidential communication. FDC Philadelphia is compliant with this provision of the standard.

115.53 (c)

P.S. 5324.12 states that the agency shall maintain our attempt to enter into MOUs or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse. A copy of the MOU between FDC Philadelphia and WOAR was reviewed by this auditor. This auditor reached out to WOAR via email and provided contact information to call if there were any concerns or issues the auditor should know about, the organization has not called back. The MOU Outlines the roles of FDC Philadelphia and WOAR in providing inmate victims of sexual abuse access to outside confidential support services. FDC Philadelphia is compliant with this provision of the standard.

FDC Philadelphia is compliant with all provisions of this standard.

115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.54 (a)</p> <p>P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that the agency shall establish a method to receive third-party reports of sexual abuse and sexual harassment and shall distribute publicly information on how to report sexual abuse and sexual harassment on behalf of the inmate. The Bureau posts this publicly on their website under a “Contact Us” tab. Third parties can submit concerns in writing on behalf of an inmate. The flyer posted throughout the facility including the visiting area provides an address to the Office of the Inspector General (OIG) and the DOJ Sexual Abuse Reporting Mailbox through TRULINCS where anonymous reports can be made. There is also a National Sexual Assault telephone hotline the inmates can call if they need help which is operated by Rape, Abuse, and Incent National Network (RAINN). Another posting states the facility’s zero tolerance policy and the contact information for RAINN and Women Organized Against Rape (WOAR). Instructions on emailing or writing OIG is also posted in the facility. FDC Philadelphia is compliant with this standard.</p>

115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.61 (a)</p> <p>P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that all staff are required to report immediately and according to policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, retaliation against inmates or staff who reported such an incident, and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. P.S. 5324.12 further outlines this process. As per P.S. 5324.12 all staff must report the information concerning incidents or possible incidents of sexual abuse or sexual harassment to the Operations Lieutenant. Staff will then provide a written follow-up memorandum to the Operations Lieutenant to document the report. The Operations Lieutenant will notify the PREA compliance manager. The PREA Compliance Manager (PCM) will determine whether a full response protocol is needed. All thirteen random staff interviewed report that all staff are required to report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred</p>

in the facility; retaliation against inmates or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident of retaliation. The staff interviewed stated that the procedure for reporting any information related to an inmate sexual abuse is to first ensure the safety of the alleged victim and notify the operations Lieutenant. FDC Philadelphia is compliant with this provision of the standard.

115.61 (b)

P.S. 5324.12 states that the information concerning the identity of the alleged inmate victim and the specific facts of the case are limited to the staff who need to know because of their involvement with the victim's welfare and the investigation of the incident. All investigative staff, executive staff, and random staff interviewed formally and informally noted that information regarding PREA investigations is kept confidential with just those staff involved with the investigative process. The thirteen random staff interviewed noted that once they notify the Operations Lieutenant and complete their report the investigative process takes over and information is confidential regarding the status, allegations, and parties involved. FDC Philadelphia is compliant with this provision of the standard.

115.61 (c)

P.S. 5324.12 states that medical and mental health practitioners are required to report sexual abuse and are further required to inform inmates of their duty to report and the limitations of confidentiality at the initiation of services. As per the three medical and mental health staff interviewed, inmates are aware of the limitations of confidentiality. The three medical and mental health staff interviewed also noted that if they were to become aware of an incident of sexual abuse or sexual harassment they would report it to the Operations Lieutenant or the PREA Compliance Manager (PCM). FDC Philadelphia is compliant with this provision of the standard.

115.61 (d)

P.S. 5324.12 states that if the alleged victim is under the age of 18 or considered a vulnerable adult under state or local vulnerable persons statute, the allegation shall be reported to the designated state or local Services Agency under applicable mandatory reporting laws. As per the PREA Coordinator and the Warden, if an allegation of sexual abuse or sexual harassment is made by someone under the age of 18 or someone considered a vulnerable adult under state or local law, the institution staff would report the allegation to the designated state or local services agencies under the applicable mandatory reporting laws. FDC Philadelphia is compliant with this provision of the standard.

115.61 (e)

P.S. 5324.12 states that all allegations of sexual abuse and sexual harassment, including third party and anonymous reports, shall be reported to the facilities designated investigators. P.S. 5324.12 further states that staff must report and respond to allegations of sexually abusive behavior regardless of the source of the

	<p>report. As per the Warden, all allegations of sexual abuse and sexual harassment are investigated thoroughly by SIS or SIA regardless of how they are reported. FDC Philadelphia is compliant with this provision of the standard.</p> <p>FDC Philadelphia is compliant with all provisions of this standard.</p>
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115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.62 (a)</p> <p>P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that when an inmate is subject to substantial risk of imminent sexual abuse, staff shall take immediate action to protect the inmate. P.S. 5324.12 further outlines the response as such, when inmate-on-inmate sexual abuse the Operations Lieutenant is notified immediately and safeguards the inmate, referrals are made to Psychology Services for assessment and the PREA Compliance Manager is notified. If it is a staff-on-inmate sexual abuse allegation, the inmate shall be safeguarded which could include a reassignment of staff. If it is an inmate-on-staff sexual abuse allegation with the staff member being the alleged victim, all options for safeguarding the staff member will be considered. As per the PAQ, there have been no instances where it was determined that an inmate was at substantial risk of imminent sexual abuse in the last twelve months. A memo from the Warden dated January 29, 2024, states that there was one case that was referred for criminal investigation and it is still pending. This auditor provided the reports from the incident in which the staff acted immediately upon becoming aware of the altercation and separated the inmates, sending one to health services for medical care and the other to the hospital. The agency head stated that the facility is to immediately safeguard the alleged victim by separating him/her from the potential danger. Actions vary depending on the severity of the threat. If the possible threat is by another inmate, a change may be made to the inmate's housing assignment, work assignment, or possible placement in the Special Housing Unit. If the possible threat is from a staff member, other options exist in addition to these, to include a change in the staff member's work assignment or removal from the facility while the investigation is conducted. The Warden noted that if it were to be learned that an inmate was at substantial risk of imminent sexual abuse the staff would safeguard the inmate and ensure that the alleged perpetrator is unable to have contact with the alleged potential victim. The Warden noted that the perpetrator would most likely be transferred to another facility. All thirteen random staff interviewed report that they would act immediately upon learning that an inmate is at imminent risk of sexual abuse. The staff stated their first duty would be to ensure the safety of the inmate. FDC Philadelphia is compliant with this standard.</p>

115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.63 (a)</p> <p>P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that upon receiving an allegation that an inmate was sexually abused while confined at another facility the head of the facility that received the allegation shall notify the head of the facility or appropriate office of the agency where the alleged abuse occurred. P.S. 5324.12 further states that in cases where there is an allegation that sexually abusive behavior occurred at another Bureau facility, the Warden of the victim's current facility reports the allegation to the Warden of the identified institution. In cases alleging sexual abuse by staff at another institution, the Warden of the inmate's current facility refers the matter directly to the Office of Internal Affairs (OIA). For non-Bureau secure privatized facilities, jails, juvenile facilities, and Residential Reentry Centers, the Warden will contact the appropriate office of the facility and notify the privatization management or the residential reentry management branches as appropriate. For non-Bureau facilities the Warden contacts the appropriate office of that correctional agency. As per the PAQ there were 15 allegations the facility received that an inmate was abused while confined at another facility. A memo from the Warden, dated January 29, 2024, states that upon receiving an allegation that an inmate was sexually abused while confined at another facility, the warden notifies the head of the facility or appropriate office of the agency where the alleged abuse occurred within 72 hours of the notification. As per the memo, if the allegation is for another BOP facility the warden or their designee is notified within 72 hours of receiving the notification. While on-site this auditor was provided with documentation of the Warden-to-Warden notifications made to the other facilities. FDC Philadelphia is compliant with this provision of the standard.</p> <p>115.63 (b)</p> <p>P.S. 5324.12 states that notifications outlined in provision a. of this standard are to be made as soon as possible, no later than 72 hours after receiving the allegation. FDC Philadelphia is compliant with this provision of the standard.</p> <p>115.63 (c)</p> <p>P.S. 5324.12 states that notifications provided to other institutions must be documented. All fifteen notifications to other facilities were provided to this auditor for review. The notification is sent via email as a memo from the Warden notifying the facility Warden or designee of the allegation. Email communications were also provided to this auditor indicating that the notifications were received. FDC Philadelphia is compliant with this provision of the standard.</p> <p>115.63 (d)</p> <p>P.S. 5324.12 states that the facility head or agency office that receives notifications</p>

	<p>that an alleged sexual abuse occurred in the facility must ensure that the allegation is investigated appropriately. A review of investigation files on-site with the PREA Compliance Manager (PCM) indicates that there was one reported allegation received at FDC Philadelphia from another institution. The Agency Head stated that once the Warden receives the report of the allegation an investigation will be started. The Warden was interviewed on-site, and he reports that when FDC Philadelphia receives an allegation from another facility it is forwarded to SIS and PCM for investigation. The Warden cited one allegation which was received previously noted by the PCM. This investigation file was reviewed on-site, and this auditor finds it to have been investigated thoroughly. FDC Philadelphia is compliant with this provision of the standard.</p> <p>FDC Philadelphia is compliant with all provisions of this standard.</p>
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115.64 Staff first responder duties	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.64 (a)</p> <p>P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that upon learning of an allegation that an inmate was sexually abused, the first security staff member to respond to the report shall be required to: separate the alleged victim and abuser, preserve and protect any crime scene, request that the alleged victim not take any actions that can destroy physical evidence and ensure that the alleged abuser does not take any actions that can destroy physical evidence. A review of investigation files and the PREA log with the PREA Compliance Manager (PCM) on-site indicates that there were 3 allegations of sexual abuse in the last twelve months preceding the audit. Of those 3 allegations, on 3 occasions the staff member responded and separated the alleged victim and alleged abuser, and on 3 occasions allowed for the collection of physical evidence. On 3 occasions the first responder preserved and protected the crime scene until appropriate steps were taken to collect evidence, on 3 occasions the first responder requested that the alleged victim not take any action that could destroy physical evidence and on 3 occasions the first responder insured that the alleged abuser did not take any actions that could destroy physical evidence. Five first responders were interviewed on-site and all five indicate that when responding to an incident of sexual abuse the protocol is to safeguard the inmates involved, contact the Operations Lieutenant, and secure the scene. Staff interviewed stated that the Operations Lieutenant would contact all the required parties, refer to medical and psychology services, and start the investigation process. Almost all staff interviewed had cards indicating the steps that must be taken when responding to PREA incidents. Of the three inmates who reported sexual abuse, one was unable to complete the interview due to his mental illness, one stated that SIS interviewed her a week after she reported it, but she reported it</p>

	<p>sometime after the incident and after the individual no longer was at the facility, and the third inmate stated that within three minutes of reporting his allegation staff responded and sent him to medical for evaluation. A review of the investigation files indicates that staff respond timely and investigate all allegations thoroughly. FDC Philadelphia is compliant with this provision of the standard.</p> <p>115.64 (b)</p> <p>As per P.S. 5324.12, staff are responsible for preserving the crime scene only, SIS staff are responsible for collecting information and evidence. As per the PAQ, there were no instances where the first responder was not custody staff. All five staff first responders and all thirteen random staff interviewed stated that the first thing they must do when arriving on scene is safeguard the alleged inmate victim. Once the inmate is safeguarded, notification is made to the Operations Lieutenant and the crime scene is secured if applicable. The staff all noted that the facility has an Evidence Recovery Team which is training in evidence collection and would be called upon by the investigators to assist with proper collection of evidence. First responders are to just ensure that nothing is tampered with until instruction is provided regarding evidence collection. FDC Philadelphia is compliant with this provision of the standard.</p> <p>FDC Philadelphia is compliant with all provisions of the standard.</p>
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115.65	Coordinated response
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>115.65 (a)</p> <p>P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that the facility shall develop a written institutional plan to coordinate actions taken in response to an incident of sexual abuse to include medical, mental health, leadership, security and investigatory staff. P.S. 5324.12 outlines the plan as such, staff report incidents of sexual abuse to the Operations Lieutenant, who refers the victim to Health Services for a physical assessment, and Psychology Services for assessment of vulnerability and treatment needs as well as notifies all applicable parties including the investigative staff, the Warden, and the PREA Compliance Manager. If the PREA Compliance Manager reviews the relevant factors and decides what level of response is required. The institution supplement PHL 5324.12d outlines the facility's protocol for responding to allegations of sexually abusive behavior. The institution supplement breaks it down to safeguarding the inmate, reporting to the Operations Lieutenant who will then make the notifications to the various disciplines in the facility, medical</p>

	<p>staff will examine the individuals involved, psychology services will provide crisis intervention, and the first responders will preserve the crime scene. After the incident is responded to and investigated an after-action review will be completed unless the investigation resulted in a finding of unfounded and the inmate victim will receive follow up medical and mental health services as needed and the facility will conduct retaliation monitoring for no less than 90 days. The institution supplement also outlines in their response that inmates will be notified of investigation outcomes and perpetrators will be disciplined and/or referred for prosecution. The facility's First Responder Reference Guide for Sexual Assault Crisis Intervention was provided to this auditor for review. The guide outlines the steps that must be taken in response to a sexual assault. This auditor was also provided with a checklist for the Operations Lieutenant and the SIS Lieutenant when responding to and investigating a report of sexual abuse. This auditor was provided the checklist for Psychology Services as well. This checklist includes responses for both the victim and the perpetrator. The Guide for First Responders/Operations Lieutenant When Approached with an Inmate Allegation of Sexual Abuse or Sexual Harassment was provided to this auditor, and it shows in a flow chart the process by steps in how staff are to respond in a coordinated manner to sexual abuse allegations. A copy of the card provided to staff to list the steps for responding to an incident of sexual abuse and listing basic information on PREA and the Zero Tolerance Policy was reviewed by this auditor. The steps outlined on the card are the report the incident to the Operations Lieutenant, safeguard the inmates, refer inmates to Health and Psychology Services for assessment, notify SIS, PREA Compliance Manager, Captain, and Warden, psychology staff determine and document treatment needs, arrange for outside medical trip if needed, and staff involved prepare written reports. After interviews were conducted on-site with a total of 40 staff and 37 inmates, this auditor finds that FDC Philadelphia meets this standard requiring a coordinated response. From the time of intake all of the various disciplines begin to coordinate to meet the needs of the inmates. Psychology services, Unit Team, management, custody staff, program staff, and medical staff all work together is all facets of the inmate's incarceration. This collaboration from intake allows for a coordinated response that is immediate, multi-disciplinary, and ensures the response meets all of the inmate's needs at the time. Multiple staff walked this auditor through the response process for incidents of sexual abuse as well as the follow-up processes. This indicates that FDC Philadelphia has an effective institutional plan for a coordinated response to incidents of sexual abuse. Examples provided and investigation files reviewed on-site are evidence that mental health, medical, investigators, facility management, and first responders all work together in responding to incidents of sexual abuse. FDC Philadelphia is compliant with this standard.</p>
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115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

	<p>115.66 (a)</p> <p>P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that neither the agency nor any other governmental entity responsible for collective bargaining on the agency's behalf shall enter into or renew any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted. A memo from the Warden dated January 29, 2024, states that there are no additional collective bargaining agreements that exist locally since the last PREA audit, on June 17, 2021. The memo further states that FDC Philadelphia does not have a supplemental agreement. The agency head confirmed that Article 30 of the Master Agreement permits the agency to remove any employee from an institution when an allegation adversely affects the Agency's confidence in the employee or security of the institution. The employee may be removed pending investigation as per the agency head. FDC Philadelphia is compliant with all provisions of this standard.</p>
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115.67	Agency protection against retaliation
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>115.67 (a)</p> <p>P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that the agency shall establish a policy to protect all inmates and staff report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff and shall designate a staff member or department charged with monitoring retaliation. The individual charged with retaliation monitoring at PDC Philadelphia is the PREA Compliance Manager (PCM). FDC Philadelphia is compliant with this provision of the standard.</p> <p>115.67 (b)</p> <p>P.S. 5324.12 states that the agency shall employ multiple protection measures for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations. As per the Agency Head, inmates and staff are protected from retaliation through monitoring. The Warden stated that the facility monitors inmates who reported sexual abuse or sexual harassment for at least 90 days and in that 90 days they meet with the inmates, have increased interactions with psychology, and continuously review housing and separations. The PCM who conducts the retaliation</p>

monitoring was interviewed. A form is utilized to track the 90-day review. The PCM will talk to the inmates, review their housing, work assignments, check to see if there have been any issues with other inmates or staff, check for write-ups and sanctions. The PCM noted that she checks the inmates every 30 days for at least 90 days, but most are gone by the 90-day mark being that it is a detention center. The PCM emphasized that she reviews everything during retaliation monitoring and talks directly to the inmates being monitored. All investigation files included a retaliation monitoring form. This auditor interviewed three individuals who reported sexual abuse at FDC Philadelphia. One was mentally ill and unable to answer the questions as he kept redirecting to food concerns, one reported that she felt made fun of, and the third inmate stated that no matter what staff do to try to protect you, if an inmate is going to retaliate against you, they will find a way. This auditor discussed these concerns with the PCM who reviewed each case with this auditor. The other inmates making fun of the one inmate has been addressed and measures were taken to protect her from this, and this is the first incarceration for the other inmate who is older and part of a specialized population. After review of the files, discussions with the PCM, and the entirety of the interview conducted with each inmate and the PCM, this auditor finds that FDC Philadelphia is compliant with this provision of the standard.

115.67 (c)

P.S. 5324.12 states that for at least 90 days following a reported incident of sexual abuse the agency shall monitor for any signs of retaliation. P.S. 5324.12 further indicates that the institution PREA Compliance Manager monitors staff and inmates who have reported sexual abuse allegations to protect them from retaliation for 90 days. If the initial monitoring indicates a continued need, periodic status checks will occur. As per the PAQ, FDC Philadelphia monitor for retaliation for no less than 90 days. As per the PAQ, there were no instances of retaliation in the last 90 days. As per the Warden some measures that are taken to safeguard inmates and staff when retaliation is suspected include separation, housing assignment changes, staff member would be reassigned, and transfers to other institutions if possible. The Warden emphasized that regardless of what is possible they would safeguard by working with SIS and Unit Teams. The PCM who conducts retaliation monitoring stated that she looks at sanctions, incident reports, housing unit changes, clothing or appearance, commissary purchases, and any inmate issues to detect possible retaliation. The PCM reports that she conducts retaliation monitoring for at least 90 days and continues if needed. This auditor reviews all retaliation monitoring documentation from the last twelve months as part of the investigation file review. FDC Philadelphia is compliant with this provision of the standard.

115.67 (d)

As per P.S. 5324.12 monitoring of inmates shall also include periodic status checks. The PCM monitors sanctions, incident reports, housing unit changes, clothing or appearance, commissary purchases, and other inmate issues to detect possible retaliation. This auditor reviewed all retaliation monitoring documentation from the last twelve months and finds it to meet the requirements of this standard. FDC

	<p>Philadelphia is compliant with this provision of the standard.</p> <p>115.67 (e)</p> <p>P.S. 5324.12 states that if any other individual who cooperates with an investigation expresses a fear of retaliation, appropriate measures to protect that individual against retaliation will be taken. As per the agency head, if an inmate or staff member who cooperated with an investigation expresses fear of retaliation, that individual will be monitored in the same manner as the individual who reported the allegation and will be protected against such retaliation. As per the agency head some measures which would be taken to ensure safety would be housing changes, program changes, and work supervisor changes. The Warden noted that for allegations of sexual abuse or sexual harassment, the different measures taken at FDC Philadelphia to protect inmates and staff from retaliation include a minimum of 90 days monitoring, meeting with to see if there are any issues, increasing interactions with psychology services, instituting separations, and changing housing assignments. When retaliation is suspected, the Warden stated that some measures that can be taken include separations, changes in housing, moving staff assignments, and regardless of what measures are taken the inmate must be safeguarded and in order to do this executive staff work with SIS and unit teams. FDC Philadelphia is compliant with this provision of the standard.</p> <p>FDC Philadelphia is compliant with all provisions of this standard.</p>
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115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.68 (a)</p> <p>P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, states that any use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse shall be subject to the requirements standard 115.43. As per the PAQ no inmates were housed in involuntary segregation for any length of time due to risk of sexual abuse. A memo from the Warden, dated January 29, 2024, states that FDC Philadelphia had no inmates placed in involuntary segregation over the past 12 months as a protection method after being identified as a victim of sexual abuse. The memo further describes the facilities efforts regarding retaliation monitoring. A review of documentation includes the retaliation monitoring form titled Safeguarding of Inmates Alleging Sexual Abuse/Assault Allegation and the Special Housing Review form. The Special Housing Review forms were reviewed with the SHU Lieutenant. SHU reviews are conducted weekly and every thirty days. This auditor noted that all inmates except for one in SHU were there for disciplinary purposes. There was only one inmate housed in SHU for voluntary protective custody. As per the Warden, agency policy absolutely prohibits placing inmates at high risk for sexual</p>

	<p>victimization or who have alleged sexual abuse in involuntary segregated housing in lieu of other housing areas, and less an assessment has determined there are no available alternative means of separation from potential abusers. The warden further stated that no inmates in the last twelve months at high risk for sexual victimization or who have alleged sexual abuse were placed in involuntary segregated housing only until an alternative means of separation from likely abusers could be arranged. The Warden stated that all alternative means of housing are always utilized in lieu of housing in segregation. Two staff who work in segregated housing were interviewed, both state that inmates are only placed in involuntary segregated housing until an alternative means a separation from likely abusers can be arranged, this typically does not occur but if it would the amount of time the inmate would be placed in involuntary segregated housing would be based on a case by case basis but always as soon as possible they would be removed and place an alternative housing. Both staff report that inmates are typically housed in other units within the institution or if possible are transferred to other institutions. The Lieutenant and psychologist work together to get people moved out of segregated housing if being housed there for protective purposes regardless of whether it is voluntary or involuntary. As per the staff and Lieutenant interviewed segregated housing reviews are conducted weekly at SHU rounds, the SHU Lieutenant reviews all inmates placed in segregated housing daily and every 30 days the SHU Lieutenant completes a review. As per staff interviewed, if an inmate were to be housed in segregated housing for protection from sexual abuse, or after alleging sexual abuse, they would not be denied access to programs, privileges, education, and work opportunities. If access was restricted from programs, privileges, education, or work opportunities this would be documented however both staff interviewed from segregated housing report never having experienced any inmate being restricted from these activities. FDC Philadelphia is compliant with all provisions of this standard.</p>
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115.71	Criminal and administrative agency investigations
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>115.71 (a)</p> <p>P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that when the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, it shall do so promptly, thoroughly, and objectively for all allegations, including third party and anonymous reports. P.S. 5324.12 further states that at the conclusion of an investigation the allegations must be indicated as either substantiated, unsubstantiated, or unfounded. P.S. 5324.12 outlines the full response</p>

protocol which includes what notifications must be made. This auditor reviewed all seven investigation files on-site, all but the pending investigation have been completed and were done so in a prompt, objective, and thorough manner. The PREA Compliance Manager (PCM) maintains a tracking log, which was provided to this auditor, and reviews all open investigations weekly with the management team. The SIA and SIS meet with the Associate Wardens and the Warden biweekly to review all open investigations including PREA related investigations. The two investigators interviewed report that all allegations of sexual abuse or sexual harassment are investigated immediately. Of the seven investigation files reviewed, five were reported to staff verbally, one was a notification from the hospital, and one was a notification from another institution. Due to the thoroughness and continuous monitoring of open investigations this auditor finds that FDC Philadelphia exceeds this provision of the standard.

115.71 (b)

P.S. 5324.12 states that the agency shall use investigators who have received specialized training in sexual abuse investigations. The two investigators interviewed report receiving specialized training in conducting sexual abuse and sexual harassment investigations. This auditor received the documentation indicating that all the facility's Lieutenants, Captain, SIS, and SIA staff received the NIC PREA Specialized Training for investigators. FDC Philadelphia is compliant with this provision of the standard.

115.71 (c)

P.S. 5324.12 states that investigators shall gather and preserve direct and circumstantial evidence, shall interview alleged victims, suspected perpetrators, and witnesses, and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator. P.S. 5324.12 clarifies that evidence collection is not a staff first responder responsibility. That is conducted by the investigators. P.S. 5324.12 further clarifies that previous unsubstantiated or unfounded complaints and reports cannot be used as evidence. The two investigative staff interviewed report that the first steps in initiating an investigation would be to make sure that the victim is safeguarded, that notifications are made to medical, psychology, the PCM, Warden, and Captain and then interviews will be conducted. As per the two investigative staff interviewed the investigation process consists of interviewing the inmate victim, interviewing witnesses, reviewing video surveillance, reviewing any photographs, medical reports, psychology reports, collecting any evidence, reviewing phone use, emails, and disciplinary reports. The two investigative staff interviewed report that some of the evidence that they are responsible for gathering in an investigation of an incident of sexual abuse includes photographs, interviews, as much physical evidence that they can gather as possible such as clothes, videos, phone logs, emails, medical records, psychology records, and institutional records. Both investigative staff stated that all rape kits are completed at the hospital by a forensic nurse examiner. The investigative files reviewed contained thorough interviews, reports, photographs, logs, and information from video surveillance review. FDC Philadelphia is compliant with this provision of the standard.

115.71 (d)

P.S. 5324.12 states that when the evidence appears to support criminal prosecution, the agency shall conduct compelled interviews after consulting with prosecutors. The two investigative staff interviewed report that when it is discovered that there is evidence that a prosecutable crime may have taken place the investigation is referred to the FBI. One investigation pending is currently with the FBI for investigation. The SIS is in communication with the FBI regularly as to the status of the investigation. FDC Philadelphia is compliant with this provision of the standard.

115.71 (e)

P.S. 5324.12 states that the credibility of an alleged victim, suspect, or witness shall be assessed on an individual basis and should not be determined by the person's status as an inmate or staff. P.S. 5324.12 further states that a polygraph examination shall not be required. The two investigative staff interviewed report that they do not judge the alleged victim, suspect, or witnesses credibility instead they follow the facts and evidence and they never assume. Both investigative staff stated that they would never use a polygraph or other truth telling device as part of their investigation. Of the three inmates who reported sexual abuse in the facility, two stated that they were never required to submit to a polygraph test or any other truth telling device during the investigation process. The one inmate interviewed who reported sexual abuse in the facility was unable to answer the question due to his mental illness. FDC Philadelphia is compliant with this provision of the standard.

115.71 (f)

P.S. 5324.12 states that administrative investigations shall include an effort to determine whether staff actions or failures to act contributed to the abuse and shall be documented in written reports that included description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings. P.S. 5324.12 states that administrative investigations should also consider whether other factors such as physical layouts, staffing patterns, institution operations, contributed to the abuse. Two investigative staff were interviewed and both report that administrative investigations are documented in written reports which include biographical information on the alleged perpetrator and alleged victim, interviews, all reports, evidence, psychology reports, medical reports, and housing reports. This auditor reviewed seven investigation files and they are organized and thorough. Both staff interviewed who conduct investigations report that they review how the situation could have occurred which would include staff actions or failures to act. They would indicate any findings in their report and notify the Captain. The after-action review is typically where staff actions or failures to act is assessed. Due to the concise, organized, and thorough investigation files, this auditor finds FDC Philadelphia to exceed this provision of the standard.

115.71 (g)

P.S. 5324.12 states that criminal investigation shall be documented in a written report that contains a thorough description of physical, testimonial, and documentary

evidence. The criminal investigations are conducted by the FBI. As per the two investigative staff interviewed, the FBI conducts criminal investigations and provides outcomes to them, and they complete a report to indicate the FBI's findings. There have been no completed criminal investigations of sexual abuse or sexual harassment in the last twelve months. There is one pending criminal investigation, and this auditor was able to review the local file which includes information on the incident, information regarding the suspected perpetrators and the victim. FDC Philadelphia is compliant with this provision of the standard.

115.71 (h)

P.S. 5324.12 states that substantiated allegations of conduct that appears to be criminal shall be referred for prosecution. As per the PAQ there was one allegation of conduct referred for prosecution since the last PREA audit. Both investigative staff interviewed noted that when it appears that an allegation is criminal it is referred to the FBI. FDC Philadelphia has one case that has been referred to the FBI and it is currently pending. FDC Philadelphia is compliant with this provision of the standard,

115.71 (i)

P.S. 5324.12 states that all written reports shall be retained for as long as the alleged abuser is incarcerated or employed by the agency, plus five years. All PREA related files are maintained by the PCM and staff related files are maintained by the Office of Internal Affairs (OIA). FDC Philadelphia is compliant with this provision of the standard.

115.71 (j)

P.S. 5324.12 states that the departure of the alleged abuser or victim from employment or control of the facility or agency shall not provide a basis for terminating the investigation. Both investigative staff interviewed noted that regardless of whether an alleged perpetrator or alleged victim has left the facility, the investigation must be completed. All investigations, except for the pending criminal investigation with the FBI were completed. This auditor reviewed all files. FDC Philadelphia is compliant with this provision of the standard.

115.71 (l)

P.S. 5324.12 states that the facility shall cooperate with outside investigators and shall endeavor to remain informed about the progress of the investigation. As per the SIS, PREA Coordinator, Warden, and the PREA Compliance Manager, when the FBI or OIG is conducting a criminal investigation, the facility investigators are to act as the liaison. They would provide and gather information as requested and stay in contact for regular updates on the progress of the investigation. FDC Philadelphia is compliant with this provision of the standard.

The investigation files for FDC Philadelphia are thorough, concise, and organized. The PCM discusses all open cases weekly with management staff and a meeting is held biweekly with the Warden, PCM, and Associate Warden to review open staff involved investigations and open criminal investigations which includes PREA related

	investigations. This auditor finds that FDC Philadelphia exceeds the requirements of this standard as their files are all encompassing and the monitoring and follow-up regarding allegations and investigations is beyond what is required.
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115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.72 (a)</p> <p>P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that the agency shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. The two investigative staff interviewed reported that a preponderance of the evidence is the standard required to substantiate allegations of sexual abuse and sexual harassment. FDC Philadelphia is compliant with this standard.</p>

115.73	Reporting to inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.73 (a)</p> <p>P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that following an investigation into an inmate's allegation of sexual abuse, the Special Investigative Services Lieutenant provides the inmate with notification of the outcome of the investigation. As per the PAQ, there were 2 sexual abuse allegations where an administrative investigation was completed. There were 3 total allegations of sexual abuse, one investigation is pending with the FBI. There was a total of five inmate on inmate sexual abuse and sexual harassment administrative investigations completed in the last twelve month and one staff on inmate sexual harassment investigation. As per a memo from the Warden dated January 29, 2024, all five inmate-on-inmate sexually abusive behavior allegations were unsubstantiated. The staff on inmate sexual harassment was also found to be unsubstantiated. All investigation files that were completed were reviewed on-site and all contained a notification form to the inmate stating that the investigation was completed, and the</p>

finding was not substantiated. Each form the inmate signs to indicate that they have read the letter and are informed of the outcome. The PREA Compliance Manager (PCM) keeps a PREA Tracking Log to track the investigations and one box is where the date is to be put for when the inmate receives the investigation outcome. As per the Warden and the two investigative staff interviewed, following an investigation into an inmate's allegation that he or she suffered sexual abuse in the facility, the inmate is informed of the outcome of the investigation. Outcomes include whether there was a finding of unfounded, there is absolute proof that the incident did not occur, substantiated, there is no proof that the incident did occur however there is no proof that the incident did not occur, or substantiated, indicating that the incident did occur. As per the investigative staff, when notification is given to the inmate who made the allegation, they must sign the notification indicating that they have received it. This notification is included in all of the investigation files. Of the three inmates interviewed who reported sexual abuse at the facility, regarding whether they received notification of the investigation findings one inmate was unable to complete the interview due to his mental health, and the other two inmates had not yet been notified of the findings from their allegation. This auditor discussed it with the PCM, who noted that both investigations are pending due to the allegations being made a few weeks ago. These investigations were not included in the PAQ due to them just occurring. All investigation files reviewed had notifications for all but one inmate, who was no longer in the custody of BOP and there was no address. FDC Philadelphia is compliant with the provision of the standard.

115.73 (b)

P.S. 5324.12 states that if the agency did not conduct the investigation, it shall request the information from the investigative agency in order to inform the inmate. As per the PAQ, no investigations were completed by an outside agency in the last twelve months. There is one investigation currently pending with the FBI. The SIS has a local file on the investigation and is in communication with FBI as to the status. FDC Philadelphia is compliant with this provision of the standard.

115.73 (c)

P.S. 5324.12 states that following an inmate's allegation that a staff member has committed sexual abuse against the inmate, the inmate shall be informed when the staff member is no longer posted within the inmate's unit, the staff member is no longer employed at the facility, the agency learns that the staff member has been indicted on a charge related to sexual abuse within the facility, or the agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility. One inmate was interviewed who reported sexual abuse involving a staff member, however the inmate reported that the allegation was made after it was made known the staff member had already left employment. FDC Philadelphia is compliant with this provision of the standard.

115.73 (d)

P.S. 5324.12 states that following an inmate allegation of sexual abuse by another inmate, the agency shall inform the alleged victim whenever the agency learns that

	<p>the alleged abuser has been indicted or convicted on a charge related to sexual abuse within the facility. One of the inmates who was interviewed who reported sexual abuse with another inmate involved reported that the investigation is not yet completed, it was just reported. FDC Philadelphia has no such notifications to make at this time, nor have they had to in the last twelve months. FDC Philadelphia is compliant with this provision of the standard.</p> <p>115.73 (e)</p> <p>P.S. 5324.12 states that all notifications shall be documented and maintained in the investigation file. As per the PAQ all notifications were provided and documented. This auditor reviewed the two completed sexual abuse investigation files on site and found that the notifications were provided and documented. The inmate signed off on the acknowledgement that they were informed of the outcome. This auditor reviewed all completed investigation files while on site, in every file where the investigation was completed there was a letter to the inmate from the investigator indicating the outcome of the investigation, each letter was signed by the inmate with the exception of one where the inmate was no longer in BOP custody. FDC Philadelphia is compliant with this provision of the standard.</p> <p>FDC Philadelphia is compliant with all provisions of this standard.</p>
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115.76 Disciplinary sanctions for staff	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.76 (a)</p> <p>P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that Bureau employees are subject to the Program Statement Standards of Employee Conduct, the Master Agreement, and employment-based laws rules and regulations. P.S. 5324.12 further states that staff shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies. There were no such incidents of disciplinary sanctions on staff in the last twelve months. FDC Philadelphia is compliant with this provision of the standard.</p> <p>115.76 (b)</p> <p>P.S. 5324.12 states that termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual abuse. P.S. 5324.12 further states that if evidence supports that a staff member engaged in sexual abuse the matter will first be referred for criminal prosecution. Administrative discipline will be conducted using the Program Statement Standards of Employee Conduct, the Program Statement Human</p>

	<p>Resource Management Manual, and the collective bargaining agreement. As per the PAQ, no staff have violated the agency's sexual abuse and sexual harassment policies in the last twelve months. A memo from the Warden, dated January 29, 2024 states that there have been no substantiated complaints of sexually abusive behavior committed by a staff member against an inmate, therefore no disciplinary sanctions have been given to staff for sexually abusive behavior with an inmate. FDC Philadelphia is compliant with this provision of the standard.</p> <p>115.76 (c)</p> <p>P.S. 5324.12 states that disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment shall be commensurate with the nature and circumstances of the acts committed, the staff members disciplinary history, and the sanctions imposed for comparable offenses by other staff and similar histories. As per the PAQ, in the past 12 months no staff have been disciplined for violation of the agency sexual abuse or sexual harassment policies. FDC Philadelphia is compliant with this provision of the standard.</p> <p>115.76 (d)</p> <p>P.S. 5324.12 states that all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, should be reported to law enforcement agencies, unless the activity was not criminal, and to any relevant licensing bodies. As per the PAQ, no staff from the facility have been reported to law enforcement or licensing boards following their termination for violating agency sexual abuse or sexual harassment policies in the last 12 months. FDC Philadelphia is compliant with this provision of the standard.</p> <p>FDC Philadelphia is compliant with all provisions of this standard.</p>
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115.77	Corrective action for contractors and volunteers
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>115.77 (a)</p> <p>P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with inmates and shall be reported to law enforcement agencies or other relevant licensing bodies, unless the activity was not criminal. As per the PAQ and a memo from the Warden dated January 29, 2024, no volunteers or contractors have been reported to law enforcement for engaging in sexual abuse of inmates. FDC Philadelphia is compliant with this provision of the standard.</p>

	<p>115.77 (b)</p> <p>P.S. 5324.12 states that appropriate remedial measures shall be taken and shall consider whether to prohibit further contact with inmates, in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer. As per the warden if a contractor or volunteer violated the agency sexual abuse or sexual harassment policy their access to the facility would be removed, the control room would receive notification that they were no longer approved for access and a memo would be placed out front indicating that they are to have no access to the facility. A memo from the Warden dated January 29, 2024, further states that FDC Philadelphia takes appropriate remedial measures and considers whether to prohibit further contact with inmates if there is an allegation of any violation of the agency's sexual abuse or sexual harassment policies by a contractor or volunteers. As per this memo over the last 12 months there have been no instances requiring these remedial measures. FDC Philadelphia is compliant with this provision of the standard.</p> <p>FDC Philadelphia is compliant with all provisions of this standard.</p>
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115.78 Disciplinary sanctions for inmates	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.78 (a)</p> <p>P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that inmates shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding or criminal finding of guilt that the inmate engaged in inmate-on-inmate sexual abuse. As per the PAQ, there is one investigation pending for inmate-on-inmate sexual abuse, but it is currently with the FBI. FDC Philadelphia is compliant with this provision of the standard.</p> <p>115.78 (b)</p> <p>P.S. 5324.12 states that sanctions shall be commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories. As per the Warden when inmates are sanctioned for a finding that the inmate engaged in inmate-on-inmate sexual abuse the Disciplinary Hearing Officer reviews the nature and circumstance of the abuse is committed, the inmates disciplinary histories, and the sanctions imposed for similar offenses by other inmates with similar histories. FDC Philadelphia is compliant with this provision of the standard.</p> <p>115.78 (c)</p>

	<p>P.S. 5324.12 states that disciplinary process shall consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior when determining what sanctions should be imposed. The Warden further stated that the mental capacity of the inmate being disciplined is always considered. Psychology is always involved in sexual abuse investigations and outcomes. FDC Philadelphia is compliant with this provision of the standard.</p> <p>115.78 (d)</p> <p>P.S. 5324.12 states that the facility shall consider whether to require the offending inmate to participate in therapy, counseling, or other interventions as a condition of access to programming or other benefits. Three medical and mental health staff were interviewed and all three noted that services are provided to the offending inmate as well as the victim, and these services are not required as a condition of access to programming or other benefits. FDC Philadelphia is compliant with this provision of the standard.</p> <p>115.78 (e)</p> <p>P.S. 5324.12 states that an inmate can be disciplined for sexual contact with staff but only upon a finding that the staff member did not consent to such contact. P.S. 5324.12 further clarifies that sexual abuse and sexual harassment of staff members should be addressed through other existing statutes, policies, and procedures such as using the inmate discipline system and referral to criminal prosecution. As per a memo from the Warden dated January 29, 2024, there have been no instances, in the last twelve months, requiring disciplinary actions against inmates for sexual conduct with a staff member. FDC Philadelphia is compliant with this provision of the standard.</p> <p>115.78 (f)</p> <p>P.S. 5324.12 states that a report of sexual abuse made in good faith-based upon a reasonable belief that the alleged conduct occurred shall not constitute as a false report even if the investigation does not establish evidence sufficient to substantiate the allegation. P.S. 5324.12 clearly states that inmates will be held responsible for manipulative behavior and intentionally making false allegations. FDC Philadelphia is compliant with this provision of the standard.</p> <p>115.78 (g)</p> <p>P.S. 5324.12 states that all sexual activity between inmates is prohibited and is subject to discipline. FDC Philadelphia is compliant of this provision of the standard.</p> <p>FDC Philadelphia is compliant with all provisions of this standard.</p>
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115.81	Medical and mental health screenings; history of sexual abuse
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Auditor Overall Determination: Meets Standard**Auditor Discussion**

115.81 (a)

P.S. 5324.12, Sexually Abusive Behavior and Intervention Program states that if the inmates risk screening indicates they have experienced prior sexual victimization, whether it occurred in an institution or in the community, the inmate is offered a follow up meeting with Psychology Services within 14 days of the intake screening.

As per the PAQ, 100% of all inmates who disclosed prior victimization during screening were offered a follow-up meeting with a medical or mental health practitioner. This auditor was provided with a sampling of documentation regarding follow-up assessments with psychology due to reported history of victimization of sexual abuse for three inmates while on-site. The documentation indicates that psychology met with the inmate and reviewed risk factors for further victimization and offered follow up services. As per the two risk screening staff interviewed all inmates who report that they had experienced prior sexual victimization are referred experience to psychology services. Two of the three inmates who reported prior history of sexual victimization reported that they were seen by psychology services and met with the doctor. The one inmate who disclosed prior sexual victimization during her risk screening reported that she had no follow up that she recalls but does remember being asked questions about her history of victimization and when it happened so she stated that she might have been seen but is unsure. This auditor finds FDC Philadelphia to be compliant with this provision of the standard.

115.81 (b)

P.S. 5324.12 states that if the risk screening indicates that the inmate previously perpetrated sexual abuse, whether in an institution or the community, staff shall ensure that the inmate is offered a follow up meeting with the mental health practitioner within 14 days of the intake screening. As per the PAQ, 100% of all inmates who previously perpetrated sexual abuse as indicated during screening were offered a follow-up meeting with a medical or mental health practitioner. As per the two risk screening staff interviewed, inmates who previously perpetrated sexual abuse or provided a follow up with psychology services and this typically occurs within two weeks. As per one of the risk screening staff interviewed most individuals who previously perpetrated sexual abuse refuse services. FDC Philadelphia is compliant with this provision of the standard.

115.81 (c)

P.S. 5324.12 states that if a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is offered a follow up meeting with medical or mental health practitioners within 14 days of screening. As per the risk screening staff interviewed, inmates who report experiencing prior sexual victimization are typically seen the next day but never more than 14 days after arrival. Of the three inmates who reported sexual victimization at risk screening, the two inmates that recall being seen by

	<p>psychology and medical services report that it occurred within two days after arrival. FDC Philadelphia is compliant with this provision of the standard.</p> <p>115.81 (d)</p> <p>P.S. 5324.12 states that 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. A memo from the Warden dated January 29, 2024, states that information related to sexual victimization or abusiveness that occurred in an institutional setting is strictly limited to medical and mental health professionals, however some tracking information and safeguarding information may be seen by custody and non-healthcare personnel. The memo further states that if an inmate has a security threat group designation, this designation information would also be available to non-healthcare personnel. This auditor discussed access to risk screening information with the PREA Compliance Manager, Warden, medical and mental health staff, the Health Service Administrator, and the risk screening staff interviewed. All reported that access to the information from the risk screening is limited to medical, psychology services, the Unit Team, executive staff, Captain, and investigative staff if needed. It was noted that only staff that need to see the information have access to it. FDC Philadelphia is compliant with this provision of the standard.</p> <p>115.81 (e)</p> <p>P.S. 5324.12 states that medical and mental health practitioners shall obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting unless the inmate is under the age of 18. A memo from the Warden dated January 29, 2024 states that medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless that inmate is under the age of 18. As per the memo there have been no instances of medical or mental health practitioners reporting information about prior sexual victimization that did not occur in an institutional setting. The memo further states that if an instance should occur that involves the need to report such information, informed consent would be obtained prior to disclosure of that information. Three medical and mental health staff were interviewed and all three report that informed consent is obtained prior to reporting any report of prior sexual victimization that did not occur in an institutional setting. FDC Philadelphia is compliant with this provision of the standard.</p> <p>FDC Philadelphia is compliant with all provisions of this standard.</p>
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115.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard

Auditor Discussion

115.82 (a)

P.S. 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states that inmate victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment. P.S. 5324.12 further details the procedures for inmate victims. Medical staff are responsible for examination, documentation, and treatment of inmate injuries arising from sexually abusive behaviors. When an inmate self-reports, or is referred to health services, medical staff will notify Psychology Services and Correctional Services prior to conducting an injury assessment. Health services staff are to perform the injury assessment without compromising forensic evidence. The forensic examination is performed by a qualified sexual assault examiner at the local hospital. The forensic examination should occur as soon as practicable, but within 72 hours of staff becoming aware that an inmate reported involvement in a sexually abusive assault. P.S. 5324.12 also outlines the procedures for alleged inmate perpetrators. Health services clinicians will perform a physical injury assessment on any alleged inmate perpetrator without compromising forensic evidence. A memo from the Warden dated January 29, 2024, states that emergency medical and mental health services are available to inmates who report being the victim of sexually abusive behavior. The institution supplement PHL 5324.12d states that psychology services staff will provide crisis intervention including offering to accompany the victim to the medical assessment, and investigatory interviews as deemed appropriate. The institution supplement further notes that a gratuitous services agreement is in place with WOAR. This auditor reviewed the MOU which indicates that crisis intervention services and emotional support services are available to inmates from FDC Philadelphia who are victims of sexual abuse. The institution supplement also notes that inmate perpetrators are also referred to psychology services for an evaluation of treatment needs. Institution supplement PHL 5324.12d States that a thorough physical examination of the alleged victim must be completed immediately in the event of a serious assault which was sexual in nature. This examination would be conducted at a local hospital by a Sexual Assault Forensic Examiner or a Sexual Assault Nurse Examiner. As per the institution supplement, ongoing medical and mental health follow up will be provided to all victims of sexual abuse whether or not they cooperate with any investigation. The follow up shall be provided without cost to the inmate. The institution will monitor any inmate disciplinary reports, housing, or program changes, or negative performance reviews or reassignments of staff. This monitoring would occur for no less than 90 days. Three medical and mental health staff were interviewed, and all report that inmate victims of sexual abuse receive timely and unimpeded access to emergency medical treatment and crisis intervention services. If emergent, these services are provided as soon as possible. If the incident reported occurred days or weeks ago the inmate victims are seen within 24 hours of notification. All three medical and mental health staff interviewed state that the services provided are determined according to their professional judgement. Of the three inmates who reported sexual abuse who were interviewed, one reports being

seen by medical and psychology services in a timely manner, one reports being seen 2 ½ months later, which is not consistent with her allegation which just occurred within the month, and the third inmate was on the mental health unit and seen daily but stated no one helps him at the facility. This auditor will note the third inmate interviewed was also severely mentally ill and was unable to complete the interview due to him needing constant redirection as to the topic. This auditor reviewed all investigation files to confirm that alleged victims are seen by psychology services and when necessary medical services. Every investigation file reviewed contained a psychology report for both the alleged victim and alleged perpetrator, and where necessary the files contained a medical assessment for both the alleged victim and alleged perpetrator. The documentation notes that the inmates were seen and the reports indicate that they were seen in-person regarding the alleged incident. All reports were dated to reflect that the inmates were seen in a timely manner. FDC Philadelphia is compliant with this provision of the standard.

115.82 (b)

P.S. 5324.12 states that if no qualified medical or mental health practitioners are on duty at the time of the report of a recent abuse is made, security staff first responders will take preliminary steps to protect the victim and shall immediately notify the appropriate medical and mental health practitioners. This auditor interviewed five staff first responders on-site and all five report that the actions taken are to safeguard the inmate, contact the Operations Lieutenant, and then take further direction from the Operations Lieutenant. This Operations Lieutenant would contact psychology services, medical, the PREA Compliance Manager, Captain, SIS, and Warden. An interview with the Health Services Administrator regarding medical services available indicates that the facility has 16 hours of medical services on-site per day. There is always a physician on-call who would be contacted in the event of an emergency. In a case where an inmate is sexually assaulted after hours, the on-call physician would be contacted and would authorize the transfer to Thomas Jefferson Hospital for a forensic examination. FDC Philadelphia is compliant with this provision of the standard.

115.82 (c)

P.S. 5324.12 states that Inmate victims of sexual abuse while incarcerated shall be offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis. All three medical and mental health staff interviewed report that victims of sexual abuse are offered timely information about access to emergency contraception and sexually transmitted infection prophylaxis. This auditor interviewed the Quality Improvement Infection Prevention and Control Nurse who reported that all cases of alleged sexual abuse are taken very seriously at FDC Philadelphia. The nurse noted that as the Quality Improvement Infection Prevention and Control Nurse he sees all alleged victims of sexual abuse and all perpetrators to educate them on sexual transmitted infections and sexual health. Antibiotics and testing are offered in the event that an interview with an alleged victim or perpetrator indicates any kind of sexual contact. The use of contraception of sexually transmitted infection prophylaxis and testing was only applicable to one of

	<p>the three individuals interviewed who alleged sexual abuse that were interviewed. That inmate reported that medical staff spoke with him and provided him with antibiotics. The inmate stated that a week or so after the initial meeting he was tested for sexually transmitted infections. FDC Philadelphia is compliant with this provision of the standard.</p> <p>115.82 (d)</p> <p>P.S. 5324.12 states that treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. As per the institution supplement PHL 5324.12d, there is to be no cost for medical and psychological services related to an allegation of sexual abuse. All three medical and mental health staff interviewed noted that services are provided free of charge and two of the three inmates who reported sexual abuse who were interviewed noted that they were not charged for services. The third inmate was seriously mentally ill and was unable to answer the question. FDC Philadelphia is compliant with this provision of the standard.</p> <p>FDC Philadelphia is compliant with all provisions of this standard.</p>
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115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>115.83 (a)</p> <p>P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that medical and mental health evaluation, and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility shall be offered. Interviews with medical, mental health, custody, and executive staff as well as documentation reviewed pre-audit, post-audit and while on-site, including investigation files, this auditor find that FDC Philadelphia provides medical and mental health treatment as appropriate to inmates who have been sexually abused. FDC Philadelphia is compliant with this provision of the standard.</p> <p>115.83 (b)</p> <p>P.S. 5324,12 states that the evaluation and treatment of such victims shall include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody. Three medical and mental health staff were interviewed on-site. The mental health staff interviewed report that their evaluation and treatment</p>

of inmate's victimized entails an interview in which they get the details of the incident, risk factor assessment, notifying inmates as to the limitations of confidentiality, and providing follow-up referrals. The two medical staff interviewed report that their evaluation consists of an interview to determine what happened and what level of care is needed, a preliminary evaluation to check for significant injuries which could be life threatening and sending to the hospital if needed. The Quality Improvement and Infection Prevention Control nurse interviewed reported that education on sexual health is provided as well as medical treatment if appropriate and follow-up testing for sexually transmitted infection. Only one of the three inmates who reported sexual abuse who were interviewed required immediate treatment. Those inmates reported follow-up with both psychology and medical services. FDC Philadelphia reviewed all the investigation files on-site, and all indicate services from psychology and medical were offered and included offers of follow-up services. FDC Philadelphia is compliant with this provision of the standard.

115.83 (c)

P.S. 5324.12 states that victims will be provided with medical and mental health services consistent with the community level of care. All three medical and mental health staff interviewed stated that the medical and mental health services provided at FDC Philadelphia are consistent with the community level of care. FDC Philadelphia is compliant with this provision of the standard.

115.83 (d)

P.S. 5324.12 states that inmate victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests. All three medical and mental health staff interviewed report that inmate victims who are female and the alleged abuse that may result in pregnancy are offered pregnancy tests. This was not applicable to the three inmates interviewed who reported sexual abuse. This auditor interviewed the HSA on-site and he stated that pregnancy tests are offered. FDC Philadelphia is compliant with this provision of the standard.

115.83 (e)

P.S. 5324.12 States that if pregnancy results from sexual abuse, victims shall receive timely and comprehensive information and timely access to all lawful pregnancy-related medical services. The BOP provides comprehensive prenatal counseling and care for pregnant female offenders. As per the two medical staff interviewed, health services has a social worker that will work with the inmates who are pregnant to provide them information and support. The two medical staff interviewed report that if a pregnancy results from sexual abuse while incarcerated, victims are given timely information and access to all lawful pregnancy related services. As per the two medical staff interviewed, such victims are provided this information and access to these services as soon as the initial assessment is completed and regardless of what services are accepted or needed, education is always provided. FDC Philadelphia is compliant with this provision of the standard.

115.83 (f)

	<p>P.S. 5324.12 states that inmate victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate. Testing for sexually transmitted infections was only applicable to one of the three inmates interviewed who reported sexual abuse. That inmate reports that he met with the nurse immediately and was educated on sexually transmitted infections and started an antibiotic. The inmate stated that a week or so later the nurse returned and tested him for sexually transmitted infections. The Quality Improvement and Infection Prevention Control nurse was interviewed and reported that education on sexual health is provided as well as medical treatment if appropriate and follow-up testing for sexually transmitted infections. The nurse stated that he sees all alleged victims and perpetrators of sexual abuse where there is a potential for sexually transmitted infection. FDC Philadelphia is compliant with this provision of the standard.</p> <p>115.83 (g)</p> <p>As per P.S. 5324.12, all treatment services are to be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. As per the institution supplement PHL 5324.12d, there is to be no cost for medical and psychological services related to an allegation of sexual abuse. All three medical and mental health staff interviewed noted that services are provided free of charge and two of the three inmates who reported sexual abuse who were interviewed noted that they were not charged for services. The third inmate was seriously mentally ill and was unable to answer the question. FDC Philadelphia is compliant with this provision of the standard.</p> <p>115.83 (h)</p> <p>As per P.S. 5324.12, a mental health evaluation of all known inmate-on-inmate abusers will be conducted within sixty days of learning of such abuse history and treatment will be offered when deemed appropriate by mental health practitioners. All three medical and mental health staff interviewed report that inmate abusers are evaluated by psychology services. FDC Philadelphia is compliant with this provision of the standard.</p> <p>FDC Philadelphia is compliant with all provisions of this standard.</p>
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115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.86 (a)</p> <p>An on-site review of investigations indicates that there were three sexual abuse</p>

investigations, all three were inmate-on-inmate, two were completed and found to be unsubstantiated, the third is currently pending criminal investigation. This auditor reviewed the pending administrative investigation file which was not completed due to the criminal investigation pending, and the two unsubstantiated allegations of inmate-on-inmate sexual abuse files, both files had an after-action review report. A memo dated January 29, 2024, indicates that there were five completed administrative investigations of alleged sexual abuse/harassment incidents which were found to be unsubstantiated. A review of the investigation log, discussion with the PREA Compliance Manager (PCM), Warden, and the SIS investigative staff, the memo included the sexual abuse and sexual harassment investigations involving inmate-on-inmate incidents, but there were only two sexual abuse administrative investigations completed, one is pending. There are three inmate-on-inmate sexual harassment allegations in which an administrative investigation was completed and one staff-on-inmate sexual harassment investigation which was completed prior to this auditor coming on-site. All seven files were reviewed by this auditor. Of the seven files reviewed by this auditor, six files were completed investigations, and all had an after action review on file. FDC Philadelphia is compliant with this provision of the standard.

115.86 (b)

As per the P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program this review is to occur within 30 days of the conclusion of the investigation. All six completed investigations were reviewed on-site, and all six had an after-action review conducted within 30 days of the completion of the investigation. FDC Philadelphia is compliant with this provision of the standard.

115.86 (c)

As per P.S. 5324.12, the review team shall include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners, as well as input from the local Union President or his/her designee. As per the Warden, FDC Philadelphia has an after-action team which consists of upper-level management, medical, mental health, investigative, and other applicable staff. This auditor reviewed the after-action reviews in the investigation files and note that the teams consist of the Warden, Associate Warden, PREA Compliance Manager, SIS Lieutenant, Captain, Health Services Administrator, Unit Manager, Chief Psychiatrist, and other applicable staff. FDC Philadelphia is compliant with this provision of the standard.

115.86 (d)

As per P.S. 5324.12, the review team shall consider and do the following: 1) Whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse. 2) Whether the incident or allegation was motivated by race; ethnicity; gender identity; or perceived status; or gang affiliation; was motivated or otherwise caused by other group dynamics of 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

	<p>staffing levels in that area during different shifts. 5) Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff. 6) Prepare a report of its findings, including but not necessarily limited to determinations made and any recommendations for improvement and submit such a report to the facility head and PREA Compliance Manager. A review of the after-action reviews and the two interviews conducted with staff considered to be on the after-action team, all of the considerations required of this standard are reviewed during the after action. The team also assesses the area in which the alleged incident occurred, evaluates staffing levels and monitoring technology. The PREA Compliance Manager (PCM) stated that sexual abuse incident reviews are conducted, and the report is prepared and included in the investigation file. The PCM reports that she reviews the recommendations and forwards them up the chain of command if needed and makes sure to implement the recommendations as best as possible. The PCM reports that she is part of the after actions, and this is verified by this auditor during the review of the investigation files which included the after action reports. The PCM notes that following the after-action is completed if recommendations are made a plan of action is developed and implemented. FDC Philadelphia is compliant with this provision of the standard.</p> <p>115.86 (e)</p> <p>As per P.S. 5324.12, the facility shall implement the recommendations for improvement or shall document its reasons for not doing so. A memo from the Warden dated January 29, 2024, indicates that in the last twelve months the only recommendation made from an after-action review was a recommendation for additional training for investigators. As per the memo this recommendation is being implemented. FDC Philadelphia is compliant with this provision of the standard.</p> <p>FDC Philadelphia is compliant with all provisions of this standard.</p>
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115.87	Data collection
	Auditor Overall Determination: Audited at Agency Level
	Auditor Discussion

115.88	Data review for corrective action
	Auditor Overall Determination: Audited at Agency Level
	Auditor Discussion

115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Audited at Agency Level
	Auditor Discussion

115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.401 (a)</p> <p>FDC Philadelphia is part of the Federal Bureau of Prisons (BOP). All BOP facilities were audited in the previous three-year audit cycle.</p> <p>115.401 (b)</p> <p>FDC Philadelphia is part of the Federal Bureau of Prisons (BOP). The BOP has a schedule for all their facilities to be audited within a three-year audit cycle, with one third being audited each year. FDC Philadelphia is being audited in the second year of the current three-year cycle.</p> <p>115.401 (h)</p> <p>This auditor had access to and the ability to observe all areas of the facility while on-site.</p> <p>115.401 (i)</p> <p>This auditor was permitted to request and receive copies of any relevant documents including electronically stored information.</p> <p>115.401 (m)</p> <p>This auditor was able to conduct private interviews with inmates while on-site.</p> <p>115.401 (n)</p> <p>Inmates were permitted to send confidential information and/or correspondence to the auditor in the same manner as if they were communicating with legal counsel. This auditor observed the facility postings while on site indicating how to send correspondence to the auditor. Inmates and staff acknowledged seeing the signage throughout the facility during interviews while on-site.</p> <p>This auditor finds FDC Philadelphia to be in compliance with all provisions of this standard.</p>

115.403	Audit contents and findings
	Auditor Overall Determination: Audited at Agency Level
	Auditor Discussion

Appendix: Provision Findings		
115.11 (a)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
115.11 (c)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	yes
	Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	yes
115.12 (a)	Contracting with other entities for the confinement of inmates	
	If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	na
115.12 (b)	Contracting with other entities for the confinement of inmates	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	na
115.13 (a)	Supervision and monitoring	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional	yes

	practices?	
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any applicable State or local laws, regulations, or standards?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes
115.13 (b)	Supervision and monitoring	

	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	yes
115.13 (c)	Supervision and monitoring	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes
115.13 (d)	Supervision and monitoring	
	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes
115.14 (a)	Youthful inmates	
	Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (b)	Youthful inmates	
	In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na

	In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (c)	Youthful inmates	
	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.15 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
115.15 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	yes
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.)	yes
115.15 (c)	Limits to cross-gender viewing and searches	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	yes
115.15 (d)	Limits to cross-gender viewing and searches	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or	yes

	genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	
	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
115.15 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
115.15 (f)	Limits to cross-gender viewing and searches	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
115.16 (a)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are blind or have low vision?	yes

	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have intellectual disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have psychiatric disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have speech disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other (if "other," please explain in overall determination notes.)	yes
	Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing?	yes
	Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have intellectual disabilities?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: are blind or have low vision?	yes
115.16 (b)	Inmates with disabilities and inmates who are limited English proficient	

	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
115.16 (c)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes
115.17 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to	yes

	consent or refuse?	
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
115.17 (b) Hiring and promotion decisions		
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes
115.17 (c) Hiring and promotion decisions		
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
115.17 (d) Hiring and promotion decisions		
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes
115.17 (e) Hiring and promotion decisions		
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes
115.17 (f) Hiring and promotion decisions		
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have	yes

	contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
115.17 (g)	Hiring and promotion decisions	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
115.17 (h)	Hiring and promotion decisions	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
115.18 (a)	Upgrades to facilities and technologies	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	na
115.18 (b)	Upgrades to facilities and technologies	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	yes
115.21 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the	yes

	agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	
115.21 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes
	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.21 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	yes

	Has the agency documented its efforts to secure services from rape crisis centers?	yes
115.21 (e)	Evidence protocol and forensic medical examinations	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
115.21 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	yes
115.21 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.)	yes
115.22 (a)	Policies to ensure referrals of allegations for investigations	
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes
115.22 (b)	Policies to ensure referrals of allegations for investigations	
	Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes

	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
115.22 (c)	Policies to ensure referrals of allegations for investigations	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	yes
115.31 (a)	Employee training	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes
	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes

	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
115.31 (b)	Employee training	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes
115.31 (c)	Employee training	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
115.31 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.32 (a)	Volunteer and contractor training	
	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
115.32 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	yes
115.32 (c)	Volunteer and contractor training	

	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
115.33 (a)	Inmate education	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
115.33 (b)	Inmate education	
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
115.33 (c)	Inmate education	
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes
	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes
115.33 (d)	Inmate education	
	Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?	yes

	Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?	yes
115.33 (e)	Inmate education	
	Does the agency maintain documentation of inmate participation in these education sessions?	yes
115.33 (f)	Inmate education	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats?	yes
115.34 (a)	Specialized training: Investigations	
	In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.34 (b)	Specialized training: Investigations	
	Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include proper use of Miranda and Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.34 (c)	Specialized training: Investigations	

	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.35 (a)	Specialized training: Medical and mental health care	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or suspicions of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.35 (b)	Specialized training: Medical and mental health care	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.)	na
115.35 (c)	Specialized training: Medical and mental health care	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental	yes

	health care practitioners who work regularly in its facilities.)	
115.35 (d)	Specialized training: Medical and mental health care	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)	yes
	Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)	yes
115.41 (a)	Screening for risk of victimization and abusiveness	
	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
	Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
115.41 (b)	Screening for risk of victimization and abusiveness	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
115.41 (c)	Screening for risk of victimization and abusiveness	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes
115.41 (d)	Screening for risk of victimization and abusiveness	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	yes
	Does the intake screening consider, at a minimum, the following	yes

	criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes?	yes
115.41 (e)	Screening for risk of victimization and abusiveness	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?	yes
115.41 (f)	Screening for risk of victimization and abusiveness	

	Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes
115.41 (g)	Screening for risk of victimization and abusiveness	
	Does the facility reassess an inmate's risk level when warranted due to a referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a request?	yes
	Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes
115.41 (h)	Screening for risk of victimization and abusiveness	
	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes
115.41 (i)	Screening for risk of victimization and abusiveness	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates?	yes
115.42 (a)	Use of screening information	
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of	yes

	being sexually abusive, to inform: Work Assignments?	
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
115.42 (b)	Use of screening information	
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
115.42 (c)	Use of screening information	
	When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems?	yes
115.42 (d)	Use of screening information	
	Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?	yes
115.42 (e)	Use of screening information	
	Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes
115.42 (f)	Use of screening information	
	Are transgender and intersex inmates given the opportunity to	yes

	shower separately from other inmates?	
115.42 (g)	Use of screening information	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
115.43 (a)	Protective Custody	
	Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?	yes
	If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?	yes
115.43 (b)	Protective Custody	
	Do inmates who are placed in segregated housing because they	yes

	are at high risk of sexual victimization have access to: Programs to the extent possible?	
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?	yes
	If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
115.43 (c)	Protective Custody	
	Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?	yes
	Does such an assignment not ordinarily exceed a period of 30 days?	yes
115.43 (d)	Protective Custody	
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?	yes
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation	yes

	can be arranged?	
115.43 (e)	Protective Custody	
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes
115.51 (a)	Inmate reporting	
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes
115.51 (b)	Inmate reporting	
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain anonymous upon request?	yes
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	yes
115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.51 (d)	Inmate reporting	

	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	no
115.52 (b)	Exhaustion of administrative remedies	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
115.52 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
115.52 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision,	yes

	does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
115.52 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	yes
115.52 (f)	Exhaustion of administrative remedies	
	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.).	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days?	yes

	(N/A if agency is exempt from this standard.)	
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
115.52 (g)	Exhaustion of administrative remedies	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes
115.53 (a)	Inmate access to outside confidential support services	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)	yes
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
115.53 (b)	Inmate access to outside confidential support services	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
115.53 (c)	Inmate access to outside confidential support services	
	Does the agency maintain or attempt to enter into memoranda of	yes

	understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
115.54 (a)	Third-party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes
115.61 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes
115.61 (b)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes
115.61 (c)	Staff and agency reporting duties	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of	yes

	confidentiality, at the initiation of services?	
115.61 (d)	Staff and agency reporting duties	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
115.61 (e)	Staff and agency reporting duties	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes
115.62 (a)	Agency protection duties	
	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes
115.63 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
115.63 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes
115.63 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes
115.63 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
115.64 (a)	Staff first responder duties	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report	yes

	required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
115.64 (b)	Staff first responder duties	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
115.65 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?	yes
115.66 (a)	Preservation of ability to protect inmates from contact with abusers	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
115.67 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate	yes

	with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.67 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes
115.67 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	yes

	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
115.67 (d)	Agency protection against retaliation	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
115.67 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.68 (a)	Post-allegation protective custody	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes
115.71 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
115.71 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
115.71 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial	yes

	evidence, including any available physical and DNA evidence and any available electronic monitoring data?	
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
115.71 (d)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
115.71 (e)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.71 (f)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes
	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
115.71 (g)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
115.71 (h)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.71 (i)	Criminal and administrative agency investigations	

	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
115.71 (j)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes
115.71 (l)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.72 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.73 (a)	Reporting to inmates	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes
115.73 (b)	Reporting to inmates	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	yes
115.73 (c)	Reporting to inmates	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate's allegation that a staff member has	yes

	committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
115.73 (d)	Reporting to inmates	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	yes
115.73 (e)	Reporting to inmates	
	Does the agency document all such notifications or attempted notifications?	yes
115.76 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
115.76 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who	yes

	have engaged in sexual abuse?	
115.76 (c)	Disciplinary sanctions for staff	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes
115.76 (d)	Disciplinary sanctions for staff	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies(unless the activity was clearly not criminal)?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes
115.77 (a)	Corrective action for contractors and volunteers	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.77 (b)	Corrective action for contractors and volunteers	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes
115.78 (a)	Disciplinary sanctions for inmates	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
115.78 (b)	Disciplinary sanctions for inmates	

	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
115.78 (c)	Disciplinary sanctions for inmates	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
115.78 (d)	Disciplinary sanctions for inmates	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	yes
115.78 (e)	Disciplinary sanctions for inmates	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes
115.78 (f)	Disciplinary sanctions for inmates	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?	yes
115.78 (g)	Disciplinary sanctions for inmates	
	If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes
115.81 (a)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).	yes
115.81 (b)	Medical and mental health screenings; history of sexual abuse	

	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	yes
115.81 (c)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	yes
115.81 (d)	Medical and mental health screenings; history of sexual abuse	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes
115.81 (e)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	yes
115.82 (a)	Access to emergency medical and mental health services	
	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
115.82 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes

115.82 (c)	Access to emergency medical and mental health services	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
115.82 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
115.83 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
115.83 (c)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
115.83 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	yes
115.83 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph §	yes

	115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	
115.83 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.83 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes
115.86 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
115.86 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.86 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
115.86 (d)	Sexual abuse incident reviews	

	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.86 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes
115.401 (h)	Frequency and scope of audits	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
115.401 (i)	Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
115.401 (m)	Frequency and scope of audits	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes

115.401 (n)	Frequency and scope of audits	
	Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes

PREA Agency Audit Report: Final

Name of Agency: Federal Bureau of Prisons

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 10/04/2023

Auditor Certification

The contents of this report are accurate to the best of my knowledge.



No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.



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



Auditor Full Name as Signed: Marc Coudriet

Date of Signature: 10/04/2023

AUDITOR INFORMATION

Auditor name: Coudriet, Marc

Email: usmc58312215@outlook.com

Start Date of On-Site Audit:

End Date of On-Site Audit:

AGENCY INFORMATION

Name of agency: Federal Bureau of Prisons

Governing authority or parent agency (if applicable): U.S. Department of Justice

Physical Address: 320 1st Street Northwest, Washington , Dist. Columbia - 20534

Mailing Address:

Telephone number: 2023073250

Agency Chief Executive Officer Information:

Name:	Colette S. Peters, Director
Email Address:	bop-rsd-preacoordinator@bop.gov
Telephone Number:	(202) 307-3250

Agency-Wide PREA Coordinator Information

Name:	Cynthia Campagna	Email Address:	ccampagna@bop.gov
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Agency AUDIT FINDINGS**Summary of Audit Findings**

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

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

Number of standards exceeded:

0

Number of standards met:

10

Number of standards not met:

0

Standards	
Auditor Overall Determination Definitions	
<ul style="list-style-type: none"> Exceeds Standard (Substantially exceeds requirement of standard) Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period) Does Not Meet Standard (requires corrective actions) 	
Auditor Discussion Instructions	
<p>Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.</p>	

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.11(a)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Pre-Audit Questionnaire.</p> <p>BOP PREA Plan</p> <p>Agency zero-tolerance statement.</p> <p>Organizational charts, interviews.</p> <p>INTERVIEWS.</p> <p>Agency PREA Coordinator.</p> <p>FINDINGS:</p>

Agency Directives and BOP PREA Plan address the requirements of this provision. The agency mandates a zero-tolerance directive towards all forms of sexual abuse and sexual harassment and outlines the agency's strategies on preventing, detecting, and responding to such conduct. Agency policies addressed "Preventing" sexual abuse and sexual harassment through the designation of a PREA Coordinator and PREA Compliance Manager, Criminal Background Checks (Staff, Contractors, and Volunteers, as applicable), Training (Staff, Volunteers, and Contractors), Staffing, Intake Screening, Classification, Inmate Education, Posting of Signage (PREA Posters, etc.) and Contract Monitoring. The Directives addressed "Detecting" sexual abuse and sexual harassment through Training (Staff, Volunteers, and Contractors), and Intake Screening.

The policies addressed "Responding" to allegations of sexual abuse and sexual harassment through Reporting, Investigations, Victim Services, Medical and Mental Health Services, Disciplinary Sanctions for Staff (including notification to licensing agencies), Incident Review Teams, and Data Collections and Analysis.

The Inmate Handbook, PREA Posters, and PREA Brochures do address sexual abuse by another inmate, and the Inmate Handbook does address sanctions for inmates when involved in such conduct. Based on interviews and a review of agency policies, BOP staff closely monitor for inmate-on-inmate sexual misconduct in accordance with the agency's PREA policies; allegations are reported and investigated, and inmates are held accountable. By policy, the Inmate handbooks are reviewed and updated at least annually at each BOP institution.

115.11(b)

DIRECTIVE AND DOCUMENT REVIEW:

Agency Directives and BOP PREA Plan.

Agency's organizational chart.

INTERVIEWS:

PREA Coordinator.

FINDINGS:

Agency Directive(s) and BOP PREA Plan address(es) the position of the agency PREA Coordinator, which outlines the roles and responsibilities of the position and calls for the position being allowed enough time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in each facility.

The agency's organizational chart reflects that the agency PREA Coordinator position is an upper-level position with agency-wide oversight. The agency PREA Coordinator position reports to the Assistant Director, Reentry Services Division.

The PREA Coordinator was interviewed and reported to have enough time to focus on the PREA standards and the freedom to divert responsibilities to other staff as needed to focus on the audit. A review of the agency directive, agency's organization chart,

	and based on the interview with the designated agency's PREA Coordinator, the Auditor determined the agency demonstrates it meets the requirements of this provision of this standard.
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115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.12(a) (b)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Agency Directives and BOP PREA Plan.</p> <p>FINDINGS:</p> <p>Agency Directive(s) and BOP PREA Plan address(es) this provision. The agency reported there were a total of zero contracts for the confinement of inmates and 161 Residential Reentry Centers (RRCs) that the agency had entered or renewed with private entities or other government agencies.</p> <p>A review of the agency directive reflected all contracts will meet the required entity's obligation to adopt and comply with the PREA standards.</p> <p>Agency Directive(s) and BOP PREA Plan address(es) this provision. The agency reported the agency-wide contracts would require the agency to monitor the contractor's compliance with the PREA standards.</p> <p>If the agency contracted the confinement of its inmates, the agency's Contract Administrator would be required to maintain regular contact with every inmate placed in a contract facility. If there are concerns, agency protocol requires the inmate be removed from the facility and the facility allows time to make corrective action and address the concerns.</p> <p>Corrective actions are addressed before the facility is reconsidered. Notification would also be made to law enforcement. The Contract Administrator would annually collect credentialing documentation for each facility: facility license; staff licenses or certifications; daily schedule; and monitoring reports or the licensing agency's website regarding the facility's status; and tours the facility. The BOP is no longer actively soliciting new contracts with private facilities.</p>

115.17	Hiring and promotion decisions
	Auditor Overall Determination: Meets Standard

Auditor Discussion

115.17(a) (e)(h)

DIRECTIVE AND DOCUMENT REVIEW:

Agency Directives and BOP PREA Plan.

Supporting Documentation.

FINDINGS:

PS 3000.03 Human Resource Management Manual, PS 3420.11, Standards of Employee Conduct, the Pre-Employment Guide, SF85P (Questionnaire for Public Trust Positions) and a BOP recruitment document address the requirements of the standard. All employees who have contact with inmates have had a full field background investigation in addition to fingerprinting and inquiry into the FBI's National Crime Information Center (NCIC). Employee backgrounds are re-checked every five years. Contractors and volunteers who have regular contact with inmates also have criminal background checks completed prior to having contact with inmates. Volunteer and contractor background checks are repeated yearly. The facility does not hire or promote anyone who may have contact with inmates and does not enlist the services of any contractor who may have contact with inmates who has engaged in any type of sexual abuse/harassment (no exceptions). Employees have a duty to disclose such misconduct and material omissions regarding such misconduct would be grounds for termination. Submission of false information by any applicant is grounds for not hiring the applicant.

The Agency Head designee was interviewed and confirmed that the agency HR attempts to contact prior employers for information on substantiated allegations of sexual abuse or resignations which occurred during a pending investigation of sexual abuse. The Agency Head designee also confirmed that the agency provides 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. The agency notifies appropriate licensing/certifying agencies when professional staff members are terminated for substantiated allegations of sexual abuse or sexual harassment. A review of policy, personnel forms, and relevant supporting documentation, including staff interviews, confirm compliance with this standard.

115.17(b)

DIRECTIVE AND DOCUMENT REVIEW:

Agency Directives and BOP PREA Plan.

INTERVIEWS:

Agency Head designee.

FINDINGS:

Agency Directives and BOP PREA Plan address this provision. Agency Head designee reported the agency has incorporated and implemented the "Affirmative Duty to Disclose," which all staff were required to affirm and sign. The form includes a "material omissions" clause.

115.17(c)

DIRECTIVE AND DOCUMENT REVIEW:

Agency Directives and BOP PREA Plan.

INTERVIEWS:

Agency Head.

FINDINGS:

Agency Directives and BOP PREA Plan address this provision. The agency directive requires job applicants to have background checks completed looking at any issue of prior sexual misconduct. The background checks are completed prior to any inmate contact. All contractors are screened by using the same process.

115.17(d)

DIRECTIVE AND DOCUMENT REVIEW:

Agency Directives and BOP PREA Plan.

INTERVIEWS:

Agency Head designee.

FINDINGS:

Agency Directive(s) and BOP PREA Plan address(es) the elements of this provision. Agency directive defines staff to include volunteer or contracted program services staff. All staff are also subjected to a criminal background check.

115.17(f)

DIRECTIVE AND DOCUMENT REVIEW:

Agency Directives and BOP PREA Plan. HR Files.

INTERVIEWS:

Agency Head designee.

FINDINGS:

Agency Directive(s) and BOP PREA Plan address(es) this provision.

	<p>The application process includes the "Affirmative Duty to Disclose" form for new hires, volunteers and contractors, and a review of the HR files indicated this process was being implemented. The HR files reviewed indicated the forms had been signed in accordance with directive.</p> <p>A review of agency directives and HR files, and Agency Head designee interview, indicate the practice is in place and meets the requirements of this provision.</p> <p>115.17(g)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Agency Directives and BOP PREA Plan.</p> <p>FINDINGS:</p> <p>Agency Directives and BOP PREA Plan address this provision. Agency directive defines staff to include volunteer or contracted program services staff.</p>
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115.18	Upgrades to facilities and technologies
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>115.18(a)</p> <p>INTERVIEWS:</p> <p>Interviews with the Agency Head designee confirm that the standard is being met.</p> <p>FINDINGS:</p> <p>The agency considers how all new facility designs and technology upgrades may enhance the Bureau's ability to protect against sexual abuse. In existing institutions, we review all "Substantiated" and "Unsubstantiated" cases of inmate sexual abuse to determine if modifications to design or the addition or upgrade of technology would help prevent a similar occurrence in the future.</p> <p>115.18(b)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Video Surveillance Schematic.</p> <p>INTERVIEWS:</p> <p>Interviews with the Agency Head designee confirm that the standard is being met.</p> <p>FINDINGS:</p>

	<p>Institution reviews are ongoing to determine if upgrades or additions to our existing technology would enhance the protection of inmates from incidents of sexual abuse. The technology serves as a deterrent but also allows us to identify unreported victims and perpetrators of sexually abusive behavior. It also aids in successful criminal prosecutions. It is recommended that BOP receive the funding to procure additional cameras and an inmate RFID system to enhance the safety and security of the staff and inmates for each of its institutions.</p>
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115.42	Use of screening information
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.42(a)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Agency Directive and the PREA Screen Tool.</p> <p>INTERVIEWS:</p> <p>Agency PREA Coordinator.</p> <p>FINDINGS:</p> <p>PS 5324.12 addresses the requirement of the standard. The information obtained in the inmate screening process is used to make individualized determinations to ensure the inmates safety. This information is used to make decisions to place each inmate in appropriate housing, work, and program assignments. A classification committee makes the placement decisions. Agency PREA Coordinator reported information secured through the screening process is used to determine the need for additional medical or mental health follow-up, and to make classification decisions based on risk factors.</p> <p>115.42(b)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Agency Directives and BOP PREA Plan.</p> <p>INTERVIEWS:</p> <p>Agency PREA Coordinator.</p> <p>FINDINGS:</p> <p>Agency Directive(s) and BOP PREA Plan address(es) this provision. By policy, special housing is used as a last resort and staff look for other options, such as housing unit</p>

	<p>changes. Agency PREA Coordinator reported the welfare of the inmate is always a high consideration. Medical and mental health are to conduct daily visits for any inmates placed in special housing for PREA risk factors.</p> <p>115.42(c)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Agency Directives and BOP PREA Plan.</p> <p>INTERVIEWS:</p> <p>Agency PREA Coordinator.</p> <p>FINDINGS:</p> <p>Agency Directive(s) and BOP PREA Plan address(es) this provision. Agency PREA Coordinator reported the facility does not have specific housing units designated for lesbian, gay, bisexual, transgender, or intersex inmates. All housing, program and work assignments are made on a case-by-case basis.</p>
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115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.66(a)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Agency Directives and BOP PREA Plan.</p> <p>INTERVIEWS:</p> <p>Agency Head.</p> <p>FINDINGS:</p> <p>The Collective Bargaining Agreement (CBA) examined by the auditor, between the Federal Bureau of Prisons and Council of Prison Locals, American Federation of Government Employees, dated July 21, 2014-July 20, 2017, complies with this standard. The agreement does not limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted. The auditor was advised that the CBA is currently being renegotiated and will contain the required language in its final form.</p>

115.87	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.87(a and c)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Agency Directives and BOP PREA Plan.</p> <p>FINDINGS:</p> <p>PS 5324.12 addresses the requirement of the standard. As confirmed by a review of documents, BOP collects accurate, uniform data for every allegation of sexual abuse/ harassment by using a standardized instrument. The agency tracks information concerning sexual abuse using data from the SIS department, the agency's Office of Internal Affairs and SENTRY, the BOP's computerized data management program. The data collected includes the information necessary to answer all questions from the most recent version of the Survey of Sexual Violence, conducted by the Department of Justice.</p> <p>The agency aggregates and reviews all data annually. Upon request, the agency would provide all such data from the previous calendar year to the Department of Justice no later than June 30.</p> <p>115.87(b)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Agency Directives and BOP PREA Plan.</p> <p>FINDINGS:</p> <p>Agency Directive(s) and BOP PREA Plan address(es) this provision. A review of the facility tracking information reflected a comprehensive system designed to maintain various elements for the required data for sexual abuse and sexual harassment allegations.</p> <p>115.87(d)</p> <p>Agency Directives and BOP PREA Plan.</p> <p>FINDINGS:</p> <p>Agency Directive(s) and BOP PREA Plan address(es) this provision. A review of the agency website reflects the comprehensive report is published and available to the public for all serious incidents to include sexual abuse and sexual harassment allegations. The annual PREA reports can be found at https://www.bop.gov/inmates/custody_and_care/sexual_abuse_prevention.jsp.</p>

	<p>115.87(e)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Agency Directives and BOP PREA Plan.</p> <p>FINDINGS:</p> <p>Agency Directive(s) and BOP PREA Plan address(es) this provision.</p> <p>115.87(f)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Agency Directives and BOP PREA Plan.</p> <p>FINDINGS:</p> <p>Agency Directive(s) and BOP PREA Plan address(es) this provision.</p>
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115.88	Data review for corrective action
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>115.88(a)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Agency Directives and BOP PREA Plan. Annual report.</p> <p>INTERVIEWS:</p> <p>Agency PREA Coordinator.</p> <p>FINDINGS:</p> <p>Agency Directive(s) and BOP PREA Plan address(es) this provision. A review of the annual report reflects all the elements required by this provision.</p> <p>Staff interviewed reported in detail the process followed when reviewing the data, identifying problem areas and corrective action, and preparing the annual report.</p> <p>115.88(b)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Agency Directives and BOP PREA Plan.</p> <p>FINDINGS:</p>

	<p>Agency Directive(s) and BOP PREA Plan address(es) this provision.</p> <p>115.88(c)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Agency Directives and BOP PREA Plan.</p> <p>Annual report.</p> <p>INTERVIEWS:</p> <p>Agency PREA Coordinator.</p> <p>FINDINGS:</p> <p>PS 5324.12 addresses the requirement of the standard. The Bureau of Prisons and the institution reviews and assesses all sexual abuse/sexual harassment data at least annually to improve the effectiveness of its sexual abuse prevention, detection, and response policies, to identify any trends, issues, or problematic areas and to take corrective action if needed. The Institution PREA Compliance Manager (IPCM) forwards data to the respective BOP Regional PREA Coordinator and then to the National BOP PREA Coordinator. An Annual Report has been prepared and placed on the BOP website. The auditor reviewed the Annual Report. The report can be found at the following website address: www.bop.gov.</p> <p>115.88(d)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Agency Directives and BOP PREA Plan.</p> <p>INTERVIEWS:</p> <p>Agency PREA Coordinator.</p> <p>FINDINGS:</p> <p>Agency Directive(s) and BOP PREA Plan address(es) this provision. Agency PREA Coordinator reported the BOP complies with FOIA and all other applicable laws, rules, and regulations. No information that identifies victims or perpetrators is included in the report, nor is any information that could potentially threaten the security of an institution. The reports would reflect only basic demographic information.</p>
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115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

115.89(a)

DIRECTIVE AND DOCUMENT REVIEW:

Agency Directives and BOP PREA Plan.

INTERVIEWS:

Agency PREA Coordinator.

FINDINGS:

PS 5324.12 addresses the requirement of the standard. The National PREA Coordinator reviews data compiled by each BOP facility, from SENTRY, from each Regional PREA Coordinator, from the Information Technology and Data Division of the BOP and from the Office of Internal Affairs and issues a report to the Director on an annual basis. Facility data is maintained in locked files or on computer databases that are user ID and password protected. Agency PREA data is securely retained and is published on the BOP website after removing all personal identifying information.

115.89(b)

DIRECTIVE AND DOCUMENT REVIEW:

Agency Directives and BOP PREA Plan.

Aggregated data on website.

FINDINGS:

Agency Directive(s) and BOP PREA Plan address(es) this provision. The data posted on the agency website includes agency data from the previous year.

115.89(c)

DIRECTIVE AND DOCUMENT REVIEW:

Agency Directives and BOP PREA Plan.

Aggregated data on agency website.

FINDINGS:

Agency Directive(s) and BOP PREA Plan address(es) this provision. The data posted on the agency website has all personal identifiers removed.

115.89(d)

DIRECTIVE AND DOCUMENT REVIEW:

Agency Directives and BOP PREA Plan.

Aggregated data on agency website.

	<p>FINDINGS:</p> <p>Agency Directive(s) and BOP PREA Plan address(es) this provision. The data and records collected are to be retained in accordance with agency retention requirements.</p>
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115.401	Frequency and scope of audits
	<p>Auditor Overall Determination:</p>
	<p>Auditor Discussion</p>
	<p>115.401(a)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Aggregated data on website.</p> <p>FINDINGS:</p> <p>The agency ensured that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once.</p> <p>115.401(b)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Aggregated data on website.</p> <p>FINDINGS:</p> <p>This is the Agency's first year of cycle 4. The agency is following their audit cycle and planned future audits. The data was posted on the agency website.</p>

115.403	Audit contents and findings
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>115.403(f)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>There is no agency directive for this provision.</p> <p>FINDINGS:</p> <p>BOP has published on its agency website all Final Audit Reports within 90 days of</p>

	issuance by the Auditor. This information is made available to the public and is in accordance with 28 C.F.R. § 115.405.
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Appendix: Provision Findings**115.11 (b) Zero tolerance of sexual abuse and sexual harassment; PREA coordinator**

	Has the agency employed or designated an agency-wide PREA Coordinator?	yes
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
	Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?	yes

115.12 (a) Contracting with other entities for the confinement of inmates

	If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	na
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115.12 (b) Contracting with other entities for the confinement of inmates

	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	na
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115.17 (a) Hiring and promotion decisions

	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity	yes

	described in the two bullets immediately above?	
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
115.17 (b)	Hiring and promotion decisions	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes
115.17 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
115.17 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes
115.17 (e)	Hiring and promotion decisions	

	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes
115.17 (f)	Hiring and promotion decisions	
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
115.17 (g)	Hiring and promotion decisions	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
115.17 (h)	Hiring and promotion decisions	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
115.18 (a)	Upgrades to facilities and technologies	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	yes
115.18 (b)	Upgrades to facilities and technologies	
	If the agency installed or updated a video monitoring system,	yes

	electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	
115.42 (c)	Use of screening information	
	When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems?	yes
115.66 (a)	Preservation of ability to protect inmates from contact with abusers	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
115.87 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.87 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.87 (c)	Data collection	

	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
115.87 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
115.87 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	na
115.87 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes
115.88 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	yes
115.88 (b)	Data review for corrective action	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes

115.88 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
115.88 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
115.89 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
115.89 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.89 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.89 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	Frequency and scope of audits	
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes
115.401 (b)	Frequency and scope of audits	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	yes

	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	na
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	na
115.403 (f)	Audit contents and findings	
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)	yes