

Prison Rape Elimination Act (PREA) Audit Report

Adult Prisons & Jails

☐ Interim ☒ Final

Date of Report March 8, 2022

Auditor Information

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Company Name: Click or tap here to enter text.	
Mailing Address: 1145 Eastland Avenue	City, State, Zip: Akron, Ohio 44305
Telephone: 330-618-7456	Date of Facility Visit: October 18-22, 2021

Agency Information

Name of Agency: Bristol County Sheriff's Office		Governing Authority or Parent Agency (If Applicable):	
Physical Address: 400 Faunce Corner Road		City, State, Zip: North Dartmouth, MA 02747	
Mailing Address: 400 Faunce Corner Road		City, State, Zip: North Dartmouth, MA 02747	
Telephone: 508-995-6400		Is Agency accredited by any organization? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
The Agency Is:	<input type="checkbox"/> Military	<input type="checkbox"/> Private for Profit	<input type="checkbox"/> Private not for Profit
<input type="checkbox"/> Municipal	<input checked="" type="checkbox"/> County	<input type="checkbox"/> State	<input type="checkbox"/> Federal

Agency mission: The Bristol County Sheriff's Office is an organization of public safety professionals committed to serve and protect the people of Bristol County. The Bristol County Sheriff's Office holds itself accountable to the principles of integrity, professionalism, compassion, and teamwork.

Agency Website with PREA Information: <http://www.bcsso-ma.us>

Agency Chief Executive Officer

Name: Thomas M. Hodgson	Title: Sheriff
Email: Sheriff@bcsso-ma.org	Telephone: 508-995-1311

Agency-Wide PREA Coordinator

Name: Sean Stubbart	Title: PREA Coordinator
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Email: SeanStubbert@bcso-ma.org	Telephone: 508-995-6400 ext. 2405		
PREA Coordinator Reports to: Superintendent Steven Souza	Number of Compliance Managers who report to the PREA Coordinator 0		
Facility Information			
Name of Facility: Dartmouth Correctional Complex			
Physical Address: Dartmouth: 400 Faunce Corner Road North Dartmouth, Massachusetts 02747 Ash Street: 226 Ash Street New Bedford, Massachusetts 02720			
Mailing Address (if different than above): Click or tap here to enter text.			
Telephone Number: Dartmouth: 508-995-6400 Ash Street: 508-996-6704			
The Facility Is:	<input type="checkbox"/> Military	<input type="checkbox"/> Private for profit	<input type="checkbox"/> Private not for profit
<input type="checkbox"/> Municipal	<input checked="" type="checkbox"/> County	<input type="checkbox"/> State	<input type="checkbox"/> Federal
Facility Type:	<input checked="" type="checkbox"/> Jail	<input type="checkbox"/> Prison	
Facility Mission: The Bristol County Sheriff's Office is an organization of public safety professionals committed to serve and protect the people of Bristol County. The Bristol County Sheriff's Office holds itself accountable to the principles of integrity, professionalism, compassion, and teamwork.			
Facility Website with PREA Information: http://www.bsco-ma.us			
Warden/Superintendent			
Name: Steven Souza		Title: Superintendent	
Email: StevenSouza@bcso-ma.org		Telephone: 508-995-6400 ext. 2325	
Facility PREA Compliance Manager			
Name: Michael Foley		Title: ADS Policy Development and Compliance	
Email: MichaelFoley@bcso-ma.org		Telephone: 508-995-6400 ext. 2408	
Facility Health Service Administrator			
Name: Maureen Atkins		Title: Health Services Administrator	
Email: MaureenAtkins@bsco-ma.org		Telephone: 508-995-6400 ext. 2634	
Facility Characteristics			
Designated Facility Capacity: 1,598 Dartmouth: 1,372 Ash Street: 226		Current Population of Facility: 674 (first day of audit) Dartmouth: 592 Ash Street: 82	

Number of inmates admitted to facility during the past 12 months		7,557	
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for 30 days or more:		1,422	
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for 72 hours or more:		4,835	
Number of inmates on date of audit who were admitted to facility prior to August 20, 2012:		0	
Age Range of Population:	Youthful Inmates Under 18: N/A	Adults: 18-72	
Are youthful inmates housed separately from the adult population?		<input type="checkbox"/> Yes	<input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Number of youthful inmates housed at this facility during the past 12 months:		0	
Average length of stay or time under supervision:		31 days	
Facility security level/inmate custody levels:		Min/Med/Max	
Number of staff currently employed by the facility who may have contact with inmates:		402 Dartmouth: 359 Ash Street: 53	
Number of staff hired by the facility during the past 12 months who may have contact with inmates:		19	
Number of contracts in the past 12 months for services with contractors who may have contact with inmates:		3	
Physical Plant			
Number of Buildings: 5		Number of Single Cell Housing Units: 5	
Number of Multiple Occupancy Cell Housing Units:		21	
Number of Open Bay/Dorm Housing Units:		1	
Number of Segregation Cells (Administrative and Disciplinary):		153: Dartmouth: 138, Ash Street: 15	
Description of any video or electronic monitoring technology (including any relevant information about where cameras are placed, where the control room is, retention of video, etc.): The complex is monitored by exterior and interior cameras. The DHOC has 311 cameras (258 interior/ 53 exterior). The cameras are monitored through the control center. The Ash Street Jail has 26 cameras (18 interior / 8 exterior). The majority of the cameras are fixed. An expansion of the video monitoring system occurred since the previous audit adding 100 additional cameras and changing out the fixed cameras. Cameras are located throughout the facility including hallways, intake, kitchen, medical, commissary, laundry, program areas, special management housing, and housing areas. The outside perimeter and administrative building are also observed through cameras. Cameras operate on a thirty (30) day recording system with certain areas that are able to record for a longer period of time.			
Medical			
Type of Medical Facility:		Health Services Unit	
Forensic sexual assault medical exams are conducted at:		Local hospital: St. Luke's Hospital New Bedford, MA	
Other			

Number of volunteers and individual contractors, who may have contact with inmates, currently authorized to enter the facility:	0 Volunteers (due to COVID), 87 Contractors
Number of investigators the agency currently employs to investigate allegations of sexual abuse:	8

Audit Findings

Audit Narrative

The Prison Rape Elimination Act (PREA) Audit of the Dartmouth Correctional Complex in North Dartmouth, Massachusetts, a facility under the operation of the Bristol County Sheriff's Office was conducted on October 18-22, 2021, by Barbara King, a Department of Justice (DOJ) certified PREA Auditor. The purpose of the audit was to determine compliance with the DOJ PREA standards. The audit process began with communication between the PREA Coordinator and the Assistant Deputy Superintendent (ADS) Policy Development and Compliance in August 2020. The Auditor explained the audit process detailing that audit compliance is assessed through written policies and procedures, observed practices, and interviews with inmates and staff. The agency houses male and female inmates for Bristol County, local counties, and cities. The agency no longer houses U.S. Immigration and Customs Enforcement (ICE) residents as of spring 2021. The facility does not house juveniles/youthful offenders. This is the third PREA audit for the facility. The audit on-site visit was conducted during the COVID pandemic and under the facility's COVID operating protocols.

The Dartmouth Correctional Complex is comprised of two locations the Dartmouth House of Corrections and Dart Women's Center buildings and the Ash Street Jail. The Dartmouth House of Corrections, Dart Women's Center, and ICE Center is located in North Dartmouth, Massachusetts and the Ash Street Jail is located in New Bedford, Massachusetts six miles from the main complex. All the facilities are under the management of the same agency, same Superintendent, operates with the same policies and procedures, same inmate population, same agency staff, same agency mission, and has the same inmate reporting mechanisms. Dartmouth House of Corrections (DHOC) is the main facility that houses male inmates and female restricted housing. The Ash Street Jail is the agency's regional intake area and is the initial booking for the Sheriff's Office. This building is operated as a housing unit of the Dartmouth House of Corrections. The male inmates that are housed at Ash Street Jail are transfers from the Dartmouth House of Corrections building after being screened for housing placement at Ash Street Jail. The Dart Women's Center is the female housing building. The ICE Center is closed. The referral of Dartmouth Correctional Complex in the report is for the correctional complex as a whole and when the information pertains to both locations. The specific facility name (Dartmouth or Ash Street Jail) will be used when the information refers only to that location. When information is provided for both locations, the Dartmouth numbers will be provided first then Ash Street Jail (Dartmouth/ Ash Street). The Dartmouth Correctional Complex operates under the same administrative table of organization.

The audit notices in English and Spanish were sent to the agency's PREA Coordinator on September 10, 2021. The facility acknowledged receiving the audit notices and the notices were posted throughout the facilities. The PREA Coordinator emailed photos of the postings for verification to the Auditor on September 13, 2021. The Auditor observed the postings throughout the facilities during the tour of the facilities.

About a month prior to the audit, the Auditor received the PREA Pre-Audit Questionnaires and supporting documents through an electronic file provided by the agency. The file contained a master folder of supporting documentation for all forty-three PREA standards. The master folder contained separate files for each standard that included relevant policies and procedures and supporting documentation to demonstrate compliance. After the review of the Pre-Audit Questionnaires (Dartmouth and Ash Street

Jail) and documentation, the Auditor emailed the agency a Pre-audit Review Notes document requesting further documentation for clarification and review on various standards on October 9, 2021. Information was provided electronically prior to the audit and the remaining documentation was provided during the on-site audit visit.

The Auditor reviewed the PREA information on the Bristol County Sheriff's Office website prior to the audit; <http://www.bcsso-ma.us>. The PREA information is under the Jail Information tab. The website includes general PREA information; how to report allegations of sexual abuse/harassment; a section which outline the investigative protocols; and the 2020 PREA Annual Reports; contact information reporting a PREA incident. The Auditor contacted Just Detention International about any information regarding the facility; none was noted. Prior to the on-site visit, contact was made with the PREA Coordinator and ADS Policy Development and Compliance to discuss the audit process and set a tentative time schedule for the on-site audit.

The agency policies utilized for the policy and procedure review and documentation were:

- 03.06.00 Prevention of Inmate Sexual Abuse and Sexual Harassment
- 03.01.00 Human Resource Management
- 09-03-00 Inmate Searches
- 09.23.00 Control of Evidence
- 10.01.07 Restricted Housing
- 12.14.00 Transgender, Intersex, and Gender Non-Conforming Inmates, Detainees, and Prisoners
- 13.02.00 Grievances Regarding Allegations of Sexual Abuse
- CPS Policy J-F-06 Response to Sexual Abuse

On October 6, 2021, the Auditor requested the following information be provided: the daily population report, staff roster to include all departments (include title, shift, and good days), inmate roster by housing unit and alpha listing, list of staff who perform risk assessments, list of medical/mental health staff, list of contractors and volunteers (include times available during audit), list of inmates with a PREA classification, list of lesbian, gay, bisexual, transgender, and intersex (LGBTI) inmates, list of PREA allegations in the past 12 months (type of case, victim name, investigation outcome), list of inmates that reported sexual abuse, list of disabled and limited English proficient (LEP) inmates, list of the first responders from the reported allegations, and a list of how the allegations were reported (i.e. verbal to staff, grievance, hotline...). The facility provided the requested facility information electronically on October 15, 2021, and during a meeting held the PREA Coordinator the evening prior to the audit. This information was utilized to establish interviews schedules for the random selection of inmates and staff to be interviewed (random and specific interviews protocols).

Prior to the on-site visit, the Auditor and the PREA Coordinator met to discuss the on-site visit, the audit schedule, and the COVID pandemic measures in place, and the safety requirements to enter the facility. The discussion included the plan to interview inmates at the Dartmouth House of Corrections in each housing unit during the tour to reduce the inmate movement within the facility. Inmates at the Dart Women's Center and Ash Street Jail would be interviewed in an office.

Before the start of the audit, an in-briefing was held. In attendance were the Superintendent, Director of Audits and Accreditations, Assistant Superintendent/Security (Colonel), Assistant Deputy Superintendent (ADS)/Policy Development and Compliance, PREA Coordinator, Policy Compliance Manager, Health Services Administrator, Major/Sheriff's Investigation Unit, ADS Women's Center, ADS Ash Street Jail,

Administration Assistant for Policy and Procedures, Director, and Major/Disciplinary Officer. The Auditor provided an overview of the audit process and the methodology to be used to demonstrate PREA compliance to those present. The Auditor explained the audit process is designed to not only assess compliance through written policies and procedures but also to determine whether such policies and procedures are reflected in the knowledge and practices of staff at all levels. The Auditor further explained compliance with the PREA standards will be determined based on the review of policy and procedures, observations of facility practices and the physical plant during the facility tour, documentation review, and conducting both staff and inmate interviews. A detailed schedule for the audit was discussed including the facility tour, interview schedules, and review of audit documentation. It was established that the Auditor would meet with the PREA Coordinator, ADS Policy Development and Compliance, and any identified staff at the close of each day to review the day's activities and prepare for the next audit day. The facility was informed no correspondence was received from an inmate, staff, or outside individual prior to the audit. Key facility staff during the audit included the PREA Coordinator, ADS Policy and Compliance, Policy Compliance Manager, Superintendent, Director of Audits and Accreditations, Assistant Deputy Superintendents, Majors, and Captains.

Due to COVID protocols, the Auditor and facility staff discussed the best way to conduct inmate interviews with minimal inmate movement. The facility was operating under restricted inmate movement. The Auditor selected to conduct inmate and random staff interviews in each housing unit as we toured the Dartmouth House of Corrections (DHOC). The Ash Street Jail and Dart Women's Center interviews will be conducted in a private office. The DHOC Housing Units 1 East and 2 East were closed. There were no inmates housed in Housing Unit EA. Housing Unit EC housed COVID positive inmates in quarantine. No inmates were interviewed from this housing unit.

The facility administration provided information to the Auditor regarding the facility and the audit period. The facility administration shared there were no cross-gender pat-down searches conducted during the audit year, no inmates were placed or housed in segregation housing for risk during the audit period, and there were no allegations that required a forensic exam. The facility does not house juveniles.

The facility tour was completed at Dartmouth House of Corrections (DHOC) and Dart Women's Center the first two days of the on-site audit and the Ash Street Jail on the third. Follow-up observations, interviews, and documentation review occurred on the last two days of the audit. The housing units, program areas, service areas, food service, control center, medical, visitation, and intake areas were toured by the Auditor. During the tour, the Auditor made visual observations of cameras, mirrors, PREA notices, and posted PREA information throughout the facility including all service, program, and housing areas. The Auditor examined sight lines for potential blind-spots, cross-gender viewing, the officers post sight lines, and camera locations. At DHOC, the Auditor identified a supervision issue with the coverage of an officer's office windows eliminating visually supervision into the housing unit. The facility corrected the issue on-site by having the file cabinet moved and window coverings removed. The handicapped showers and medical watch cells (3 and 4) had potential cross-gender viewing. The facility corrected the issue on-site by providing magnetic covers for the handicapped shower door windows. The facility placed adhesive paper on the lower section of the medical watch cells glass windows blocking the view of the toilets and provided photos for documentation on November 23, 2021. The Auditor suggested a mirror to provide a better supervision view in classroom D, the facility installed a mirror to assist with the supervision view. At Ash Street Jail, both classrooms had blind corners on the front wall opposite the classroom door. The facility bought and installed mirrors to eliminate the blind corners and enhance supervision view, the facility provided photos for documentation on November 9, 2021. The Auditor

tested the reporting and the emotional support services numbers posted in the housing unit. The phones required an inmate pin to be used for any phone calls, which would identify an inmate and not allow an anonymous call. The facility corrected the issue by allowing the PREA numbers to be dialed without entering an inmate pin providing the inmate with a private, free, and anonymous reporting method. This was accomplished while the Auditor was on-site. A posting in the housing unit informs the inmates that "Calls are subject to monitoring and recording."

During the facility tour, the Auditor spoke to random staff and inmates regarding PREA education, reporting methods, response to an allegation, and facility practices. The Auditor observed cross-gender announcements made when entering housing units. The housing units have PREA information posted strategically in the housing units providing inmates readily accessible PREA educational information, zero tolerance policy, emotional support services available, how to report an incident, methods for reporting incidents, reporting numbers and addresses, protection from retaliation, and reference to the Inmate Handbook for additional information. The information informs the inmates they can remain anonymous when reporting an incident. All information is provided in English, Spanish, and Portuguese. Detailed information regarding these services will be outlined within the corresponding PREA standards noted throughout the report. The Auditor also reviewed the housing unit logbooks to verify supervision and unannounced rounds by staff. The logbooks documented unannounced rounds were conducted by immediate line supervisors and supervision rounds by officers.

All required facility staff and inmate interviews were conducted during the five-day on-site audit. The inmate interviews were held in rooms that afforded privacy for the interviews; at Dartmouth the interviews were held in a housing unit office and at Ash Street they were held in general office off the program room. Staff interviews were held in offices within the housing units and the administrative conference room at Dartmouth and the program room at Ash Street, both locations afforded privacy for the staff interviews. The Auditor utilized the PREA Auditor Handbook table for inmate interviews for determination of the number of required interviews. Inmate interviews were based on the inmate population size of 501-1,000 inmates; a requirement of 30 inmate interviews with at least 15 from the target groups and 15 random interviews. Thirty-five formal inmate interviews were conducted for 56 interview protocols and 38 inmates were informally interviewed during the facility tours, (10.8% of the 674 inmate population). Two inmates refused interviews. The random inmates were selected by the Auditor from the housing rosters and designated specialized lists of inmates provided by the facility. Random inmate interviews from different housing units (15: 9/6), Disabled and Limited English Proficient (7: 6/1), LGBTI (5: 5/0), Inmates Who Reported Sexual Abuse (1:1/0), and Who Disclosed Sexual Victimization (7:6/1) were interviewed. Interviews were not conducted for youthful offenders and inmates placed in segregation housing for risk. The complex does not house youthful offenders. There were no inmates placed or housed in segregation housing for risk during the audit period. The inmates interviewed knew the numerous methods to report, they acknowledged the zero-tolerance of sexual abuse and sexual harassment, and their right to be free from retaliation for reporting. The inmates acknowledged a risk screening was completed during the intake process and PREA education was provided which began at intake. Inmates also indicated they felt safe at the facility.

The Dartmouth Correctional Complex facilities operate under the same administrative table of organization. A total of 46 staff was formally interviewed for 48 interview protocols and an additional 16 informal staff interviews were conducted during the facility tours (15% of 402 staff). Staff were randomly selected from each of the three shift rosters and different departments within the facility (12). Additionally, specialized staff were interviewed including the Agency Head/Superintendent (1), PREA

Coordinator/PREA Compliance Manager (1), Intermediate-Higher Level Staff (6), Staff Cross Gender Searches (2), Medical and Mental Health (5), Human Resources (1), Volunteers/Contractors (6), Investigator (1), Staff Who Perform Risk Screening (3), Staff Who Supervise Segregated Housing (1), Incident Review Team (2), Staff Who Monitor for Retaliation (1), First Responders (2), and Intake staff (2). An interview with a contract monitor was not held, the facility does not contract to house inmates with another agency. The Agency Head and Warden interview protocols was conducted with the Superintendent. The PREA Coordinator and PREA Compliance Manager interview protocols was conducted with the PREA Coordinator. There were no staff that conducted cross-gender searches during the audit period, however, the Auditor interviewed two staff on the process. The random staff interviewed acknowledged they have received training and understood the PREA policies and procedures. They acknowledged their responsibilities to prevent, detect, report, and response to sexual abuse and sexual harassment. They understood their roles in reporting and responding to all allegations.

Interviews were also conducted with two community agencies. An interview was conducted with a representative of the St. Luke's Hospital of New Bedford regarding the SANE services provided at the hospital. The SANE nurse interviewed stated the hospital has SANEs working on shift within the emergency department and indicated all emergency room nurses are a trained SANE/SAFE. The statewide SANE Program is also available if a nurse is not available on duty or on-call. A state SANE staff is available within 3-4 hours and is dedicated only to that victim. An advocate will be provided to the victim upon request to provide emotional support through the forensic medical examination and investigation interviews. These services are provided through the New Bedford Women's Center. Through scheduled hours and on-call. There was no allegation that required a forensic examination during the audit period. A representative of the New Bedford Women's Center was interviewed which provides emotional support and a hotline to the inmates. The agency has a Memorandum of Understanding (MOU) with the New Bedford Women's Center to provide victim advocate services to inmates. Through an interview with a New Bedford Women's Center representative, she stated emotional support services is provided for a forensic exam at the hospital and the Center tries to mandate a follow-up face to face meeting however an inmate can decline. She also stated most emotional support services are provided over the phone to inmates at the facility, however, individual meetings can be set up.

There were eleven allegations reported during the audit period, ten within the facility and one report from another facility of an incident that occurred at Dartmouth. The ten allegations reported at the facility were one staff-on-inmate sexual abuse, six inmate-on-inmate sexual harassment, and three inmate-on-inmate sexual abuse. Eight cases had completed investigations, two cases were still open investigations, and one case was closed without an investigative outcome. The staff-on-inmate sexual assault was found unsubstantiated. Of the six inmate-on-inmate sexual harassment; two were substantiated, three were unsubstantiated, and one still open. One inmate-on-inmate sexual abuse cases was substantiated, and one was still open. The third inmate-on-inmate sexual abuse investigation had no outcome. The investigation was started and then the victim was released. The victim did not respond to Investigator's request for interviews. The case was closed pending contact with the victim. The case was referred to the Assistant District Attorney's office. The incident reported by another agency was an inmate-on-inmate sexual abuse. The case had previously been investigated and determined unsubstantiated. There were no cases that warranted prosecution. The Auditor reviewed the eleven administrative investigation files.

An exit meeting was conducted by the Auditor at the completion of the on-site visit with the PREA Coordinator, ADS Policy Development and Compliance, Policy Compliance Manager, Health Services Administrator, Major/Sheriff's Investigation Unit, ADS Women's Center, ADS Security, Administration

Assistant for Policy and Procedures, ADS Human Resource, Director, and Lieutenant/Training. While the Auditor could not give the facility a final finding, the Auditor did provide a preliminary status of their findings and request for further documentation needed to demonstrate compliance on ten standards. Standards 115.13, 115.15, 115.16, 115.17, 115.32, 115.42, 115.51, 115.63, 115.67, and 115.78 could not be cleared at the end of the on-site audit process. Recommendations were shared with the facility on five standards, 115.33, 115.41, 115.67, 115.73, and 115.81. Standard issues and recommendations of these standards will be addressed under the appropriate standard in the narrative section. The Auditor shared the inmate population felt safe at the facility and felt staff would be responsive if an allegation was made. The Auditor also shared that staff was professional and well trained in their PREA knowledge and responsibilities. The Auditor thanked the PREA Coordinator, Director of Audits and Accreditations, the facility administration, and the staff of the Dartmouth Correctional Complex for their work and commitment to the Prison Rape Elimination Act. The Auditor thanked the facility for the hospitality received and the professionalism provided by all staff during the visit.

The facility provided all the requested information to demonstrate compliance. Documentation of compliance for the outstanding standards were provided to the Auditor through email by the ADS Policy Development and Compliance. With the last documentation received on February 10, 2022. No further action was necessary.

The Auditor based the decision of standard compliance on the data gathered during the on-site audit; review of documentation; observations during the tour of the facility; interviews with staff and inmates; staff and inmate file reviews; review of investigative files, and the agency and facility's policy and practices review.

The Auditor utilized the Auditor Compliance Tool, Instructions for the PREA Audit Tour, the Interview Protocols, Process Map, Auditors Summary Report, and the PREA Auditor Handbook for guidance during the audit process. These documents were available through the National PREA Resource Center.

Facility Characteristics

The Dartmouth Correctional Complex is comprised of a main facility Dartmouth House of Corrections (DHOC) with three satellite buildings: Dart Women's Center, Immigration Custom Enforcement Detention Center (ICE), and the Ash Street Jail. The Complex is under the operation of the Bristol County Sheriff's Office. The Dartmouth House of Corrections, Dart Women's Center and the ICE Center is located in the city of North Dartmouth and the Ash Street Jail in New Bedford, Massachusetts. The two locations are about six miles apart and driving distance about twelve minutes. The Dartmouth House of Corrections was opened in August 1990. It was built to house 365 male and female inmates. In November 1998, a modular unit was added which added 300 beds for the complex. In 2002, a facility was open to house female inmates. This building was the Bristol County Pre-Release Center and transitioned into the Dart Women's Center. The Dart Women's Center provided an additional 122 female inmate beds. The Complex is classified as a medium security general confinement facility for pre-trial and sentenced inmates. It houses female and male inmates 18 years of age or older. The Ash Street Jail only houses male inmates in general housing, a female inmate may be held in the intake and lock-up cells until court appearance the next morning. The ICE Center closed in the spring of 2021 and is not currently used for the housing of inmates/residents. The Dartmouth County Correctional Complex's design capacity is

1,598. The inmate population was 674 on the first day of the audit (DHOC: 554; Dart Women's Center: 38, and Ash Street Jail: 82). The average daily population for the audit period was 691.

The main facility DHOC is a 1,128-bed facility that houses male and female inmates convicted of crimes with a sentence of 2 ½ years or less, high security and pre-trial female inmates, and high security pre-trial male detainees. The facility is comprised of a master control, intake and booking area, kitchen, visitation area, law library, outdoor recreation, medical unit, medical administrative offices, laundry, fifteen housing units with one housing unit with sixteen single cells, a dorm, Health Services housing unit, the modular housing unit with four housing units, restricted housing unit, program and education areas, and the administration offices. Housing units HA (housing capacity of 82, intake unit), HB (82 max-security), GA (96 pre-trial), and GB (96), are general housing of double occupancy cells that house male inmates. The general housing units are two tiered and have a control desk that provides direct supervision. It is an open design with the administration offices and control desk in the open area overlooking the housing cells and dayroom. On the bottom tier are the showers, telephones, dayroom, informational bulletin boards, and one tier of double occupancy cells. The upper range is double occupancy cells. Each cell has a toilet that provides privacy from cross gender viewing. GC (96) is a dorm housing male inmates. This housing unit was the indoor gym previously. It has an officers' control desk providing direct supervision and a restroom area that includes showers, sinks, and toilets. The modular structure houses 416 inmates in four housing units, (1E, 2E, 1W, and 2W) each housing 104 inmates. Each housing unit has a dayroom, officer control desk providing direct supervision, program areas, administrative offices, and a housing range. The housing range off the dayroom has multiple occupancy rooms housing eight inmates. These sentenced inmates have progressed through an accountability-based classification system to earn a spot in the Residential Substance Abuse Program, Treatment Unit, the Pre-Release Program, and the facility's work crews are housed in these housing units. The showers and toilets are located to the right and left when entering the housing range. Privacy is provided to the inmates from cross gender viewing. Housing Unit 1E and 2E were closed and not housing inmates during the on-site audit. The dayrooms contain tables/seats, televisions, telephones, microwaves, and posters with facility and PREA information. The PREA informational posters are strategically located in the dayroom areas clearly visible for all inmates. The posted information (poster Report Sexual Abuse Now) includes the emotional support services contact information, zero tolerance policy, methods for reporting sexual misconduct including outside the agency, and the PREA reporting hotline. The posters are in English, Spanish, and Portuguese. This is a notice to the inmates that states, "Calls are subject to monitoring and recording."

Housing unit FA (66) is the male protective custody unit consisting of double bunked cells. Housing unit FB (64) is the restricted male housing unit with double bunked cells. Housing unit EC (32) has sixteen double occupancy cells for male restricted housing for inmates in disciplinary status and under investigation. Housing unit EE (16) is single cell restricted housing for male inmates on segregation status. Housing unit ED (16) has eight double occupancy cells utilized for male inmates that have behavioral and mental health needs. Housing units EA (16) and EB (38) are double occupancy cells for housing female inmates. EA is the female inmate restricted housing. EB is the female restricted disciplinary housing. The Health Services housing unit consists of two dorms of eleven beds and four single housing cells. The supervision in these units is through direct and indirect supervision by two officers, one in control and one within the unit. These units also have the PREA informational posters strategically located within the units clearly visible for all inmates. The posted information (poster Report Sexual Abuse Now) includes the emotional support services contact information, zero tolerance policy, methods for reporting sexual misconduct including outside the agency, and the PREA reporting hotline.

The posters are in English, Spanish, and Portuguese. This is a notice to the inmates that states, "Calls are subject to monitoring and recording."

The Dart Women's Center building is a two-story structure located across the parking lot from the main facility. The first floor consists of the kitchen, dining room, dayroom, classrooms, two housing wings, and the staff control desk area. The second floor has two housing wings, administrative offices, and a staff control area. The structure houses 122 medium security female inmates in four housing areas. Each housing wing is comprised of double occupancy cells. The A Wing (sentenced, programming/working) has twelve double occupancy cells housing twenty-four pre-trial inmates. The B Wing (sentenced, programming/working) has sixteen double occupancy cells housing thirty-two sentenced inmates. The C Wing (pre-trial) has twelve double occupancy cells housing twenty-four sentenced inmates. The D Wing (pre-trial) has sixteen double occupancy cells housing thirty-two pre-trial inmates. Each wing has a bathroom area, dayroom at the end of the wing, and the double occupancy cells. The bathroom area has single shower stalls with curtains and toilets with half walls that provide privacy for the inmates. PREA information and audit notices are posted in the housing units. Each cell has a toilet that provides privacy for the inmate. Program and service staff facilitate a variety of programs including a Residential Substance Abuse Treatment Program, GED education classes, parenting, life skills, anger management, AA, NA, faith-based services, HIV Prevention and Awareness and a victim domestic violence program. There is an officer's station on each floor that provides supervision for the housing units on the housing floor. Supervision is indirect with supervision rounds conducted. The dayrooms contain the PREA informational posters strategically located clearly visible for all inmates. The posted information (poster Report Sexual Abuse Now) includes the emotional support services contact information, zero tolerance policy, methods for reporting sexual misconduct including outside the agency, and the PREA reporting hotline. The posters are in English, Spanish, and Portuguese. This is a notice to the inmates that states, "Calls are subject to monitoring and recording."

The building previously the ICE Center, is a single-story building located about half-way up the Complex driveway from the main building that housed 132 detainees. The building has two (2) open floor dormitories located on each end of the structure. There is a control center located in the center of the building along with administrative offices, medication room, and medical area. Each dorm can house sixty-six inmates on bunk beds arranged in a barracks style formation. An officer's control desk is located in each dorm which is positioned on a platform station. The building is closed and not utilized for housing inmates currently.

The third satellite building is the Ash Street Jail that is located about six miles from the main facility. The facility is located in a residential area of New Bedford and was built in 1828. It is known as the oldest operating jail in the United States. This facility is operated as a housing unit of the DHOC. The facility is comprised of a main building and several smaller buildings. Within the main building is six general housing units, medical, property, visitation, and program services. The two classrooms had blind corners on the front wall opposite the classroom door. The facility bought and installed mirrors to eliminate the blind corners and enhance supervision view, the facility provided photos for documentation on November 9, 2021. The facility also operates the regional intake and booking for local police departments. These inmates are held on a first-floor tier closest to the control central and staff post of the facility until their court appearance. That is usually the next morning, it may be longer on weekends, but never more than 72 hours. On the day of the audit there were no inmates in the lock-up range, inmates booked in the previous day were already transported to court by 9:00 am. The control center is on the first floor that contains the supervisors and officers' workstations. Supervision rounds are made every 15 minutes and

documented through a wand (Pipe II) system. The officer must walk the length of each tier where the wand reading location is located. Four housing units contain four tiers of single cells. Each of these housing unit (range) is a four tier (alleys) stacked design with open visibility from the bottom floor walkway. Housing Unit 1, tiers 1-4 hold overnight arrestees. Tier 1 is used for female arrestees. Housing Unit 2, tiers 5-8 house sentenced inmates. Housing Unit 3, tiers 9-12 house sentenced inmates. Housing Unit 4, tiers 13-16 house sentence inmates that are jail workers for inside the facility. Tiers 1-4 Tiers 1, 2, 5, 6, 7, and 8 all have fifteen single cells. Tiers 3 and 4 have sixteen single cells. Tier 9 has eight (8) single cells. Tiers 10, 11, 12, and 14 have eleven single cells. Tiers 15 and 16 have twelve single cells. Housing units PL3 (outside and kitchen workers) and PL4 (laundry workers) each have nine single cells and are separate from the general housing ranges by doors. Each cell has a toilet. Although each tier has two showers with shower curtains, the general population inmates shower at the shower area in the dayroom. Inmates housed on Tier 6 (lock-up disciplinary) use the showers on the tier with only one inmate showering at a time. The other buildings contain the kitchen, intake and booking area, storeroom, administrative offices, laundry, and a large inmate dayroom. The facility also has a large outside recreation yard, when in use an officer is posted within the recreation yard. The dayroom has an officer station that provides direct supervision. Within the dayroom is the shower area for general population inmates. The showers provide privacy through a door and shower curtains. The dayroom has the PREA video on a constant loop on one of the televisions. The dayroom also contains the PREA informational posters strategically located clearly visible for all inmates. The posted information (poster Report Sexual Abuse Now) includes the emotional support services contact information, zero tolerance policy, methods for reporting sexual misconduct including outside the agency, and the PREA reporting hotline. The posters are in English, Spanish, and Portuguese. This is a notice to the inmates that states, "Calls are subject to monitoring and recording." The kitchen and dining room were not operating due to COVID protocols, meals were brought from the main facility. There were no blind spots in any of the smaller buildings. There were also PREA information posted in the kitchen, dining hall, and laundry room.

Areas where inmates work are the kitchen, laundry, and maintenance. During the audit due to COVID protocols, inmate workers were at a minimum to a no work level. The kitchen has an open design and has cameras that provide a cross view of the area with mirrors to assist with observation of the inmates. The kitchen coolers, freezers, and dry storage are always locked and accessed only by staff and inmates in those areas are under direct supervision. There is a sign on the door that states, "locked and secured at all times." The staff posts and the staff roving through the area provides supervision coverage. The laundry/chemical area is always staffed for direct supervision when inmates are working. Inmates working in maintenance are always under direct supervision. Additional supervision in all the areas is also provided through random security rounds by staff. The kitchen and laundry room cameras are monitored within the supervisor's office and can be monitored by main control. There is PREA information posted in all the areas. All other areas within the facility had open visibility and PREA information posted throughout the areas. All program and service areas have staff supervision through post assignments or roving and supplemental supervision through cameras. The facility's administrative lobby has PREA information posted.

The main control center is manned by staff 24 hours a day 7 days a week. The main control center controls the entry into the facility and doors within the facility. The control center monitors the cameras, all radio traffic, and intercom system. The Auditor observed the camera monitors and there was no cross-gender viewing.

The facility has 402 (359/53) staff positions who may have contact with inmates. The security section consists of Assistant Superintendent/Security (Colonel), Assistant Deputy Superintendent of Security (Majors), Watch Commanders (Captains), Lieutenants, and correctional officers. There are shift supervisors on all shifts with a Captain as the Watch Commander and Lieutenant(s). The facility operates three shifts. The correctional officers housing posts are assigned per shift with first shift of 7:00 am – 3:00 pm (62/13 officers), second shift of 3:00 pm to 11:00 pm (58/11) and third shift 11:00 pm – 7:00 am 36/8). There are additional officer positions for central control, reception, mailroom, armory/key control, fire safety, receiving, medical, kitchen, maintenance, visiting, courtyard, transportation, and rovers. Staff make random security rounds in all the general housing units every hour or 30 minutes in special management units. The rounds are documented in the housing unit control logbook. Shift supervisors are required to make unannounced rounds on each shift to all housing areas which are to be documented in the housing unit control logbooks by the officers. The logs were reviewed during the tour and the housing correctional officer housing rounds and the unannounced rounds by intermediate-level and higher-level supervisors demonstrated compliance. Supervision is also provided through unit staff.

The complex is monitored by exterior and interior cameras. The DHOC has 311 cameras (258 interior/ 53 exterior). The cameras are monitored through the control center. The Ash Street Jail has 26 cameras (18 interior / 8 exterior). The majority of the cameras are fixed. An expansion of the video monitoring system occurred since the previous audit adding 100 additional cameras and changing out the fixed cameras. Cameras are located throughout the facility including hallways, intake, kitchen, medical, commissary, laundry, program areas, special management housing, and housing areas. The outside perimeter and administrative building are also observed through cameras. Cameras operate on a thirty (30) day recording system with certain areas that are able to record for a longer period of time.

The Mission of the Bristol County Sheriff's Office is "The Bristol County Sheriff's Office is an organization of public safety professionals committed to serve and protect the people of Bristol County. The Bristol County Sheriff's Office holds itself accountable to the principles of integrity, professionalism, compassion, and teamwork."

A Superintendent manages the complex. The satellite facilities have oversight administration by Assistant Deputy Superintendent.

Summary of Audit Findings

The PREA Audit of the Dartmouth County Correctional Complex found forty-five (45) standards in compliance with eleven of those standards exceeding the requirement of the standard. An explanation of the findings related to each standard showing policies, practice, observations, and interviews are provided under each standard in the narrative section of the report.

Number of Exceeds Standards: 11

- 115.11 Zero Tolerance of Sexual Abuse, PREA Coordinator
- 115.13 Supervision and Monitoring
- 115.31 Staff Training
- 115.32 Volunteer and Contractor Training
- 115.33 Inmate Training
- 115.43 Protective Custody
- 115.53 Inmate Access to Outside Confidential Support Services
- 115.68 Post-Allegation Protective Custody
- 115.71 Criminal and Administrative Agency Investigations
- 115.81 Medical and Mental Health Assessments, History of Sexual Abuse
- 115.86 Sexual Abuse Incident Reviews

Number of Standards Met: 34

- 115.12 Contracting with other Entities for the Confinement of Inmates
- 115.14 Youthful Inmates
- 115.15 Limited to Cross-Gender Viewing and Searches
- 115.16 Inmates with Disabilities and Inmates Who Are Limited English Proficient
- 115.17 Hiring and Promotion Decisions
- 115.18 Upgrades to Facilities and Technologies
- 115.21 Evidence Protocols and Forensic Medical Examinations
- 115.22 Policies to Ensure Investigation of Allegations for Investigation
- 115.34 Specialized Training: Investigations
- 115.35 Specialized Training: Medical and Mental Health
- 115.41 Screening for Risk of Victimization and Abusiveness
- 115.42 Use of Screening Information
- 115.51 Inmate Reporting
- 115.52 Exhaustion of Administrative Remedies
- 115.54 Third Party Reporting
- 115.61 Staff and Agency Reporting Duties
- 115.62 Agency Protective Duties
- 115.63 Reporting to Other Confinement Facilities
- 115.64 Staff First Responder Duties
- 115.66 Preservation of Ability to Protect of Inmates from Contact with Alleged Abusers
- 115.67 Agency Protection Against Retaliation
- 115.72 Evidentiary Standard for Administrative Investigations
- 115.73 Reporting to Inmates
- 115.76 Disciplinary Sanctions for Staff
- 115.77 Corrective Action for Contractors and Volunteers
- 115.78 Disciplinary Sanctions for Offenders
- 115.82 Access to Emergency Medical and Mental Health Services

115.83 Ongoing Medical and Mental Health Care for Sexual Abuse
115.65 Coordinated Response
115.87 Data Collection
115.88 Data Review for Corrective Action
115.89 Data Storage, Publication, and Destruction
115.401 Frequency and Scope of Audits
115.403 Audit Contents and Findings

Summary of Corrective Action (if any):

115.13(b) Supervision and Monitoring

- The Auditor identified blind spots in the Ash Street classrooms front corners (same wall as the door).
- The agency purchased and installed mirrors within the classrooms that eliminated the blind spots and enhanced supervision view. Photos of the installed mirrors were provided to the Auditor on November 19, 2021, to demonstrate compliance. Substantial compliance has been met.

115.15(d) Limits to Cross Gender Viewing and Searches

- The Auditor identified cross-gender viewing of toilets in medical cells 3 and 4.
- The agency corrected the cross-gender viewing of toilets by attaching adhesive paper on the lower section of the medical cells glass windows blocking view of the toilets. The Auditor observed an example while on-site. Photos of the medical cell windows with attached adhesive paper were provided to the Auditor on November 24, 2021, to demonstrate compliance. Substantial compliance has been met.

115.15(f) Limits to Cross Gender Viewing and Searches

- Staff interviewed lacked knowledge of the proper procedures for transgender pat-down searches. Staff were not clear on how to complete the search or would conduct a search with a male and female staff member. Staff need refresher training on the appropriate method to conduct transgender pat-down searches.
- The agency provided refresher training to staff through a training bulletin on November 3, 2021. The training bulletin stated, "A reminder to all Security Staff that during the booking process, all cross-gender Inmates (transgender, intersex, gender non-conforming individuals) will be pat searched or strip searched by a Correctional Officer who matches their stated preference, as specified on their "Statement of Search" Acknowledgement Form absent exigent circumstances. If a Correctional Officer is not immediately available at the time of search, the Watch Commander shall be notified. The Inmate, detainee or prisoner shall be temporarily placed inside a holding cell until the search can be properly conducted. Staff must ensure the individual is asked to complete a "Statement of Acknowledgement Form" which will allow the Inmate to inform staff as to their preferred pronoun, preferred name, and search gender preference. Staff shall adhere to these stated preferences, absent exigent circumstance, which must be documented. *Staff shall ensure that each time any cross-gender Inmate needs to be strip-searched that the Inmate completes the "Statement of Acknowledgement Form" each time.* Staff shall ensure a signed copy is placed in the Inmates jacket, the original is given to Classifications to be placed in the Inmates 6-part folder and a copy is sent to the Superintendent's Wing. Once booking is completed, it will be important to ensure booking staff notifies the Watch Commander so that the Inmates placement into a housing unit is known by the Zone Supervisors and all staff assigned to the

respective unit. The agency provided sign off sheets that documented staff receiving refresher training by staff signatures to demonstrate compliance. Substantial compliance has been met.

115.16(a/b) Inmates with Disabilities and inmates who are limited English Proficient

- LEP inmates are not provided 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. Inmates stated they did not receive PREA information in a language they understand and was not documented through the inmate file review. Three LEP inmates stated they were not provided PREA information in a language they understand, the information was provided in English for Spanish inmates or was not received. The facility needs to demonstrate staff are trained in providing information/education on how to communicate and provide LEP inmates including the use of the translation line, staff interpreters, or other methods and be documented of the method utilized to demonstrate compliance.
- The agency provided specialized training for staff assigned to Booking/ Admissions (Dispatch) and Classification Counselors on November 10, 2021. As part of the training, the need for LEP inmates to understand PREA training material was reinforced and that the Spanish or Portuguese PREA Notification Form is signed by those inmates who are more proficient in those languages. The PREA Remedial Training handout stated, "While conducting the PREA Assessment on a New Commit, the PREA Information/Booking Form must be provided to the inmate in their chosen language especially when the translation line is used. You can have them sign the English version in OMS (Offender Management System), but we also need to have the inmate sign the hard copy in their chosen language. The Form is currently available in hard copy at the Booking Station in both Spanish and Portuguese to be handed to the inmate. We are working on having these forms uploaded to OMS in both Spanish and Portuguese. While going through this Form, please be sure to ensure that the inmates are particularly aware of the following: How to report a PREA incident and how to access the Handbook located in all the Law Libraries. The Handbook will eventually be uploaded to the Tablets in English, Spanish and Portuguese." The facility provided documentation of the training through staff signatures on the Meeting Attendance Sheet to demonstrate compliance. Substantial compliance has been met.

115.17(f) Hiring and Promotion Decisions

- There is no documented practice of the agency asking employees about previous misconduct in any interviews or written self-evaluations. The facility must develop a process to ask employees about previous misconduct in interviews or self-evaluations.
- The agency developed an Annual PREA Form, which will be signed by staff during yearly in-service to ask staff about previous misconduct on an annual basis. Additionally, a PREA Questions/Promotional Interviews Form was created to demonstrate the requirement that staff are asked about previous misconduct during job promotions. The form will be included in future promotional interviews conducted within the agency. The facility had no promotional interviews conducted since the creation of the form and submittal of the documentation. The facility provided documentation of the six Annual PREA Forms completed in November 2021 to demonstrate compliance. Substantial compliance has been met.

115.32 Volunteer and Contractor Training

- The facility was unable to provide documentation while on-site that volunteers completed PREA training on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies.
- The agency provided training documents documenting the training of an intern prior to the enlist of services. The Director of Audits and Accreditations also provided that "all volunteers participate in a general orientation prior to assignment. Part of that orientation is a review of our PREA

protocols, which is verified on a PREA/Sexual Harassment Compliance Form. Since Covid became an issue in the spring of 2020, Bristol has only had one new volunteer applicant who is a student intern. Bristol has three contractual vendors – CPS for medical, Trinity for Food Services and Keefe for Commissary. All persons employed by these vendors participate in the same new employee orientation as Sheriff's Office employee (but not the CO Training Academy)." The PREA/Sexual Harassment Compliance Forms were provided for the intern for 2021. A PREA/Sexual Harassment Compliance Form was also provided for a volunteer prior to COVID to demonstrate the practice and compliance on February 10, 2021. The agency was in compliance with the standard prior to corrective action based on the training dates of the documentation provided after the on-site audit that documented the volunteer training process. Substantial compliance was met. Substantial compliance has been met.

115.42 (d) Use of Screening Information

- Staff were not aware of the standard and policy requirements for completing reassessments on transgender inmates at least twice a year. Staff must be trained on the policy and procedures for completing reassessments on transgender inmates at least twice a year.
- The agency provided refresher training for Classification Counselors on November 10, 2021. As part of the training, discussion on the need for transgender inmates when housed at the facility are to be assessed and reassessed during regularly scheduled housing and PREA meetings as well as to further comply with the standard, there shall also be another reassessment conducted on those transgender inmates housed at the facility every six months if still incarcerated. The PREA Remedial Training handout stated, "Transgender inmates will have a PREA Reassessment Screening completed every 6 months after the original PREA Reassessment Screening Instrument. The facility provided documentation of the training through staff signatures on the Meeting Attendance Sheet to demonstrate compliance. Substantial compliance has been met.

115.51 (d) Inmate Reporting

- Staff were unaware how they could report privately report sexual abuse and sexual harassment of inmates. Refresher training for staff must be conducted on the method staff can report privately sexual abuse and sexual harassment of inmates, through SIU.
- The agency created new posters (Report Sexual Abuse Now Notice to Employees) which state that employees can report a PREA allegation privately by contacting the Sheriff's Investigative Unit, the MA State Police, and the Bristol County District Attorney's Office. The posters have been placed in locations within the Dartmouth Complex and the Ash Street Jail, especially where employees gather (break rooms). This new information was communicated to Correctional staff on November 10, 2021, with a training bulletin. The training bulletin Anonymous PREA Reporting states, "A reminder to all Security Staff that an employee can report a PREA allegation anonymously using the SIU hotline at 508-995-9609. They can now also anonymously report such an allegation by contacting the M State Police at 508-993-2016 and/or: The Bristol County District Attorney's Office at 508-996-1844. New posters communicating this information shall be posted throughout the facility break rooms and other locations. PLEASE ENSURE STAFF ON EACH SHIFT REVIEWS AND SIGN OFF ON THIS MEMO ACKNOWLEDGING ITS CONTENT." The agency provided photos of the posters placed in staff locations and Anonymous PREA Reporting Procedure sign off sheets that documented staff signatures receiving the refresher training to demonstrate compliance. Substantial compliance has been met.

116.63 (d) Reporting to Other Confinement Facilities

- The facility's policy does not address the actions taken when the facility is notified of a sexual allegation by another facility that occurred at your facility. The facility policy must be updated to

address the standard language and provide training to staff on the policy update and action to be taken.

- The agency updated policy 03.06.00 Prevention of Inmate Sexual Abuse and Sexual Harassment, Section 03.06.12 PREA Reporting Procedures to address the actions taken when the facility is notified of a sexual allegation by another facility. The policy language added states, "It is expected that the agency or facility head who receives such notification shall ensure that the allegation is investigated in accordance with National PREA Standards. The Superintendent or designee (e.g., the Major/Special Investigations Unit) shall contact the facility head/agency in writing after a reasonable time period (e.g., approximately 30 days) to verify the status/conclusion of the investigation." The updated policy provided to demonstrate compliance addresses the policy requirement of the standard. Substantial compliance has been met.

115.67 Agency Protection Against Retaliation

- The facility did not provide documentation to demonstrate retaliation monitoring on victims. Staff acknowledged retaliation monitoring had not occurred. The facility must provide retaliation monitoring for inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation from other offenders or staff.
- The agency submitted updated policy 03.06.00 Prevention of Inmate Sexual Abuse and Sexual Harassment, Section 03.06.18 Protection Against Retaliation to change the requirement of retaliation monitoring from the investigator to the PREA Coordinator. The agency also provided three examples of retaliation monitoring documented on the Monitoring Retaliation Against Inmates/Staff Log to demonstrate compliance. Substantial compliance has been met.

115.78(g) Disciplinary Sanctions for Inmates

- The facility's policy (and practice) is non-compliant with the standard. Per the standard, an inmate should only be disciplined for sexual contact only upon a finding that the staff member did not consent. The agency policy must be updated to address the standard language.
- The agency updated policy 03.06.00 Prevention of Inmate Sexual Abuse and Sexual Harassment, Section 03.06.09 Limits to Cross Gender Viewing and Search Procedures. The new language states, "An inmate or detainee may be disciplined for sexual contact with staff, but only upon a finding that the staff member did not consent to such contact." The updated policy provided to demonstrate compliance addresses the policy requirement of the standard. Substantial compliance has been met.

Documentation of compliance for the outstanding standards were provided to the auditor through email by the PREA Coordinator. With the last documentation received on February 10, 2021. No further action was necessary.

PREVENTION PLANNING

Standard 115.11: Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

115.11 (a)

- Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment? ☒ Yes ☐ No
- Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment? ☒ Yes ☐ No

115.11 (b)

- Has the agency employed or designated an agency-wide PREA Coordinator? ☒ Yes ☐ No
- Is the PREA Coordinator position in the upper-level of the agency hierarchy? ☒ Yes ☐ No
- 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 ☐ No

115.11 (c)

- 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 ☐ No ☐ NA
- 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 ☐ No ☒ NA

Auditor Overall Compliance Determination

- ☒ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☐ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

The Bristol County Sheriff's Office and the Dartmouth Correctional Complex has a written policy mandating zero tolerance towards all forms of sexual abuse and sexual harassment. Policy 03.06.00 Prevention of Inmate Sexual Abuse and Sexual Harassment addresses zero tolerance towards all forms of sexual abuse and sexual harassment. The forty-one-page policy has twenty-four sections that outline

the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment. Section 03.06.03 addresses the zero tolerance and states, "The Sheriff's Office has established a zero-tolerance standard towards all forms of sexual abuse, sexual harassment, or other forms of sexual misconduct involving inmates (as defined). This document (03.06.00) shall outline this agency's approach towards preventing, detecting, and responding to such conduct." Section 03.06.01 provides definitions of prohibited behaviors regarding sexual abuse and sexual harassment. Section 03.06.17 includes sanctions for those found to have participated in prohibited behaviors including disciplinary sanctions, up to and including termination for violating the Sheriff's Office's sexual abuse or sexual harassment policies and applicable state/federal laws. Inmates shall be subject to a formal disciplinary process. Through observation of PREA information posted throughout the facility, review of inmate and staff handbooks, and interviews with staff and inmates it was apparent that the Bristol County Sheriff's Office and Dartmouth Correctional Complex is committed to zero tolerance of sexual abuse and sexual harassment and constantly enforces zero-tolerance through PREA information on bulletin boards, postings, handbooks, and training.

Policy 03.06.00 Section 03.06.04 Staffing states, "One management level employee shall be appointed as PREA Coordinator. This employee shall be provided with sufficient time and authority to develop, implement, and oversee agency-wide efforts towards compliance with National PREA standards, Sheriff's Office policy, and applicable laws. The PREA Coordinator shall serve as a Chairperson of the PREA Incident Review Committee and can attend PREA related meetings within or outside the Sheriff's Office. The PREA Coordinator shall report to the Superintendent." The agency's PREA Coordinator also is the Coordinator of Medical Services. For medical, the Coordinator of Medical Services reports to the Health Services Administrator. As the agency's PREA Coordinator, he reports directly to the Superintendent, reflected by the agency's table of organization. The PREA Coordinator's job description states the position is "responsible to assist department administrators and staff in addressing, identifying, and resolving specialized issues related to PREA. The position manages the PREA initiative for compliance with the federal PREA standards." The responsibilities include manage the PREA initiative for the Department to ensure consistency and enforcement of policy and procedures in the managing of sexual assaults and harassment on inmates; ensure policies and procedures reflect the requirements of the National PREA standards, monitor all aspects of the prevention of inmate sexual abuse and sexual harassment policy, review all incidents regarding sexual assault and sexual harassment to identify the best practices and any deficiencies which need correction, prepare all required reports to comply with PREA and the US Department of Justice standards, analyze and maintain programs and statistical data regarding sexual assault and sexual harassment allegations, monitor trends in sexual assault and sexual harassment allegations, assist with the development of specialized training for all staff, organize meetings and serve as a member of the incident review team, assist in the development of annual vulnerability assessment report, and resolve inmate grievances relative to allegations of sexual abuse and sexual harassment. The PREA Coordinator stated he has enough time to accomplish the agency's PREA responsibilities. The PREA Coordinator shared the position's responsibilities include tracking all PREA investigations, training of staff, monitoring retaliation, conduct incident reviews, collecting and maintaining statistics, participating on the Restricted Housing Unit (RHU) meetings, and holding monthly PREA Review Committee meetings. Meetings are held regularly with classification, training, and security staff to discuss PREA concerns and reinforce operating procedures. The office also provides training and guidance as needed for all staff and department heads. Agency updates and changes are forwarded from this office to the agency staff. Informational updates, policy updates, new initiatives, and directives are shared and discussed at the monthly PREA Review Committee meetings. The PREA Coordinator stated if compliance issue is identified, the Superintendent would be informed, the PREA Review Committee would discuss the issue and develop a correction plan, and ensure the correction is made. The PREA Coordinator is moving into

a new position after the audit. The agency had staff shadowing the PREA Coordinator through the on-site audit.

The agency only operates one facility, Dartmouth Correctional Complex with multi buildings for inmate housing. Since the agency operates one facility, there is not a requirement for PREA Compliance Managers. Policy 03.06.00 states, "At least one PREA Compliance Manager shall be appointed to oversee efforts towards complying with National PREA Standards and to help facilities prepare for scheduled PREA audits. The PREA Compliance Manager shall serve as a member of the PREA Incident Review Committee and can attend PREA related meetings within or outside the Sheriff's Office. The PREA Compliance Manager shall report to the Superintendent on matters related to PREA compliance." The ADS Policy Development and Compliance serves as the PREA Compliance Manager for the DHOC. Although not official titles, the Assistant Deputy Superintendents that oversee the operations of the Ash Street Jail and the Dart Women's Center act as PREA Compliance Managers. The PREA Coordinator has routine interaction with them which includes walk throughs of the facilities, monthly meetings, and incident reviews. Both ADSs were present and responsive during the audit of each of their buildings. They were knowledgeable of the PREA standards and the agency's compliance measures. They attend the monthly PREA Review Committee meetings, makes rounds within the facility, ensure that effective practices and procedures are in place at the facility to ensure compliant with standards.

The agency exceeds the standard through the structure created to manage the PREA responsibilities of the agency. A PREA Program office is under the direction of the PREA Coordinator with the ADSs acting as the PREA Compliance Manager for the Ash Street Jail building and the Dart Women's Center building. The PREA Coordinator also holds a monthly meeting to conduct incident reviews on all cases, review pending cases, discuss inmates who are considered at high risk, and any compliance concerns. These meetings are documented in monthly meeting notes.

Standard 115.12: Contracting with other entities for the confinement of inmates

115.12 (a)

- If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.) ☐ Yes ☐ No ☒ NA

115.12 (b)

- 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 OR the response to 115.12(a)-1 is "NO".) ☐ Yes ☐ No ☒ NA

Auditor Overall Compliance Determination

☐

Exceeds Standard (*Substantially exceeds requirement of standards*)

☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ **Does Not Meet Standard** (*Requires Corrective Action*)

The Bristol County Sheriff's Office does not contract for the confinement of inmates with private agencies or other entities including other government agencies. Policy section 03.06.05 states, "Should the Sheriff's Office contract with a private agency to provide inmate housing and security, the original contract and subsequent renewals shall include the private agency's obligation to adapt and comply with National PREA Standards. Such contracts or contract revisions adopted shall include the ability of the Sheriff's Office to monitor the efforts of the private agency to comply with the National PREA Standards." This was confirmed through interviews with the Superintendent and the PREA Coordinator.

Standard 115.13: Supervision and monitoring

115.13 (a)

- Does the agency ensure that each facility has developed a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse? ☒ Yes ☐ No
- Does the agency ensure that each facility has documented a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse? ☒ Yes ☐ No
- Does the agency ensure that each facility's staffing plan takes into consideration the generally accepted detention and correctional practices in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes ☐ No
- Does the agency ensure that each facility's staffing plan takes into consideration any judicial findings of inadequacy in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes ☐ No
- Does the agency ensure that each facility's staffing plan takes into consideration any findings of inadequacy from Federal investigative agencies in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes ☐ No
- Does the agency ensure that each facility's staffing plan takes into consideration any findings of inadequacy from internal or external oversight bodies in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes ☐ No
- Does the agency ensure that each facility's staffing plan takes into consideration all components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated) in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes ☐ No

- Does the agency ensure that each facility's staffing plan takes into consideration the composition of the inmate population in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes ☐ No
- Does the agency ensure that each facility's staffing plan takes into consideration the number and placement of supervisory staff in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes ☐ No
- Does the agency ensure that each facility's staffing plan takes into consideration the institution programs occurring on a particular shift in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes ☐ No ☐ NA
- Does the agency ensure that each facility's staffing plan takes into consideration any applicable State or local laws, regulations, or standards in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes ☐ No
- Does the agency ensure that each facility's staffing plan takes into consideration the prevalence of substantiated and unsubstantiated incidents of sexual abuse in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes ☐ No
- Does the agency ensure that each facility's staffing plan takes into consideration any other relevant factors in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes ☐ No

115.13 (b)

- In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)
☐ Yes ☐ No ☒ NA

115.13 (c)

- 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 ☐ No
- 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 ☐ No
- 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 ☐ No

115.13 (d)

- 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 ☐ No
- Is this policy and practice implemented for night shifts as well as day shifts? ☒ Yes ☐ No
- 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 ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

The Dartmouth Correctional Complex has developed a staffing plan that is based on the eleven criteria of this standard to include generally accepted detention and correctional practices; any judicial finding of inadequacy; and findings of inadequacy from Federal investigative agencies; any findings of inadequacy from internal and external oversight bodies; all components of the facilities physical plant (including “blind spots” or areas where staff or inmates may be isolated); the composition of inmate population; the number and placement of supervisory staff; institutional programs occurring on a particular shift; any applicable State, or local laws, regulations, or standards; the prevalence of substantiated and unsubstantiated incidents of sexual abuse; and any other relevant factors. Policy 03.06.00 Section 03.06.05 Prevention Measures and Planning states, “The Superintendent shall prepare an annual staffing plan to help develop, document, and determine adequate staffing levels within the correctional facilities and, where applicable, video monitoring systems. The Regional Lockup will be included within this plan. To protect against sexual abuse, staffing level calculations shall comply with methods accepted by correctional professionals and National PREA Standards. The following considerations shall be made when preparing the staffing plan: all components of the facility's physical layout (including blind spots or areas of isolation); the composition of the inmate, detainee, and prisoner population; the number and placement of supervisory staff; programming on a particular shift; the prevalence of substantiated and unsubstantiated incidents of sexual abuse; generally accepted detention and correctional practices; any judicial findings of inadequacy; any findings of inadequacy from federal investigative agencies or from internal/external oversight bodies; and any other relevant factors.” The agency also considers the staffing levels for each housing unit which currently are a minimum of two staff and the ratio of male and female staff on each shift. The policy also states, “The Sheriff's Office shall prepare an annual Vulnerability Assessment Report for the Dartmouth Correctional Complex and the Ash Street Jail/Regional Lockup. These reports shall assess, determine, and document whether or not adjustments are needed to the prevailing staffing plan; the deployment of the electronic/video monitoring systems and other monitoring technologies; and/or the resources available to commit to ensure adherence to the staffing plan. Deficiencies shall be documented. Inoperable or outdated systems or technologies should be identified for possible replacement or repair. The Superintendent shall review the final report.” The agency's annual Vulnerability Assessments reviews the physical plant and operations to reduce sexual abuse vulnerability for staff and inmates. The Vulnerability Assessments are conducted by the Colonel, Majors, and the

PREA Coordinator and then a final report is completed and submitted to the Superintendent for review and action. The last Vulnerability Assessment was completed June 24, 2020. Recommendations from the Vulnerability Assessment for the Dart Women's Center were to have shower curtains be checked for presence and damage on a routine basis; conduct a full update of the camera system to a digital one with recording capabilities; adding cameras to the laundry room, day room, classroom, and attorney's visiting room; and place the PREA poster in the chow hall be covered by Plexiglas. Recommendations for the DHOC include camera updates in the receiving/property area, Health Services Unit, kitchen storage hallway, maintenance area, classrooms; have shower curtains be checked for presence and damage on a routine basis; and PREA posters to be covered in Plexiglas in identified areas. It was noted that the camera project addressed the majority of the camera recommendations. There were no recommendations for the Ash Street Jail. The Vulnerability Assessments are very thorough and address the PREA visual aspects of each area of the facilities. The information from the Vulnerability Assessments is considered when developing the staffing plan. Data from the Strategic Accountability Management System (SAMS) which collects 250 indicators is also reviewed and considered during the annual staffing plan review. The agency completed the annual review of the staffing plan on February 21, 2021, through two documents and the Staffing Templates. The first document outlines the eleven standard requirements were reviewed by the Superintendent and various facility supervisors. This memo from the Superintendent stated, "In addition to discussing these factors with appropriate security management staff, I have reviewed throughout the year numerous department documents, such as: daily/monthly SAMS reports; shift reports; the annual Vulnerability Assessment Reports; PREA investigative reports; State/ICE audit reports and agency responses; health service/public health concerns (re: COVID 19); and general climate control reports within the correctional facilities." The Superintendent also completes and signs the review form. The second document, Staffing Analysis, outlines all elements of the standard and whether the element was reviewed and any comments in each section. The Staffing Analysis outlined the agency maintains generally accepted detention and correctional practices; had no inadequacy findings from judicial, federal investigations, or internal/external oversight bodies; consideration was given to the inmate population, placement of supervisory staff, and programs occurring on a particular shift; the physical plants have been assessed; the agency is not in violation with any applicable state or local laws, regulations, or standards; the prevalence of substantiated or unsubstantiated incidents of sexual abuse was assessed, and there were no other relevant factors this year." The previous Staffing plans was completed and reviewed on July 14, 2020, and June 16, 2019. The staffing plan was based on the designed facility capacity of 1,598. The inmate population during the audit was 674 inmates and the average population for the audit period was 691. The Superintendent stated the agency participated in a Staffing Analysis pilot program with the National Institute of Corrections (NIC) that occurred in three counties nationwide. The Superintendent and the PREA Coordinator stated the annual staffing plan review is developed with the Superintendent, Colonel, Assistant Deputy Superintendents, PREA Coordinator, and other various supervisors. The Superintendent stated the staffing plan is a written and electronic document that is maintained by the Superintendent and the Policies and Procedure Section and is available for executive staff review. The current staffing plan indicates the facility has 306/58.6 security staff posts and with the relief factor it increases to 373.6/71.2 total security staff. The relief factor is 1 for a five-day post (no relief), 1.3 for a five-day relief post, and 1.8 for a seven-day relief post. The Superintendent shared the facility currently had 48 security vacancies that are filled through overtime as needed. The Superintendent indicated that the staffing plan is reviewed throughout the year by reviewing staffing levels and positions and any recommendations or changes are considered. The Superintendent stated consideration is given to the video monitoring as part of the plan and the facility added an additional 100 cameras to enhance supervision within the facility.

Based on the review of the staffing plan and interviews with the PREA Coordinator and the Superintendent, the staffing plan was developed by the leadership of the Sheriff's Office including the Superintendent and PREA Coordinator. The Superintendent and PREA Coordinator shared the agency

is accredited through the American Correctional Association and the National Commission on Correctional Health Care. There were findings of inadequacy from federal investigative agencies or internal/external oversight bodies. During the audit period, the Superintendent stated there was one legal case involving the ICE Center over COVID and pre-trial issues, the suit was settled with no findings. They also shared that the agency conducts an annual Vulnerability Assessment that reviews all areas of the facility for blind spots and camera and mirror needs. They review the inmate population and consider gang issues, segregation issues, special needs/disabilities of inmates, that LBGTI inmates are becoming more common, and pregnant females. When reviewing the number and placement of supervisory staff they ensure all posts are covered and the relief factor is considered. Which is also considered for correctional staff. Due to the Crime Reform Bill extra staff have been added to provide recreation seven days a week for two hours in special management housing. The majority of inmate programs are conducted on day shift with higher staffing levels and volunteer program is mostly conducted in the evenings supervised by staff. They review substantiated and unsubstantiated sexual abuse incidents for trends including areas of the facility and staff and have identified no trends. Other factors they considered this year was morale, especially focused around COVID protocols and overtime needs and the new contract.

Policy 03.06.00 Section 03.06.05 states, "In circumstances where the staffing plan was not complied with, facility supervisors shall document and justify all deviations to the Superintendent. The plan shall then be updated accordingly." A memo to file from the Superintendent stated, "The Bristol County Sheriff's Office has not deviated from the staffing plans from 2019 to the present date." This was confirmed through interviews during the on-site audit, the relief factor on the staffing plan covers for vacations, sick leave, and training. If there are vacancies, the agency uses overtime (voluntary or forced) to cover the post. The Superintendent indicated that non-compliance with the staffing plan is rare and would be covered by overtime including freezing staff (forced overtime). All mandatory posts would be covered by shift and the staffing plan outlines the posts that can be pulled for emergencies. If there was a deviation, the position deviated and the reasons for the deviation are documented on the Daily Watch Commander's Report and the Overtime Shift Report. The Superintendent indicated during the interview that the staffing reports from each shift are reviewed daily by Watch Commander. If there are any deviations from the staffing plan, the Superintendent, Colonel and Watch Commander meet and discuss the issue. The Watch Commander would also notify the Superintendent's Office through an incident report. The agency indicted no deviations from the staffing plan have occurred.

The facility has 402 (359/53) staff positions who may have contact with inmates. The security section consists of Assistant Superintendent/Security (Colonel), Assistant Deputy Superintendents of Security (Majors), Watch Commanders (Captains), Lieutenants, and correctional officers. There are shift supervisors on all shifts with a Captain as the Watch Commander and Lieutenant(s). The facility operates three shifts. The correctional officers housing posts are assigned per shift with first shift of 7:00 am – 3:00 pm (62/13 officers), second shift of 3:00 pm to 11:00 pm (58/11) and third shift 11:00 pm – 7:00 am 36/8). There are additional officer positions for central control, reception, mailroom, armory/key control, fire safety, receiving, medical, kitchen, maintenance, visiting, courtyard, transportation, and rovers. Staff make random security rounds in all the general housing units every hour or 30 minutes in special management units. The rounds are documented in the housing unit control logbook. Shift supervisors are required to make unannounced rounds on each shift to all housing areas which are to be documented in the housing unit control logbooks (Activity Log Search) by the officers.

Policy 03.06.00 Section 03.06.05 states, "During each shift, intermediate and higher-level supervisors shall conduct unannounced rounds within the housing areas. One function of these rounds shall be to help identify and deter staff sexual abuse and sexual harassment. Unannounced rounds should be logged in writing with red ink. An employee found alerting others that an unannounced round is being

conducted is prohibited, unless such communication is related to a legitimate function within the facility.” Intermediate and higher-level staff conduct unannounced rounds. They are conducted daily during each shift by the Watch Commanders and Zone Commanders on each shift. The higher-level security supervisors, Majors, and Assistant Superintendent of Security (Colonel) conduct security rounds during business hours. The unannounced rounds are documented in the housing unit logbooks and in OMS. The logbooks and Offender Management System (OMS) entries were reviewed during the tour, showing unannounced rounds by security supervisors conducted on each shift as well as rounds of higher-level supervisors demonstrated compliance. Interviews with staff and inmates confirmed that unannounced rounds are done randomly throughout the facility and inmates have accessibility to security supervisors if needed. The intermediate and higher-level security staff interviewed stated to ensure unannounced rounds, they change the pattern of rounds, stagger times, and do not follow the same pattern and time each day. They verified unannounced rounds are documented by noting the round into the housing unit logbook in red ink. These rounds are documented on the housing unit logbooks in red ink, and it is also documented in OMS. One Supervisor noted that unannounced rounds allow the supervisor to observe unit activities and interact with inmates and staff. The policy also prohibits staff from alerting other staff members that supervisory staff rounds are occurring. The supervisory staff indicated in their interviews that staff are trained annually and provided policy reminders that alerting is prohibited. If a staff member was found to be alerting, the staff member would be spoken to on the importance of unannounced rounds, document the encounter, inform the supervisor, and conduct training on-site. If the issue continues, progressive discipline could be started.

The agency exceeds the standard in the numerous ways the staffing plan is monitored and the monthly PREA Review Committee meetings that discusses compliance issues including staffing, video monitoring or other concerns. The agency completes a thorough annual Vulnerability Assessment of all complex facilities with findings considered as part of the staffing plan. The administration staff active involvement in the staffing plan development, review, and making staffing adjustments as needed.

Did Not Meet: The Auditor identified blind spots in the Ash Street classrooms front corners (same wall as the door).

Corrective Action Taken: The agency purchased and installed mirrors within the classrooms that eliminated the blind spots and enhanced supervision view. Photos of the installed mirrors were provided to the Auditor on November 19, 2021, to demonstrate compliance. Substantial compliance has been met.

Standard 115.14: Youthful inmates

115.14 (a)

- Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates [inmates <18 years old].) ☐ Yes ☐ No ☒ NA

115.14 (b)

- In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates [inmates <18 years old].) ☐ Yes ☐ No ☒ 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].) ☐ Yes ☐ No ☒ NA

115.14 (c)

- Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates [inmates <18 years old].) ☐ Yes ☐ No ☒ 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].) ☐ Yes ☐ No ☒ 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].) ☐ Yes ☐ No ☒ NA

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Dartmouth Correctional Complex does not house youthful offenders. The Massachusetts General Law Chapter 84 of the Acts of 2013 changed the age of majority from 17 to 18. The PREA Coordinator stated, Bristol does not presently accept juveniles. We only house persons over the age of 18. The Youth Management Status Sheet is no longer applicable to current operations. The form was developed in past years because the previous state law did allow juveniles at 17 to be held in houses of correction throughout the Commonwealth, although none were held in Bristol County for decades. No juveniles are admitting to the Regional Lockup. There have been no juvenile/youthful offenders housed at the facility during the audit cycle confirmed through interviews and inmate roster reviews.

Policy 03.06.00 Section 03.06.21 Juveniles (Youthful Offenders) states, "Should a juvenile arrive, they shall be placed at the Dartmouth House of Correction in only in a location where they shall not have sight, sound or physical contact with adult inmates or detainees through the use of a shared dayroom or other common spaces, shower areas, or sleeping quarters. Efforts shall be made to avoid placing a juvenile in isolation for a lengthy period of time to comply with these procedures. Based on the PREA Screening Instrument, possible victimization factors shall always be considered to help ensure a positive housing situation for a juvenile. In areas outside of housing units, the Sheriff's Office shall either maintain sight

and sound separation between the juvenile and adult inmates or detainees or provide direct staff supervision whenever a juvenile and adult inmates or detainees have sight, sound, or physical contact. Best efforts shall be made to avoid placing a juvenile in isolation to comply with these provisions. Absent exigent circumstances, juveniles shall not be denied daily, large muscle exercise, or any legally required special education services. Juveniles shall also have access to other programs and work opportunities to the best extent possible. The Superintendent or designee shall be notified when a housing or security problem develops regarding a juvenile so that appropriate action can be taken.” In the case a youthful offender is housed, the agency has a Youth Management Status Sheet that captures the youthful offender’s name; date and time received; youth offender risk type; date and time of orientation; and assigned unit and cell. The form is broken into days and shifts to capture the youthful offender status (awaiting action, disciplinary detention, administrative segregation); meals; showers; exercise; any comments; officer’s and supervisor’s signature; and reclassification.

Standard 115.15: Limits to cross-gender viewing and searches

115.15 (a)

- 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 ☐ No

115.15 (b)

- Does the facility always refrain from conducting cross-gender pat-down searches of female inmates in non-exigent circumstances? (N/A here for facilities with less than 50 inmates before August 20,2017.) ☒ Yes ☐ No ☐ NA
- Does the facility always refrain from restricting female inmates’ access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A here for facilities with less than 50 inmates before August 20, 2017.) ☒ Yes ☐ No ☐ NA

115.15 (c)

- Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches? ☒ Yes ☐ No
- Does the facility document all cross-gender pat-down searches of female inmates?
☒ Yes ☐ No ☐ NA

115.15 (d)

- Does the facility implement a policy and practice 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 ☐ No

- Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit? ☒ Yes ☐ No

115.15 (e)

- 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 ☐ No
- 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 ☐ No

115.15 (f)

- 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 ☐ No
- 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 ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

The Agency's policies 03.06.00 Prevention of Inmate Sexual Abuse and Sexual Harassment Section 03.06.09 Limits to Cross Gender Viewing and Search Procedures; 12.14.00 Transgender, Intersex, and Gender Non-Conforming Inmates, Detainees, and Prisoners; and Lesson Plans Prison Rape Elimination Act and Search Procedures address inmate pat-down searches, strip searches, body cavity searches, and the limits of cross-gender viewing and searches. Policy 03.06.00 Section 03.06.09 states, "No employee shall conduct an opposite gender strip search or visual body cavity search (meaning a search of the anal or genital opening). Only cross gender qualified health care practitioners can conduct these searches. Sentenced inmates and pre-trial detainees can be pat searched by an opposite gender employee, but only during an exigent circumstance, which must be documented. Any opposite gender pat search (male or female) conducted must be documented. All pat, strip, and body cavity searches shall be conducted in accordance with policy 09.03.00 "Searches"." Policy 09-03-00 Inmate Searches states, "Absent exigent circumstances, no opposite gender Correctional Officer shall strip search an inmate." Policy 12.14.00 states, "In the event that a cross gender inmate, detainee, or prisoner is pat or

strip searched by an opposite gender Correctional Officer due to an exigent circumstance, the Watch Commander shall be notified immediately following such a search. The responsible Correctional Officer shall submit a thorough Incident Report to the Watch Commander by the end of their work shift, clearly stating the circumstances on why this search was conducted and the results of such a search.” Interviews with staff indicated that cross-gender searches do not occur, the facility is always staffed with male and female staff. If a cross-gender search would occur under exigent circumstances, the search would be documented on an incident report. The staff indicated an exigent situation would be a critical incident and the search would be conducted as directed by a Watch Commander. The facility had no cross-gender strip searches or cross gender visual body cavity searches conducted within the audit period.

Policy 03.06.00 Section 03.06.09 states, “The access of female inmates and detainees to regularly available programming and other out-of-cell opportunities shall not be restricted.” Female inmates are housed at the Dart Women’s Center building and within special housing in DHOC. Females are not housed at Ash Street Jail. Upon review of staffing rosters, there is always female staff on duty at DHOC and the Women’s Center who can be utilized for female pat-down searches. The program schedule for the Women’s Center demonstrated the numerous programs and opportunities for out of cell activities available for the female inmates. The eleven female inmates interviewed stated they are always able to participate in activities outside the cell and female staff are always available to conduct pat-down searches. One of the female inmates also stated when in the main building (DHOC) you may have to wait awhile for movement since there are limited female staff in that building. There was no female cross-gender pat-searches, cross-gender strip searches, or cross-gender visual body cavity searches conducted within the audit period.

Policy 03.06.00 Section 03.06.09 states, “All inmates shall be able to shower, perform bodily functions, and change clothing without nonmedical personnel of the opposite gender viewing their breasts, buttocks, or genitalia, except during a documented exigent circumstance or when such viewing is incidental to routine cell checks. Facilities shall take appropriate steps to comply with this procedure, such as utilizing placement petitions, curtains, and other privacy methods.” The housing areas all provide a barrier or curtain designated for inmate privacy during clothing changes, showering, or performing bodily functions. The Auditor examined sight lines for potential blind-spots, cross-gender viewing, the officers post sight lines, and camera locations. The Auditor identified potential cross-gender viewing of toilets in the medical cells at DHOC. At the Ash Street Jail, the toilets in the cells are in full view cell toilets allowing the potential cross-gender viewing by female staff. The housing cells are small with a toilet, sink, and a bed. The front wall of the cell is open to the housing unit run by bars, not a wall or solid door. Female staff on the post while doing rounds may observe an inmate on the toilet. Due to the floor plan of the cell and the square footage, a barrier for the toilet is not feasible for the cell. The interviewed inmates stated they are offered enough privacy for performing bodily functions and changing clothes. They shared the officer announces prior to walking the housing tier giving the inmate time to complete using the toilet or cover up while performing bodily functions. They are able to use a towel or sheet to make a temporary barrier while using the toilet. They also stated if a female staff member is conducting count or making rounds, the staff offer privacy by only glancing in the cell to ensure the count and check the safety of the inmate. The female staff interviewed indicated they announce the round, wait one to two minutes before making the round to give the inmate time to cover up or complete using the toilet. The showers at Ash Street are either conducted in the main dayroom shower area or if restricted housing the showers are on the tier. In both areas, the showers provide privacy through shower curtains. The Auditor’s review of the cameras in the control center showed no potential cross-gender viewing. A previous discussion with the PREA Resource Center and the feedback from the staff and inmates, the Auditor determined the inmates receive privacy from staff viewing as allowed by the facility design and is viewed as incidental viewing during routine cell checks. Inmates and staff interviewed stated inmates receive privacy for changing clothes, performing bodily functions, and showering.

Did Not Meet: The Auditor identified cross-gender viewing of toilets in medical cells 3 and 4.

Corrective Action Taken: The agency corrected the cross-gender viewing of toilets by attaching adhesive paper on the lower section of the medical cells glass windows blocking view of the toilets. The Auditor observed an example while on-site. Photos of the medical cell windows with attached the adhesive paper were provided to the Auditor on November 24, 2021, to demonstrate compliance. Substantial compliance has been met.

Policy 03.06.00 Section 03.06.09 states, "Correctional Officers shall announce to inmates when an employee of the opposite gender enters a housing area where they reside." When an employee of the opposite gender enters a housing unit a verbal cross-gender announcement is made by the staff member and/or through the housing unit officer. An announcement is also required to be made at the beginning of each shift by the control center into all housing areas through the intercom and documented in the logbook, OMS, and on the Office Daily Shift Report. The announcement states "Throughout the day and night shifts, male and female staff members may enter your living areas for official purposes. You are required to properly dress at all times, unless showering." The cross-gender announcement is made verbal when a staff member or visitor enters the housing unit of the opposite gender as observed by the Auditor while touring the facility. The officer logs the announcement in the housing unit logbook each time the cross-gender announcement is made. Inmates are provided this information also through a housing unit poster, the PREA poster Report Sexual Assault Now, and within the Inmate Handbook. One posting informs the inmates "You are required to be properly dressed at all times when not using the shower. Female staff are assigned to this unit and will be making rounds throughout the day and night." This posting is also posted in the female units with reference to male staff. The PREA poster and Inmate Handbook state, "ENCOUNTERS WITH STAFF OF THE OPPOSITE SEX: Male and female employees may enter an inmate housing unit at any time, and possibly an inmate's cell. Both inmates and employees are expected to act in an appropriate and respectful manner at all times. Inmates are required to be properly dressed inside their housing units - except for bathing/sanitation purposes. This shall be announced throughout the day. Inmates who fail to follow these rules shall be disciplined." Staff are also provided training on rounds to help assure compliance with the standard that limits cross-gender viewing during annual in-service training. Staff and inmates indicated that announcements are made when the opposite gender staff and visitors enter the housing units.

Policy 12.14.00 Section 12.14.04 Admission Procedures states, "If the genital status of an incoming inmate, detainee or prisoner is unknown upon admission, it may be determined during a staff conversation with the individual, by reviewing previous medical records or, if necessary, as part of a broader medical examination conducted in private by a qualified health care practitioner. Examination results shall be documented. No inmate, detainee or prisoner shall be searched or physically examined for the sole purpose of determining genital status. During the admission/intake process, Correctional Officers shall stop a strip search when it becomes evident that an incoming inmate, detainee, or prisoner is cross-gender. The individual shall be placed immediately into a separate holding cell and the Watch Commander shall be notified. A qualified health care practitioner shall then conduct a private medical assessment, which shall be properly documented. A "Statement of Search" Acknowledgement Form shall also be completed. The cross-gender inmate, detainee or prisoner shall only be pat or strip searched according to their stated preference." The policy also states, "During the DHOC admission process, a Booking Officer shall ask the cross-gender inmate or detainee to identify which gender they prefer as a search preference. A "Statement of Search" Acknowledgement Form shall be completed by the inmate/detainee to verify their stated preference. Once this preference is known, the Sheriff's Office shall only pat or strip search the inmate/detainee by a Correctional Officer who matches the stated preference, except during an exigent circumstance. The Booking Officer shall also note this stated preference into

OMS and other intake screening forms.” The Statement of Search Acknowledgement Form was implemented in early 2021. The form captures the inmate’s name, number, preferred pronoun, preferred name, search gender preference, the inmate’s signature, booking staff signature, and supervisor’s signature and date. The form informs the inmate that “While in custody of the Bristol County Sheriff’s Office, I understand that I will be searched in accordance with the preference I have chosen above. I understand that I will be searched by an Officer who is trained in such searches. I understand that in an exigent situation, such as a situation where the safety of staff or other inmates are at risk, I may be searched by an Officer or staff member of any gender. I also understand that if I change my mind or circumstances warrant a change in my decision, I will notify my Classification Counselor, Unit Supervisor or medical personnel.” Interviews with staff confirmed these practices and their knowledge of the policy language. They stated they would contact the Watch Commander if the situation would occur. The Auditor interviewed a transgender inmate that stated she has not been strip-searched for the sole purpose of determining her genital status. The review of the policy and training lesson plans demonstrated the reinforcement of these policies during the annual training. The facility noted there were no searches of this manner during the audit period.

Staff receive training in conducting pat down searches, cross-gender pat down searches, searches of transgender and intersex inmates in a professional and respectful manner as documented in Lesson Plan: Search Protocols and the Lesson Plan Prison Rape Elimination Act. Correctional staff receive this training as part of orientation training and annual in-service training. The review of the training lesson plans showed the search procedures and policy and procedures are covered in the annual training. The staff interviewed acknowledged receiving search training as part of annual in-service. However, half of the staff interviewed were unable to explain the process of pat searching a transgender or intersex inmate. Staff stated a female officer would search areas that were of female anatomy and male officers would search male anatomy areas. Training documentation was provided that showed that security staff signed Training Attendance Sheets documenting they have received and understood cross-gender pat-down searches and searches of transgender inmates. In 2020, 99% of staff completed the training, 13 staff had not completed who were on Family Medical Leave Act, worker’s comp, or out on illness. The facility anticipates 100% compliance in 2021 through annual in-service training that is currently in progress.

Did Not Meet: Staff interviewed lacked knowledge of the proper procedures for transgender pat-down searches. Staff were not clear on how to complete the search or would conduct a search with a male and female staff member. Staff need refresher training on the appropriate method to conduct transgender pat-down searches.

Corrective Action Taken: The agency provided refresher training to staff through a training bulletin on November 3, 2021. The training bulletin stated, “A reminder to all Security Staff that during the booking process, all cross-gender Inmates (transgender, intersex, gender non-conforming individuals) will be pat searched or strip searched by a Correctional Officer who matches their stated preference, as specified on their "Statement of Search" Acknowledgement Form absent exigent circumstances. If a Correctional Officer is not immediately available at the time of search, the Watch Commander shall be notified. The Inmate, detainee or prisoner shall be temporarily placed inside a holding cell until the search can be properly conducted. Staff must ensure the individual is asked to complete a "Statement of Acknowledgement Form" which will allow the Inmate to inform staff as to their preferred pronoun, preferred name, and search gender preference. Staff shall adhere to these stated preferences, absent exigent circumstance, which must be documented. *Staff shall ensure that each time any cross-gender Inmate needs to be strip-searched that the Inmate completes the "Statement of Acknowledgement Form" each time.*

Staff shall ensure a signed copy is placed in the Inmates jacket, the original is given to Classifications to be placed in the Inmates 6-part folder and a copy is sent to the Superintendent's Wing. Once booking is completed, it will be important to ensure booking staff notifies the Watch Commander so that the Inmates placement into a housing unit is known by the Zone Supervisors and all staff assigned to the respective unit. The agency provided sign off sheets that documented staff receiving refresher training by staff signatures to demonstrate compliance. Substantial compliance has been met.

Standard 115.16: Inmates with disabilities and inmates who are limited English proficient

15.16 (a)

- 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 ☐ No
- 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 ☐ No
- 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 ☐ No
- 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 ☐ No
- 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 ☐ No
- 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 ☐ No
- Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing? ☒ Yes ☐ No

- 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 ☐ No
- 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 ☐ No
- 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 ☐ No
- 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 ☐ No

115.16 (b)

- Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient? ☒ Yes ☐ No
- Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary? ☒ Yes ☐ No

115.16 (c)

- 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 ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Policy 03.06.00 Section 03.06.10 Disabled Inmates, Detainees, and Prisoners states, "Appropriate steps shall be taken to ensure that any inmate (as defined) with a verifiable disability shall have equal opportunity to participate in, or benefit from, all aspects or efforts to prevent, detect, and respond to sexual abuse or sexual harassment. (Examples of a "verifiable disability" include those who are deaf or hard of

hearing, blind or with low vision, or with intellectual, psychiatric, speech or physical disabilities.) The following shall be provided for them: access to interpreters for those who are deaf or hard of hearing, ensuring effective communications; access to interpreters who can interpret effectively, accurately and impartially; access to written materials in formats or method that ensure effective communication for those with disabilities, including those with intellectual disabilities, low reading skills, or who are blind or with low vision; access to translated materials regarding the prevention and reporting of sexual abuse (such as Spanish or Portuguese handbooks, posters, etc.) for those who cannot understand English; access to a language line translation service for those who are limited English proficient; and access to provisions for communicating with employees about sexual abuse for those who are LEP, deaf, speech or sight impaired, or with limited reading abilities. The Sheriff's Office is not required to take action which can be demonstrated to result in a fundamental alteration in the nature of a service, program, or activity, or in undue financial and administrative burdens, as those terms are used in regulations promulgated under Title II of the Americans with Disabilities Act." The PREA Compliance Manager shared the Sheriff's Office and the Contracted Medical Provider work jointly to ensure that disabled inmates receive proper care and access to benefit from all aspects to prevent, detect, and respond to sexual abuse and harassment. This occurs during booking/admission and throughout incarceration. A TTY line has been established for deaf or hard of hearing inmates. The agency has a contract with Securus for the inmate phone system that requires a hearing aid compatible handset, volume controls which allow inmates to amplify the called party's voice, be compatible with telecommunications with the deaf (TDD/TTY) and the TDD/TTY equipment shall contain a display and a printer device. Staff are trained on how to interact with inmates with disabilities and limited English through the Lesson Plan: Inmates with Special Needs. Training records documented training through staff signatures on the Training Attendance Sheets. The PREA Coordinator shared all inmates would be assessed during their intake and strategies would be initiated to ensure comprehension. For a deaf/hearing impaired inmate, booking staff and the inmate's Classification Counselor would utilize their computer or a pad and write back and forth to ask/answer all questions. The Massachusetts Commission for the Deaf would be contacted if a sign language translator was necessary. For a blind/low vision inmate, the booking staff and their Classification Counselor would read each form to the inmate during booking and orientation. The facility utilizes telephonic TTY services to aid staff in communicating important information to each deaf or hard of hearing inmate or through written materials, exchange written notes, and use of sign language interpreters. For inmates with low vision or blind, staff is trained to assist the inmate by reading the PREA information to them and the audio of the PREA video to assist their comprehensive of policies and procedures. Staff indicated they would read information to the inmate if needed. Inmates that may have intellectual, psychiatric, or speech disabilities would be provided education and services as any other inmate through medical and mental health staff. The Auditor interviewed a hearing-impaired inmate that shared a Classification Counselor provided him PREA information through a paper he would read. He understood the PREA information that was provided to him. He stated at first the Classification Counselor told him that medical would assist him as needed, and medical told him the Classification Counselor would assist. He said the PREA Coordinator resolved the issue, and a Classification Counselor and an officer assists him when needed. He understood how to report and indicated he would report by the phone number on the poster or by telling a correctional officer.

Policy 03.06.00 Section 03.06.11 Translation Services states, "The Sheriff's Office shall take reasonable steps to ensure that meaningful access to all aspects of its efforts to provide, detect, and respond to sexual abuse and sexual harassment are provided to all inmates (as defined) who are limited English proficient. This includes providing interpretative services that can interpret effectively, accurately, and

impartially, both receptively and expressively, while using any necessary specialized vocabulary. Such inmates shall have access to PREA related materials translated into Spanish and Portuguese during admission/intake and throughout their incarceration/detention. A Translation Assistance Line shall also be available so that critical PREA information is communicated to them in a timely manner. The use of the Translation Assistance Line shall be documented. The PREA Coordinator, Central Classification, and other supervisors shall be notified whenever the translation line is used.” The agency provides the Inmate Handbook, the PREA information poster, and the BCSO Orientation Sheet in handouts in English, Spanish, and Portuguese. The PREA Compliance Manager shared the agency provides a translation line for inmates who are not English proficient. The line is used to assist with inmate orientation, when necessary. Also, Spanish and Portuguese PREA orientation forms are used, when needed. Numerous employees also speak Spanish and Portuguese to assist in translation of information to inmates, as needed, which is documented. This agency provides translated (English, Spanish, Portuguese) inmate handbooks. Posters and other communication tools relative to PREA are also translated. The PREA video presented to inmate on the CCTV system is also translated in Spanish. The PREA Coordinator, Watch Commander, Central Classification, and other supervisors are to be notified whenever the translation line is used. Any use of the translation services lines, or any other special provisions or accommodations will be documented. The agency has a contract with Certified Languages International to provide telephone interpreting services dated December 23, 2013. The Superintendent stated LEP inmates are provided PREA information through the use of the language line, staff interpreters, the PREA paperwork in three languages, and the PREA video. The Auditor interviewed five Spanish LEP inmates through an interpreter. Two of the five inmates remember receiving PREA information in Spanish through a staff interpreter, a paper in Spanish, and observing PREA posters in Spanish. One inmate stated he received information in English and another inmate read it to him. Two of the inmates said they did not receive information in Spanish; however, they remember a language line used to communicate with staff. All the inmates knew how to report including telling a staff member, tell another inmate, call the number listed on the poster, and write a note. The Auditor reviewed the inmate’s files and could not determine if PREA information was provided to the LEP inmates in a manner they understood. The pre-audit documentation of booking forms for three inmate showed translation services were used during intake and PREA handouts were provided in a language the inmate understood. This was documented through a note within OMS for all three inmates (two Spanish, one Portuguese).

Did Not Meet: LEP inmates are not provided 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. Inmates stated they did not receive PREA information in a language they understand and was not documented through the inmate file review. Three LEP inmates stated they were not provided PREA information in a language they understand, the information was provided in English for Spanish inmates or was not received. The facility needs to demonstrate staff are trained in providing information/education on how to communicate and provide LEP inmates including the use of the translation line, staff interpreters, or other methods and be documented of the method utilized to demonstrate compliance.

Corrective Action Taken: The agency provided specialized training for staff assigned to Booking/Admissions (Dispatch) and Classification Counselors on November 10, 2021. As part of the training, the need for LEP inmates to understand PREA training material was reinforced and that the Spanish or Portuguese PREA Notification Form is signed by those inmates who are more proficient in those languages. The PREA Remedial Training handout stated, “While conducting the PREA Assessment on a New Commit, the PREA Information/Booking Form must be provided to the inmate in their chosen language especially when the translation line is used. You can have

them sign the English version in OMS (Offender Management System), but we also need to have the inmate sign the hard copy in their chosen language. The Form is currently available in hard copy at the Booking Station in both Spanish and Portuguese to be handed to the inmate. We are working on having these forms uploaded to OMS in both Spanish and Portuguese. While going through this Form, please be sure to ensure that the inmates are particularly aware of the following: How to report a PREA incident and how to access the Handbook located in all the Law Libraries. The Handbook will eventually be uploaded to the Tablets in English, Spanish and Portuguese.” The facility provided documentation of the training through staff signatures on the Meeting Attendance Sheet to demonstrate compliance. Substantial compliance has been met.

Policy 03.06.00 Section 03.06.11 Translation Services states, “No inmate shall be utilized as an interpreter, reader, or for any other type of translation assistance, except in limited circumstance where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of Staff First Responder duties, or during an investigation of inmate allegations.” The PREA Compliance Manager shared inmate translators, readers or assistants are not permitted, except during exigent circumstances established in policy and there has been no use of inmate translators to exigent circumstances during the audit period. If an incident would occur, it would be documented on an incident report or OMS by the involved staff. The Superintendent stated the facility would use interpretation services or staff interpreters and would not use inmate interpreters. Random staff interviewed stated they would communicate with LEP inmates through a staff interpreter or the language line. Two staff shared they may use an inmate interpreter if there were exigent circumstances where the first responder could not do their duties, or it would impede the investigation. None of the staff interviewed knew of an instance when an inmate was used as an interpreter. There were no instances where an inmate interpreter was utilized during this audit timeframe.

Standard 115.17: Hiring and promotion decisions

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.17 (a)

- 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 ☐ No
- 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 ☐ No
- 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 question immediately above? ☒ Yes ☐ No
- 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 ☐ No

- 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 ☐ No
- 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 question immediately above? ☒ Yes ☐ No

115.17 (b)

- Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates? ☒ Yes ☐ No

115.17 (c)

- Before hiring new employees, who may have contact with inmates, does the agency: perform a criminal background records check? ☒ Yes ☐ No
- 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 ☐ No

115.17 (d)

- Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates? ☒ Yes ☐ No

115.17 (e)

- 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 ☐ No

115.17 (f)

- 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 ☐ No
- 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 ☐ No

- Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct? ☒ Yes ☐ No

115.17 (g)

- Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination? ☒ Yes ☐ No

115.17 (h)

- 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 ☐ No ☐ NA

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Through the review of Policy 03.06.00 Section 03.06.22 Employment, Training, and Education and 03.01.00 Human Resource Management it demonstrated the agency has established a system of asking applicants the three administrative adjudication questions and conducting criminal background checks for new employees, promotional employees, volunteers, and contractors who have contact with inmates. Policy 03.06.00 Section 03.06.22 states, "The Sheriff's Office shall not hire or promote anyone who may have contact with inmates and shall not enlist the services of any contractor who may have contact with inmates, who has: (a) engaged in sexual activity in a correctional facility, jail, lockup, or other institution (as defined in 42 U.S.C. 1997); (b) been convicted of engaging or attempt to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or (c) been civilly or administratively adjudicated to have engaged in the activity described in section b above." The policy also states, "Material omissions regarding misconduct or the provision of materially false information by an employee shall be grounds for termination." Policy 03.01.00 Human Resource Management outlines that to be considered viable for a position within the Sheriff's Office, job applicants must successfully pass a CORI/Criminal Records check and comply with the employment/hiring standards of the 2013 National PREA Standards. The Employment Application form under PREA Standard asks the three administrative adjudication questions of applicants. The application form also informs applicants that "be advised that material omission regarding such misconduct or the provision of materially false information shall be grounds for termination (for employees) and non-hire (for applicants)." The application form is utilized for new hires and promotions. The Human Resource staff member interviewed, Assistant Deputy Superintendent of Human Resources, stated the administrative adjudication questions are asked on the application form when

applying and also during interviews. If there was an affirmative answer, the application would go no further in the hiring process, and it would be discussed with the legal department. The Auditor reviewed ten employee personnel files, four contractor files, and three volunteer files. All the files documented the applicant (employee), contractor, and volunteer were asked the three administrative adjudication questions as part of the employee application process and as part of the background check process for contractors and volunteers.

Policy 03.06.00 Section 03.06.22 states, "The Sheriff's Office shall consider any incidents of sexual harassment in determining whether to hire or promote anyone or to enlist the services of any contractor who may have contact with inmates." The PREA Compliance Manager shared as part of the hiring selection process, the agency shall consider incidents of sexual harassment in determining to hire or promote anyone or enlist the services of a contractor with inmate contact. During the interview with the Human Resource staff, she stated that sexual harassment is considered as part of the application process and the background investigators would research for sexual harassment as part of the background check process. The Sheriff would consider if the individual would be hired or if a volunteer or contractor would be allowed within the facility to provide services to the inmate population.

Policy 03.06.00 Section 03.06.22 states, "Before hiring new employees who have contact with inmates and detainees, the Sheriff's Office shall perform criminal background checks (CORI, BOP, etc.) and, consistent with federal, state and local law, make its best effort to contact all the prior agencies noted for information on substantiated allegations of sexual abuse or any resignation occurring during a pending investigation or allegation of sexual abuse. The Sheriff's Office shall perform a criminal background check before enlisting the services of any contractor who may have contact with inmates or detainees. The Sheriff's Office shall conduct at least one, annual criminal background check (CORI, BOP, etc.) on all current employees and contractors who may have contact with inmates and detainees." Policy 03.01.00 Human Resource Management states, "CORI/Criminal Records Check shall be conducted for each submitted job applicant, in accordance with state/federal law. This check shall detect whether a job applicant has any previous criminal convictions which may reasonably be related to possible job performance. CORI/Criminal Record Checks shall be considered confidential, and results shall only be brought to the attention of employees with a legitimate need to know." The PREA Compliance Manager shared comprehensive background checks are conducted on job applicants. The Special Investigations Unit (SIU) conducts the investigations. The individual must complete the Background Investigation Application Review Statement of Truthfulness and Fact and the Bristol County Sheriff's Office Background Waiver forms. The individual must acknowledge on the Background Investigation Application Review Statement of Truthfulness and Fact form that "I have personally reviewed a copy of my application of employment for the position of _____ (position is written in) with the background investigator for the Bristol County Sheriff's Office. I understand that the background investigator did instruct me that this was my last opportunity, prior to the completion of his/her investigation to make changes or fill in incomplete information on this copy of the application. I understand that truthfulness is a prime consideration for my employment and that any false, misleading, or intentionally incomplete information (or appears to be intentionally incomplete) will be grounds for denial of employment and the continuance of the hiring process. I fully and freely accept this opportunity and affirm the statements on my application to be true and complete." On the Bristol County Sheriff's Office Background Waiver form, the applicant must acknowledge through a signature and date that "I hereby release, discharge and exonerate the Bristol County Sheriff's Office, its agents and representatives and any person so furnishing information from any and all liability of every nature and kind arising out of the furnishing or inspection of such documents, records and other information or the investigations made by or on behalf of the Bristol County House of Correction. I further understand that the Sheriff's Office will conduct a background investigation, which will include a criminal record check with the local Police Department, the State Police, the FBI and the Massachusetts Board of Probation." Once a review of the application is completed, all suitable

applications are forwarded to SIU to run background queries on the applicant for criminal history, warrants, driver license check, any open cases, and any criminal history for disqualification. Applicants that pass this step are then forwarded for a formal background investigation which includes requesting information from police departments from the current resident location and all other residential locations know; high school and college records; house checks; and review of previous background checks. The formal background check will not be completed till all information is received and reviewed. Once an application passes the two-step background check; an interview will be scheduled with the applicant. During the interview, the applicant will be asked the questions again. The Human Resource staff member stated SIU would highlight if there were any concerns and each individual would be considered for hiring or the enlist of services based on the background findings based on the administration and legal department's review. Human Resource staff also indicated that background checks are completed annually on all employees and every six months for contractors. The PREA Compliance Manager shared the agency conducts annual background checks on employees and contractors who may have contact with inmates and questionable results are referred to the Superintendent's Office for review. The Auditor reviewed ten employee personnel files, four contractor files, and three volunteer files. The employee files documented an initial background check prior to hiring and an annual background check. The contractors and volunteer files documented an initial background check prior to the enlistment of services. The annual background checks were completed on the contractors. The facility had no volunteers providing services due to COVID protocols. The file of the intern documented background checks every six months. There were twenty-five new hires during the audit period and background checks completed on new hires. Of the employee files reviewed, two were new hires and the files documented background checks prior to hiring. Background checks are completed on all contractors and volunteers prior to entrance to the facility. Two of the contractor files reviewed were hired within the audit period and both had completed background checks before they were hired for services.

Policy 03.06.00 Section 03.06.22 states, "All job applicants and employees with inmate/detainee contact shall be asked directly about any previous misconduct described in 03.06.23 A (1) in written applications, job or promotional interviews, and in any interviews or written self- evaluations conducted as part of current employee reviews. The Sheriff's Office shall also impose upon employees a continuing affirmative duty to disclose any such misconduct." The agency asks all applicants and employees about previous misconduct through the application process and the promotional questionnaire. These questions are also part of the interview process. The agency also has a continuing affirmative duty to report any criminal misconduct. The Human Resource staff member stated the employee is to report to the supervisor then to SUI division. An investigation would be conducted. The employee could be placed on administrative leave during the investigation based on charges. Once the investigation and the legal outcome is completed, a determination would be made on the employee's employment. The duty to report is addressed in Lesson Plan: Prison Rape Elimination Act. All employees are required to verify their understanding of their duty to report through their signature of understanding the agency's procedures on the prevention of sexual abuse, their duty to report such incidents to proper officials and other PREA policies during annual training.

Did Not Meet: There is no documented practice of the agency asking employees about previous misconduct in written self-evaluations. The facility must develop a process to ask employees about previous misconduct during self-evaluations.

Corrective Action Taken: The agency developed an Annual PREA Form, which will be signed by staff during yearly in-service to ask staff about previous misconduct on an annual basis. Additionally, a PREA Questions/Promotional Interviews Form was created to demonstrate the requirement that staff are asked about previous misconduct during job promotions. The form will be included in future promotional interviews conducted within the agency. The facility had no

promotional interviews conducted since the creation of the form and submittal of the documentation. The facility provided documentation of the six Annual PREA Forms completed in November 2021 to demonstrate compliance. Substantial compliance has been met.

Policy 03.06.00 Section 03.06.22 states, "Upon receiving a request from an another agency or company for whom a current or former employee has applied for work, the Sheriff's Office shall provide information on substantiated allegations of sexual abuse or sexual harassment to that agency or company, unless prohibited by law." During the interview with the Human Resource staff member, she stated a release would be needed from the employee before any information could be disclosed. The PREA Compliance Manager shared there have been no requests made from outside employers relative to the requirements of the standard since the previous PREA audit.

Standard 115.18: Upgrades to facilities and technologies

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.18 (a)

- 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 ☒ No ☐ NA

115.18 (b)

- If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)
☒ Yes ☐ No ☐ NA

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Policy 03.06.00 Section 03.06.05 Prevention Measures and Planning states, "If the Sheriff's Office designs or acquires a new facility/lockup or is planning a substantial expansion or modification to an existing

facility/lockup, the effects of the design, acquisition, expansion, or modification shall be considered with regards towards protecting all inmates from sexual abuse. If installing or updating a video monitoring/electronic surveillance system or other monitoring technologies within a new or existing facility/lockup, the Sheriff's Office's ability to protect all inmates from sexual abuse shall be considered. Security monitoring systems shall remain operational throughout the facilities." The PREA Compliance Manager shared the agency is not current designing, nor acquiring, any new facilities or planning on any substantial expansions or modifications of existing facilities. When the Bristol County Sheriff's Office works with state officials on security related issues, the protection of inmates from sexual abuse would factor into these decisions. The Superintendent stated there has been no substantial expansions or modifications to the facility. The Superintendent did state the agency has updated the video monitoring system through the addition of 100 cameras.

The complex is monitored by exterior and interior cameras. The DHOC has 311 cameras (258 interior/ 53 exterior). The cameras are monitored through the control center. The Ash Street Jail has 26 cameras (18 interior / 8 exterior). The majority of the cameras are fixed. An expansion of the video monitoring system occurred in 2019-2020, adding 100 additional cameras and changing out the fixed cameras. Cameras are located throughout the facility including in hallways, intake, kitchen, medical, commissary, laundry, program areas, special management housing, and housing areas. The outside perimeter and administrative building are also observed through cameras. Cameras operate on a thirty (30) day recording system with certain areas that are able to record for a longer period of time.

Policy 03.06.00 Section 03.06.05 also states, "The effectiveness of existing security operations, physical barriers, staffing levels, and technology will be discussed as necessary during PREA Committee Incident Reviews and other related meetings. Corrective measures shall be taken when physical barriers or other conditions may impede the sight and sound of all inmates." The PREA Coordinator stated he conducts monthly PREA Review Committee Meeting. During these meetings, the committee will discuss the effectiveness of security operations, physical barriers, staffing levels, technology, and other PREA related issues. Any corrective action or recommendations will be reviewed and incorporated in appropriate corrective plans. If technology, this would be shared with the Superintendent.

RESPONSIVE PLANNING

Standard 115.21: Evidence protocol and forensic medical examinations

115.21 (a)

- If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)
☒ Yes ☐ No ☐ NA

115.21 (b)

- Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.) ☐ Yes ☐ No ☒ NA
- 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 ☐ No ☐ NA

115.21 (c)

- 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 ☐ No
- Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible? ☒ Yes ☐ No
- 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 ☐ No
- Has the agency documented its efforts to provide SAFEs or SANEs? ☒ Yes ☐ No

115.21 (d)

- Does the agency attempt to make available to the victim a victim advocate from a rape crisis center? ☒ Yes ☐ No
- 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? ☒ Yes ☐ No
- Has the agency documented its efforts to secure services from rape crisis centers? ☒ Yes ☐ No

115.21 (e)

- 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 ☐ No
- As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals? ☒ Yes ☐ No

115.21 (f)

- If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating entity 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 ☐ No ☒ NA

115.21 (g)

- Auditor is not required to audit this provision.

115.21 (h)

- 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 attempts to make a victim advocate from a rape crisis center available to victims per 115.21(d) above.] ☐ Yes ☐ No ☒ NA

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

The policies 03.06.00 Section 03.06.14 Evidence Collection; 09.23.00 Control of Evidence, and Lesson Plans Security Procedures and Crime Scene and Evidence Collection outlines evidence protocols for administrative proceeding, criminal prosecutions; and requirements for forensic exams. Policy 03.06.00 Section 03.06.14 Investigations and Evidence Protocols states, "to the extent that the Sheriff's Office is responsible for investigating allegations of sexual abuse, the uniform evidence protocol within 09.23.00 shall be followed. This protocol shall maximize the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. These protocols, based on National PREA Standards, shall be developmentally appropriate for juveniles, where applicable and as appropriate. Only SIU investigators or other qualified persons shall gather, collect, and preserve physical and/or DNA evidence at an incident scene, regardless of the circumstances, including available electronic monitoring data. The location of alleged sexual abuse, such as a cell, shall remain closed until so ordered by SIU Investigators. Evidence may be collected within 96 hours from the reporting of the alleged incident. Evidence collection shall be properly documented." The agency does not house juvenile /youthful offenders; however, the agency has policy language if the situation would occur. Policy 03.06.00 Section 03.06.14 states, "Forensic medical examinations conducted for a juvenile shall follow the publication "A National Protocol for Sexual Assault and Medical Forensic Examination, Adults/Adolescents" or similarly comprehensive and authoritative protocols developed after 2011." Policy 09.23.00 Control of Evidence is the uniform evidence protocol utilized if physical evidence is to be collected. The policy outlines definitions: evidence control officers; initial response to a crime/incident scene; notification procedures; collecting and processing evidence at the scene; evidence collecting techniques; handling and collecting drugs/narcotics; handling and collection specific types of evidence; submission of evidence; long term

storage of evidence; and destruction of evidence. The Bristol County Sheriff's Office is responsible for administrative and criminal investigations. The agency will referral allegations for investigations to the Massachusetts State Police when staff are involved. The PREA Coordinator stated all correctional staff, including SIU investigators, receive evidence collection training both at the academy and at in-service training. The SIU was also provided additional evidence collection training during 2021. Both administrative and criminal investigations and evidence collection start immediately following an allegation. The investigators complete the Sexual Assault Notification Form which has sections that address evidence protocols including securing the crime scene, was a rape kit conducted at the outside hospital, and a summary of the incident including evidence collected. Also, to ensure evidence is not destroyed, staff are trained on first responder duties that includes securing the scene and requesting the involved inmates not to destroy evidence. The Sexual Abuse/Assault Record Checklist utilized by the Watch Commander has a section that states "Inmate (victim) is TO BE in CONSTANT supervision of security staff so as to not destroy any evidence by showering, toileting, washing, brushing teeth, changing clothes, etc. until seen and cleared by Medical Staff for PREA assessment. The form also captures if the crime scene was secured with the date and time. The investigators complete the Evidence Collection Form and the Evidence Submission Form for evidence collected. An interview was conducted with the Chief Unit investigator who oversees the investigation process and conducts inmate-on-inmate administrative and criminal investigations and staff-on-inmates administrative investigations. The interview confirmed the PREA investigation practices including the uniformed evidence protocols. Random staff interviewed was knowledgeable on the agency's protocol for obtaining usable physical evidence. The staff stated the inmates are separated and under constant observation to protect evidence, inmates are requested not to destroy any evidence (not to shower, brush teeth, use the restroom, change clothes), secure the crime scene until SIU clears the scene, preserve any evidence, and contact the Watch Commander.

Policy 03.06.00 Section 03.06.20 Access to Emergency Medical and Mental Health services states, "Following a reported act of sexual abuse and/or where evidentiary or medically appropriate, a qualified medical practitioner shall authorize free transport of the victim and/or perpetrator(s) to an outside hospital or rape crisis center. There, a qualified Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) practitioner shall conduct a forensic examination, as well as provide specialized medical attention, as needed. A qualified SANE or SAFE practitioner shall be an individual who has been screened for appropriateness to serve in this role and has received education concerning sexual assault and forensic examination issues in general. Alleged victims who are transported to a local hospital or rape crisis center may receive essential medical attention upon arrival, as clinically indicated. Crisis intervention, HIV/AIDS prevention treatment, or treatment for other sexually transmitted diseases and pregnancy testing (when applicable) shall be provided, as clinically indicated. The protocols established by the hospital or rape crisis center regarding consent and the collection of forensic evidence shall be followed. All forensic medical exams by SAFE or SANE practitioners shall be free-of-charge for inmates, detainees and prisoners." The Correctional Psychiatric Services (CPS) Policy CPS J-F-06 Response to Sexual Abuse states, "When a CPS qualified health care professional is informed that an inmate or detainee may have been the victim or perpetrator of sexual abuse, s/he shall also take these actions: refer the involved inmates to a hospital in the community, if clinically indicated, for further assessment and treatment of acute medical problems and order that the victim be transported to a hospital in the community for the collection of forensic evidence and specialized sexual assault services if so ordered by the BCSO. This hospital shall be able to obtain the services of a Massachusetts Sexual Assault Nurse Examiner (SANE) and of a rape crisis program designated by the Massachusetts Executive Office of Health and Human Services." The policy also states, "CPS staff members are prohibited from collecting forensic information." Through the medical staff and Investigator interviews, they stated all alleged victims of sexual assault who require a forensic exam will be taken to the local hospital emergency department for completion of the forensic exam and emergency medical care. The medical staff stated forensic

examinations conducted by SANE/SAFE staff and emergency medical care are provided at the local hospital with no cost to the inmate. The Massachusetts Department of Public Health has Memorandum of Understandings (MOU) with the Charlton Memorial Hospital and St. Luke's of New Bedford for the Sexual Assault Nurse Examiner Program. The MOUs establish the terms and conditions for the planning, implementation, operation, and evaluation of the Sexual Assault Nurse Examiner (SANE) Program to provide sexual assault care to patients seeking sexual assault services through the emergency department. A letter from the Southcoast Health System confirms the Bristol County Sheriff's Office is covered by the MOUs and that "Southcoast Hospitals Group, Inc., dba Charlton Memorial Hospital, St. Luke's Hospital and Tobey Hospital provides both outpatient emergency and inpatient emergency services to inmates housed at the Bristol County House of Corrections at the Dartmouth and New Bedford, Massachusetts locations." An interview was conducted with a representative of the St. Luke's Hospital of New Bedford regarding the Sexual Abuse Nurse Examiner (SANE) services provided at the hospital. The SANE nurse interviewed stated the hospital has SANEs working on shift within the emergency department and indicated all emergency room nurses are a trained SANE/SAFE. The statewide SANE Program is also available if a nurse is not available on duty or on-call. A state SANE staff is available within 3-4 hours and is dedicated only to that victim. The PREA Compliance Manager shared the contracted medical provider for the agency does not conduct SANE exams on property and the agency has contracts with local hospitals to conduct SANE exams, as necessary. There have been no allegations at the Dartmouth Complex or Ash Street Jail where a SANE exam was conducted by a SANE or SAFE within the audit period. From the Auditor's review of the investigative files, there was no allegation that required a forensic examination during the audit period.

Policy 03.06.00 Section 03.06.20 Access to Emergency Medical and Mental Health services states, "Alleged victims of sexual abuse shall have access to a victim advocate from a local rape crisis center (such as the New Bedford Women's Center) or local hospital. If an alleged victim is transported to an outside hospital that offers victim advocacy services, they shall be allowed to use such services to the extent available, consistent with security needs. An alleged victim can be accompanied and supported by a victim advocate through the forensic medical examination process and investigatory interviews. They shall provide emotional support, crisis intervention, information, and referrals. If a victim advocate assists an alleged victim during a forensic exam, this should be documented into the medical record. If a victim advocate assists during an investigatory interview, this fact shall be documented by the PREA Investigator." The PREA Compliance Manager shared the agency has a MOU with the New Bedford Women's Center to provide victim advocate service to all inmates and detainees. Information on access to the New Bedford Women's Center is communicated with posters, in the inmate handbook, and other means of communication. The PREA Compliance Manager also shared that the New Bedford Women's Center is not required to inform this agency when an inmate or detainee has asked for their support, although victim advocates have met with inmates and detainees. The representative interviewed from St. Luke's stated a victim advocate will be provided to the victim upon request to provide emotional support through the forensic medical examination and investigation interviews. These services are provided through the New Bedford Women's Center through scheduled hours and on-call. Bristol County Sheriff's Office has a MOU with the New Bedford Women's Center to provide victim advocate services to inmates. The agreement outlines the services provided including: responding promptly to allegations of sexual abuse or sexual harassment; report allegations of sexual abuse or sexual harassment to the Sheriff's Office while maintaining confidentiality as required by state standards for certified crisis counselors and the New Bedford Women's Center; provide emotional support, crisis intervention, information, and referrals to offender victims of sexual abuse; accompany and support victims of sexual abuse through the forensic medical examination process, investigatory interview, when requested by the victim; communicate any questions and communication to the PREA Coordinator and other relevant personnel; provide training for Sheriff's Office employees when requested; and comply with National PREA Standards. Through an interview with a New Bedford Women's Center representative, she stated

emotional support services is provided for a forensic exam at the hospital and the Center tries to mandate a follow-up face to face meeting however an inmate can decline. She also stated most emotional support services are provided over the phone to inmates at the facility, however, individual meetings can be set up. Inmates can contact the agency by dialing the hotline on the phone system. This information including address and phone number are provided to the inmates on the PREA poster and in the Inmate Handbook.

Policy 03.06.00 Section 03.06.15 Referrals to Outside Investigative Agencies/Criminal Investigations states, "When a substantiated allegation of sexual abuse or harassment appears to be criminal in nature, the case shall be referred to an outside investigative agency that has the legal authority to conduct a criminal investigation. Such referrals shall be documented. The outside agency shall then conduct an administrative or criminal investigation on the allegation of sexual abuse or sexual Harassment. Outside state or federal agencies responsible for conducting criminal investigations of alleged inmate sexual abuse shall do so pursuant to National PREA Standards." The PREA Compliance Manager shared that the Special Investigations Unit has been assisted by the Massachusetts State Police on PREA investigations pertaining to possible sexual abuse in the past, however, no request to the State Police has been necessary within the audit period. The agency has a MOU with the Massachusetts State Police effective April 12, 2018. The MOU outlines the requirements for PREA investigations. Staff involved allegations are referred to the Massachusetts State Police. The Superintendent stated in a memo to file, "Under PREA Standard 115.21 (f) the current Memorandum of Understanding Between the Bristol County Sheriff's Office and The Massachusetts State Police Regarding the Prison Rape Elimination Act (PREA) is still in effect and has been in effect since the signed agreement back in 2018.

Standard 115.22: Policies to ensure referrals of allegations for investigations

115.22 (a)

- Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse? ☒ Yes ☐ No
- Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment? ☒ Yes ☐ No

115.22 (b)

- Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior? ☒ Yes ☐ No
- Has the agency published such policy on its website or, if it does not have one, made the policy available through other means? ☒ Yes ☐ No
- Does the agency document all such referrals? ☒ Yes ☐ No

115.22 (c)

- If a separate entity is responsible for conducting criminal investigations, does such publication 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 ☐ No ☐ NA

115.22 (d)

- Auditor is not required to audit this provision.

115.22 (e)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

The agency's Policy 03.06.00 Section 03.06.14 Investigations and Evidence Protocols states, "Only qualified SIU investigators shall conduct an initial investigation whenever there is a report of first-hand knowledge, suspicion, or other information regarding an allegation of sexual abuse or harassment. This includes any third party or anonymous allegations/reports. Such investigations shall be conducted promptly, thoroughly, and objectively." The Superintendent stated all allegations are referred immediately for investigation and an investigator from the SIU conducts the investigation. If the allegation involves staff or a criminal investigation is warranted, the Massachusetts State Police is contacted to conduct the investigation. Policy 03.06.00 Section 03.06.14 states, "Within 72 hours from the start of their initial PREA investigation, the Lead Investigator shall complete a 72 Hour Sexual Abuse Notification Form. This form shall provide a preliminary status report on the investigation up to that point (such as the names of alleged victims/perpetrators, allegations made, summary report, evidence, etc.). A Final PREA Investigative Report shall be submitted by investigators as a result of an initial or administrative PREA investigation." The Superintendent is responsible for assigning the investigation and to oversee the investigation process. The Investigator interviewed stated an investigation would be started immediately once reported during work hours and if after hours the investigator on call would be called to report and begin the investigation.

There were eleven allegations reported during the audit period, ten within the facility and one report from another facility of an incident that occurred at Dartmouth. The ten allegations reported at the facility were one staff-on-inmate sexual abuse, six inmate-on-inmate sexual harassment, and three inmate-on-inmate sexual abuse. Eight cases had completed investigations, two cases were still open investigations, and one case was closed without an investigative outcome. The staff-on-inmate sexual assault was found unsubstantiated. Of the six inmate-on-inmate sexual harassment; two were substantiated, three were unsubstantiated, and one still open. One inmate-on-inmate sexual abuse cases was substantiated, and one was still open. The third inmate-on-inmate sexual abuse investigation had no outcome. The investigation was started and then the victim was released. The victim did not respond to Investigator's request for interviews. The case was closed pending contact with the victim. The case was referred to

the Assistant District Attorney's office. The incident reported by another agency was an inmate-on-inmate sexual abuse. The case had previously been investigated and determined unsubstantiated. There were no cases that warranted prosecution. The Auditor reviewed the eleven administrative investigation files and found investigations were started immediately and completed timely.

Policy 03.06.00 Section 03.06.15 Referrals to Outside Investigative Agencies/Criminal Investigations states, "When a substantiated allegation of sexual abuse or harassment appears to be criminal in nature, the case shall be referred to an outside investigative agency that has the legal authority to conduct a criminal investigation. Such referrals shall be documented. The outside agency shall then conduct an administrative or criminal investigation on the allegation of sexual abuse or sexual harassment." The PREA Compliance Manager shared the agency has a long-standing working arrangement with the Massachusetts State Police to investigate or provide assistance in criminal cases of inmate sexual abuse. He also shared there have been no PREA investigations referred to the Massachusetts State Police during the audit period. During the interview with the SIU investigator, he acknowledged the responsibilities of the Special Investigations Unit and the responsibilities of the Massachusetts State Police in a criminal investigation. The roles and responsibilities of each agency was clearly defined and understood. The agency has a MOU with the Massachusetts State Police effective April 12, 2018, that outlines the requirements for PREA investigations. The agency publishes on the Bristol County Sheriff's Office website, "When a substantiated allegation of inmate sexual abuse or sexual harassment appears to be criminal in nature, the Sheriff's Office shall refer the case to an outside investigative agency that has the legal authority to conduct a criminal investigation, such as the Massachusetts State Police. Such referrals shall be documented. The outside agency shall then conduct an administrative or criminal investigation for the allegations made, according to National PREA standards. The Sheriff's Office shall cooperate fully in this investigation and monitor its progress."

TRAINING AND EDUCATION

Standard 115.31: Employee training

115.31 (a)

- Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment? ☒ Yes ☐ No
- 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 ☐ No
- 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 ☐ No
- 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 ☐ No
- Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement? ☒ Yes ☐ No

- Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims? ☒ Yes ☐ No
- 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 ☐ No
- Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates? ☒ Yes ☐ No
- 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 ☐ No
- 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 ☐ No

115.31 (b)

- Is such training tailored to the gender of the inmates at the employee's facility? ☒ Yes ☐ No
- 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 ☐ No

115.31 (c)

- Have all current employees who may have contact with inmates received such training?
☒ Yes ☐ No
- 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 ☐ No
- 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 ☐ No

115.31 (d)

- Does the agency document, through employee signature or electronic verification, that employees understand the training they have received? ☒ Yes ☐ No

Auditor Overall Compliance Determination

☒ **Exceeds Standard** (*Substantially exceeds requirement of standards*)

- ☐ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

The agency's Policy 03.06.00 Section 03.06.22 Employment, Training, and Education states, "All new employees shall receive initial academy or orientation training on the prevention of sexual abuse and sexual harassment. Such training shall be relative to the degree of contact that a new employee may regularly encounter with the inmate population and their expected duties. Additional PREA training may be provided throughout the first year of employment, as necessary. Consistent with National PREA standards, this initial PREA training shall include a combination of the following: the Sheriff's Office zero-tolerance policy towards the prevention of sexual abuse and an understanding that sexual abuse or assault is never an acceptable consequence of incarceration or detention; definitions and examples of prohibited and illegal behavior; how to fulfill their responsibilities under Sheriff's Office policies and procedures regarding the prevention, detection, reporting and response of inmate sexual abuse and sexual harassment; the rights of inmates, detainees and prisoners to be free from sexual abuse and sexual harassment; the rights of inmates, detainees, prisoners and employees to be free from retaliation for reporting sexual abuse and sexual harassment; the dynamics of sexual abuse and sexual harassment while incarcerated; the common reactions of sexual abuse and sexual harassed victims; how to detect and respond to signs of threatened and actual sexual abuse; how to detect and recognize the physical, behavioral and emotional signs of sexual abuse or assault; how to respond to signs of threatened and actual sexual abuse; how to avoid inappropriate relationships with inmates; how to communicate effectively and professionally with lesbian, gay, bisexual, transgender, intersex or gender nonconforming inmates, detainees and prisoners; how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities; the investigative process and how to prevent evidence from being destroyed; how to report knowledge or suspicion of sexual abuse or assault and make intervention referrals; and any other relevant subject matter, so approved by the Sheriff or his designee." The policy also states, "Seeing that males and females are incarcerated within most Bristol County correctional facilities, all sexual abuse and sexual harassment training shall be tailored to both genders." The Basic Training (initial training) and annual in-service Lesson Plan: PREA Law and the Preventions of Inmate Sexual Abuse and Sexual Harassment address all the required training components of the standard. The course is two-hour classroom training session. All new employees and contractors receive PREA training during Basic Training (initial orientation). Then all employees and contractors receive annual in-service. Staff are prohibited from working with inmates until training is completed. Each staff member is provided an informational card identifying the steps to take as a first responder, reporting requirements, and how to report privately. Training records, staff interviews, policies, and the training curriculums reviewed indicated the training includes all training elements of the standard.

Policy 03.06.00 Section 03.06.22 states, "Employees shall be provided with refresher, in-service PREA training at least once every two years. This is to ensure that they are familiar with current sexual abuse and sexual harassment policies. In years in which employees do not receive the full in-service PREA training class, they shall be provided with various types of refresher information regarding PREA operations and policy updates. The PREA Coordinator may be contacted regarding these lesson plans, as necessary. An electronic version of this policy (03.06.00) shall also be made available through the Sheriff's Office computer system. Hard copies shall be provided upon request." Random staff interviewed acknowledged the numerous methods they receive PREA training including Basic Training, annual in-service, supervisor's updates, the PREA cards, and emails when policies are updated. Staff interviewed

were knowledgeable on the training components and their first responder duties. The PREA Compliance Manager shared the agency provides employee PREA training on a two-year cycle. The first year, they shall receive a comprehensive PREA training during annual in-service and the next year they shall receive PREA refresher training/review during annual in-service. Interviews of random staff and general questions asked during the tour clearly indicate each staff member is very knowledgeable on how to perform their responsibilities in prevention, detecting, reporting, and responding to sexual abuse and sexual harassment. The wide knowledge of PREA policies and procedures by staff confirm the continuous training that occurs through annual in-service and refresher training. The Pre-Audit Questionnaire indicated all staff had completed training, the PAQ actually listed more staff trained than the facility staff. The PREA Coordinator explained that the agency counted all employees that completed the annual in-service training during the audit period, depending on when the count is taken an employee may be counted twice within a 12-month period due to when they receive annual in-service. The Auditor reviewed training files for ten employees with the Training Supervisor and Human Resource Manager, all staff had completed the required training documented through training rosters. After interviews with the Training Supervisor, PREA Compliance Manager, the Superintendent, and the PREA Coordinator and review of the training rosters, it was determined all facility staff have received training.

Policy 03.06.00 Section 03.06.22 states, "Employees, volunteers, contracted vendors, etc. who had successfully completed PREA orientation and in-service training regarding this subject matter shall sign documentation to verify that they will comply with the training they received. The Training Division shall maintain such employee documentation." The PREA Compliance Manager shared employees sign documentation to verify their understanding of the PREA training, such as verification forms, attendance sheets, and testing forms. Documentation of staff participating and understanding the training is achieved by staff signing the PREA/Sexual Harassment Compliance form. The staff must sign and acknowledge "I have read and understand the above written procedures regarding the Bristol County Sheriff's Office zero tolerance policy on PREA and Sexual Harassment. I also understand that I am duty bound to report any knowledge, suspicion, or information I have regarding inmate sexual abuse or sexual harassment." The staff must also sign a Training Attendance Sheet documenting class attendance and class completion. The training records are maintained by the Training Division. Ten employee training files were reviewed by the Auditor; and all were in compliance with initial and annual in-service training.

The agency exceeds the standard with employees attending annual in-service training instead of every two years as required by the standard. Also, the constant updates and refreshers through the year and the pocket informational card provided to each employee.

Standard 115.32: Volunteer and contractor training

115.32 (a)

- 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 ☐ No

115.32 (b)

- Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and

contractors shall be based on the services they provide and level of contact they have with inmates)? ☒ Yes ☐ No

115.32 (c)

- Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☒ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

All contractors and volunteers who have contact with inmates at the Dartmouth Correctional Complex receive PREA training prior to assuming their responsibilities. The agency's Policy 03.06.00 Section 03.06.22 Employment, Training, and Education states, "Prior to assignment, volunteers shall receive general PREA training during orientation. This shall include information on the Sheriff's Office zero-tolerance standard and appropriate prevention, detection, and reporting requirements. The level and type of training provided shall be based on the services a volunteer will provide and the level of contact they have with inmates and detainees. The Volunteer Coordinator shall maintain documentation confirming that the volunteers understand the training they have received. Part-time employees, interns and contractual vendors not employed by the Contracted Medical Provider shall, at a minimum, adhere to these training procedures, based on their services provided and the level of contact they have with inmates and detainees. This includes programming, food service and commissary vendors." Policy CPS J-F-06 states, "All CPS staff members shall be trained regarding their responsibilities under the BCSO sexual abuse and harassment policies, most notably BCSO policy 03.06.00 "Prevention of Inmate Sexual Abuse" and shall comply with the requirements of these policies which includes a prohibition of staff sexual misconduct." The agency has contracts with Correctional Psychiatric Services for medical and mental health services (70 contractors); Keefe for commissary services (2 contractors); and Trinity for food service (15 contractors). The agency requires all contractors and volunteers receive orientation and periodic in-service training consistent with their level of inmate contact relating to the prevention, detection, and response to sexual abuse and sexual harassment. The PREA Compliance Manager shared per policy, all volunteers and persons employed by a contracted vendor receive PREA training upon hire and during annual in-service. The Contracted Medical Provider also provides its employees with specific PREA training, Sexual Abuse and Assault Behind Bars: Prison Rape Elimination Act (PREA) annually on-line in addition to the training they receive through the Bristol County Sheriff's Office. Contractors must attend annual in-service with the facility staff. New volunteers receive PREA orientation prior to assignment through the Volunteer Coordinator. The training is provided through the handout PREA/Sexual Harassment Compliance that covers the zero-tolerance policy; their duty of eliminating sexual abuse and harassment; all alleged acts/allegations will be investigated; explanation and purpose of the PREA Risk Assessment Screening; reporting requirements; initial response procedures; initial reporting requirements, and discipline. The PREA Compliance Manager shared due to COVID 19, the volunteer program within the Sheriff's Office has been suspended and therefore, no training in this area has occurred since early 2020.

Policy 03.06.00 Section 03.06.22 states, "Employees, volunteers, contracted vendors, etc. who had successfully completed PREA orientation and in-service training regarding this subject matter shall sign documentation to verify that they will comply with the training they received. The Training Division shall maintain such employee documentation. The Training Division shall maintain employee training documentation regarding this subject matter. The Contracted Medical Provider shall provide copies of these training records to the Training Division, upon request. The Volunteer Coordinator shall maintain copies of PREA-related volunteer training records." Documentation of contractors participating in annual in-service and understanding the PREA training is achieved by contractors signing the PREA/Sexual Harassment Compliance form, that acknowledges "I have read and understand the above written procedures regarding the Bristol County Sheriff's Office zero tolerance policy on PREA and Sexual Harassment. I also understand that I am duty bound to report any knowledge, suspicion, or information I have regarding inmate sexual abuse or sexual harassment." The contractors must also sign a Training Attendance Sheet documenting class attendance and class completion. The Correctional Psychiatric Service PREA training is documented through training certificates. The training records are maintained by the Training Division. Four contractors' training files were reviewed by the Auditor; and all were in compliance with initial and annual in-service training. The volunteers must sign the PREA/Sexual Harassment Compliance Form acknowledged that, "I have read and understand the above written procedures regarding the Bristol County Sheriff's Office zero tolerance policy on PREA and Sexual Harassment. I also understand that I am duty bound to report any knowledge, suspicion, or information I have regarding inmate sexual abuse or sexual harassment." The volunteers also sign the PREA Training Sign-Off form that acknowledges the volunteer has completed the PREA training packet. The Volunteer Coordinator maintains the training documentation confirming that the volunteers understand the training they have received.

Interviews with six contractors (three Correctional Psychiatric Service, two Trinity, and one Keefe). There were no volunteers available during the on-site audit to interview due to the COVID pandemic protocols. The contractors all acknowledged receiving PREA training prior to their assignment in the facility. They understood their responsibilities for reporting, the reporting process, who to report to, and the agency's zero tolerance policy. They all stated they would report to the officer in the area and/or to the Watch Commander immediately. The Correctional Psychiatric Service contractors stated they receive PREA training through their company annually on-line and also attend the facility's annual in-service PREA training with facility staff. The Keefe contractor stated he started the job two weeks ago and he received attended orientation training prior to entering the facility. He also stated he is scheduled for annual in-service with facility staff. The Trinity contractors also confirmed that PREA training is received annually through in-service training with facility staff. They also shared that their company provided PREA training during the hiring process. The contractor must sign on-line training forms for Trinity to document training. Training records reviewed demonstrated the contractors received training and documented the understood the training through a signature. The contractual contractors acknowledged receiving training annually with facility staff and through their agency. During the on-site audit the facility was unable to provide that volunteers completed PREA training. The Volunteer Coordinator was not available during the during the on-site audit visit. The standard remained open until volunteer training documents were provided to the Auditor.

Did Not Meet: The facility was unable to provide documentation while on-site that volunteers completed PREA training on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies.

Corrective Action Taken: The agency provided training documents documenting the training of an intern prior to the enlist of services. The Director of Audits and Accreditations also provided that

“all volunteers participate in a general orientation prior to assignment. Part of that orientation is a review of our PREA protocols, which is verified on a PREA/Sexual Harassment Compliance Form. Since Covid became an issue in the spring of 2020, Bristol has only had one new volunteer applicant who is a student intern. Bristol has three contractual vendors – CPS for medical, Trinity for Food Services and Keefe for Commissary. All persons employed by these vendors participate in the same new employee orientation as Sheriff’s Office employee (but not the CO Training Academy).” The PREA/Sexual Harassment Compliance Forms were provided for the intern for 2021. A PREA/Sexual Harassment Compliance Form was also provided for a volunteer prior to COVID to demonstrate the practice and compliance on February 10, 2021. The agency was in compliance with the standard prior to corrective action based on the training dates of the documentation provided after the on-site audit that documented the volunteer training process. Substantial compliance was met.

The agency exceeds the standard by requiring contractors to complete annual PREA training through the facility’s annual in-service with facility staff.

Standard 115.33: Inmate education

115.33 (a)

- During intake, do inmates receive information explaining the agency’s zero-tolerance policy regarding sexual abuse and sexual harassment? ☒ Yes ☐ No
- During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment? ☒ Yes ☐ No

115.33 (b)

- Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment? ☒ Yes ☐ No
- 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 ☐ No
- 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 ☐ No

115.33 (c)

- Have all inmates received such education? ☒ Yes ☐ No
- 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 ☐ No

115.33 (d)

- Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient? ☒ Yes ☐ No
- Does the agency provide inmate education in formats accessible to all inmates including those who are deaf? ☒ Yes ☐ No
- Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired? ☒ Yes ☐ No
- Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled? ☒ Yes ☐ No
- Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills? ☒ Yes ☐ No

115.33 (e)

- Does the agency maintain documentation of inmate participation in these education sessions? ☒ Yes ☐ No

115.33 (f)

- 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 ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Policy 03.06.00 Section 03.06.07 PREA Education for Inmates, Detainees, and Prisoners states, "Incoming sentenced inmates and pre-trial/ICE detainees shall receive information during intake about the Sheriff's Office's zero-tolerance standard and its PREA reporting protocols. They shall also review and sign a PREA Information/Booking Form during intake. PREA posters shall be placed in the Dartmouth HOC's Booking Area. Questions about this information shall be addressed by staff. The Ash Street Classification Counselor shall conduct a documented orientation for each transferred sentenced inmate or pre-trial detainee. This shall be a "site specific" orientation, conducted within 72 hours of arrival. During this orientation, facility procedures for reporting sexual abuse and harassment shall be discussed. Orientation results shall be added to the institutional record." The agency had 7,557 intakes through the Ash Street Jail during the audit year and 1,422 inmates had a length of stay of thirty days or longer within

the Dartmouth Correctional Complex. The Dartmouth Correctional Complex provides a comprehensive PREA education to the inmate population beginning at intake into the Dartmouth Correctional Complex. At intake, inmates are provided PREA information through the Report Sexual Abuse Now poster, the BCSO Orientation Form, and the Inmate Handbook which all explain the agency's zero tolerance policy regarding sexual abuse and sexual harassment and how to report incidents. The regional intake and booking occurs at the Ash Street Jail. Inmates are shown the PREA video as they wait in the holding cells to be booked. The video plays on a continuous loop. The intake officer reads the BCSO Orientation Form to the inmate and explains any information that may not be clear to the inmate. The inmate then signs the form acknowledging being informed of the PREA information and the booking officer also signs and dates the form. This process is completed prior to the inmate being placed in housing. The Auditor was unable to observe an intake at the Ash Street Jail, however the Auditor had the booking officer explain the intake process including the PREA education provided. There are informational PREA posters in the holding and booking area. These inmates are seen by the court the next day. They may be bonded out or held for court proceedings. If held, the inmate will be transported to the Dartmouth House of Correction (DHOC) intake area for booking and admission. The Auditor observed an intake at DHOC. The booking officer started the process by asking the inmate if he could read, write, and the language preference. The inmate acknowledged he could read, write, and understood English. The officer explained PREA, provided the BCSO Orientation Form for the inmate to review and sign, and the Inmate Handbook. This process is completed prior to the inmate being placed in housing. The agency had 3,800 intakes to the DHOC facility for the audit period. The PREA information provided to the inmates include the zero-tolerance, how to report sexual abuse/harassment, and referring the inmate to the Inmate Handbook for the general overview of facility procedures and rules and regulations. Two intake officers were interviewed. They stated PREA information including the zero-tolerance policy is provided to the inmate every time during booking. The information is also explained verbally to the inmate as well as providing the BCSO Orientation Form. They acknowledged all inmates are processed and provided the PREA information whether they are new intakes or transfers. The intake staff stated the PREA information is provided to the inmate no longer than four hours after arrival, it depends on the number of inmates being processed. Random inmates interviewed and during discussion with inmates on the facility tour, the inmates acknowledged they have received PREA information upon arrival at the facility and reinforced daily through staff interaction and information posted in the housing areas. They were able to explain how to report an incident and were aware of the zero-tolerance policy. Of the formal interviews with random inmates, the majority interviewed acknowledged receiving PREA education right away upon arriving at the facility and within the same day. There were six inmates that stated they received the PREA information the next day after intake, upon reviewing their files, the inmates were booked during the night shift and received the PREA education the next morning. The Auditor reviewed twelve inmate files. The files demonstrated the initial PREA information was provided to the inmate at intake on the same day of arrival documented through signed copies of the BCSO Orientation Form.

Policy 03.06.00 Section 03.06.07 states, "Sentenced inmates and pre-trial/ICE detainees shall review and sign an "Information on Sexual Abuse/Assault" Form no later than 30 days from arrival. This form shall provide comprehensive education on their rights to be free from sexual abuse and harassment, as well as to be free from retaliation for reporting such incidents. This form shall also provide information on the zero- tolerance standard and PREA reporting protocols. Those transferred from another correctional system shall also complete this form." The comprehensive education includes reviewing the Information on Sexual Abuse/Assault and answering any questions regarding PREA. The inmate's comprehensive PREA education is conducted through a one-on-one meeting with the Classification Counselor within 72 hours of admission. The education includes the Bristol County Sheriff's Office is committed to meeting the objectives of the Prison Rape Elimination Act and has established a zero-tolerance policy concerning acts of inmate misconduct, abuse, or harassment; that all inmates have the right to be free from intimidation or pressure from staff, inmates, or others to perform or engage in sexual behavior regardless

of their current situation or sexual orientation; that all forms of sexual activity in a Bristol County correctional facility are prohibited; that an inmate who believes they are a victim of sexual abuse, misconduct, or harassment should either notify a Sheriff's Office staff member, contact the PREA Coordinator, or the Victim Advocate for help; such matters shall be handled confidentially; anonymous reports shall be accepted; that an inmate victim shall be protected; that all allegations of sexual abuse or sexual harassment shall be properly investigated; and that additional information regarding these issues are available by posters and other methods within the facility. Once the training is completed, the inmate signs the Information on Sexual Abuse/Assault form. The forms are maintained within the institutional record. The agency also provides comprehensive education through the playing of the PREA video in the DHOC housing units and at Ash Street Jail in the dayroom. At Ash Street Jail, the PREA video plays on a loop in the dayroom on a television specifically for PREA. At Dartmouth and Dart Women's Center the PREA video plays at selected times in the housing units each day. The facility indicated that 1,422 inmates had a length of stay of thirty days or longer. All those inmates received the comprehensive training. However, since the comprehensive training occurs with 72, at least 4,835 inmates received education since the facility had 4,835 inmates with a length of stay of 72 hours or longer. The Classification Counselor stated the comprehensive education occurs usually the next business day unless the inmate arrives on Friday or over the weekend then the comprehensive education is provided on Monday. The Auditor observed a Classification Counselor providing the comprehensive education to an inmate. The Classification Counselor explained the PREA information to the inmate including how to report, sexual activity is prohibited, the zero-tolerance policy, PREA definitions, to be aware of situations and locations, that PREA information is posted on walls, retaliation is prohibited, all allegations are investigated, and that medical and mental services are provided after an allegation at no cost. The Classification Counselor then reviewed the Information on Sexual Abuse/Assault Form with the inmate prior to the inmate signing and dating the form. The inmate is then provided a copy of the form for reference. The random inmates interviewed acknowledged receiving the comprehensive education within a few days of arrival to the facility by a Classification Counselor. The Auditor reviewed twelve inmate files. The files demonstrated comprehensive education was provided to the inmate in the range of one to five days as documented through signed copies of the PREA Information on Sexual Abuse/Assault Form.

Recommendation: The Dartmouth facility is not consistently following the "Unit Televisions" memo dated December 8, 2019, from Colonel Oliver. The memo requires the PREA video to be played at selected times each day in the units. The email on January 26, 2021, confirmed the practice is still in effect with no changes. Inmate education is not consistently being provided through the viewing of the PREA video. Officers and inmates indicated the PREA video is not played consistently in the housing units. The facility must follow the facility protocols for playing the PREA video in the Dartmouth HOC housing units for comprehensive PREA inmate education.

All inmates that are transferred from the Dartmouth House of Correction to the Ash Street Jail for a housing unit change also receive PREA education specific to the Ash Street Jail specific upon arrival. The inmate receives the facility procedures for reporting sexual abuse and harassment. The Classification Counselor will review with the inmate the Inmate Orientation Form that includes information about PREA. The inmate signs acknowledging meeting with the Classification Counselor and was provided an introduction, overview of the Inmate Handbook, and PREA notification. The Classification Counselor also signs and dates the form.

Policy 03.06.00 Section 03.06.07 states, "Any inmate who is limited English proficient, deaf, visually impaired, otherwise disabled, or who has limited reading skills shall receive PREA related information upon arrival. Arrangements shall be made on an individual basis and documented." The agency has established procedures to provide disabled offenders equal opportunity to participate in PREA education and benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and

sexual harassment. Staff are trained on how to interact with inmates with disabilities and limited English through the Lesson Plan: Inmates with Special Needs. The intake staff interviewed shared PREA information is available in three languages, English, Spanish, and Portuguese. If another language is required for communication, they utilize staff interpreters or the language line phone services to provide the PREA information to LEP inmates. The use of an interpreter is documented in the dropdown box on the inmate's file in OMS. The agency provides the Inmate Handbook, the PREA information poster, and the BCSO Orientation Sheet in English, Spanish, and Portuguese. The PREA Compliance Manager shared the agency provides a translation line for inmates who are not English proficient. The line is used to assist with inmate orientation, when necessary. Also, Spanish and Portuguese PREA orientation forms are used, when needed. Numerous employees also speak Spanish and Portuguese to assist in translation of information to inmates, as needed, which is documented. The agency provides translated (English, Spanish, Portuguese) Inmate Handbooks. Posters and other communication tools relative to PREA are also translated. The PREA video presented to inmates on the CCTV system is also translated in Spanish. The agency has a contract with Certified Languages International to provide telephone interpreting services dated December 23, 2013. The Superintendent stated LEP inmates are provided PREA information through the use of the language line, staff interpreters, the PREA paperwork in three languages, and the PREA video. The Auditor interviewed five Spanish LEP inmates through an interpreter. Two of the five inmates remember receiving PREA information in Spanish through a staff interpreter, a paper in Spanish, and observing PREA posters in Spanish. One inmate stated he received information in English and another inmate read it to him. Two of the inmates said they did not remember receiving information in Spanish; however, they remember a language line used to communicate with staff. All the inmates knew how to report including telling a staff member, tell another inmate, call the number listed on the poster, and write a note. The pre-audit documentation contained booking forms for three inmates showing translation services were used during intake and PREA handouts were provided in a language the inmate understood. This was documented through a note within OMS for all three inmates (two Spanish, one Portuguese). For a deaf/hearing impaired inmate, staff and the inmate's Classification Counselor would utilize their computer or a pad and write back and forth to ask/answer all questions. The Massachusetts Commission for the Deaf would be contacted if a sign language translator was necessary. For a blind/low vision inmate, the staff and the Classification Counselor would read each form to the inmate during booking and orientation. The facility utilizes telephonic TTY services to aid staff in communicating important information to a deaf or hard of hearing inmate or through written materials, exchange written notes, and use of sign language interpreters. For inmates with low vision or blind, staff is trained to assist the inmate by reading the PREA information to them and the audio of the PREA video to assist their comprehensive of policies and procedures. Staff indicated they would read information to the inmate if needed. Inmates that may have intellectual, psychiatric, or speech disabilities would be provided education and services as any other inmate through medical and mental health staff. The Auditor interviewed a hearing-impaired inmate that shared a Classification Counselor provided him PREA information through a paper he would read. He understood the PREA information that was provided to him. He understood how to report and indicated he would report by the phone number on the poster or by telling a correctional officer.

Policy 03.06.00 Section 03.06.07 states, "Completed 'Information on Sexual Abuse/Assault' and related PREA intake/orientation forms shall be maintained within the institutional record." The PREA Compliance Manager shared inmates and detainees sign the Information on Sexual Abuse/Assault form during their orientation to verify that they received PREA orientation information, and these documents are kept within the inmate's institutional record. The Auditor reviewed twelve inmate files and provided documentation of the PREA education received. The files demonstrated the initial PREA information was provided to the inmate at intake on the same day of arrival documented through signed copies of the BCSO Orientation Form. The comprehensive education was provided to the inmate in the range of one to five days as documented through signed copies of the PREA Information on Sexual Abuse/Assault Form.

Policy 03.06.00 Section 03.06.07 states, "Additional PREA information and updates shall be continuously and readily available and/or visible to sentenced inmates and pre-trial/ICE detainees. Posters, handbooks, or other written/electronic formats shall be updated, as needed. The PREA Coordinator shall be notified when PREA materials need replacement or updating." The PREA Compliance Manager shared the agency provides inmates and detainees with PREA information via posters and the Inmate Handbook, which are available inside their housing units and other locations throughout the correctional facilities and PREA Information is also present on CCTV. The Auditor observed the PREA poster Report Sexual Assault Now posted in English, Spanish, and Portuguese throughout the facilities. The agency's procedure is to play the PREA video daily in all the DHOC housing areas and at the Ash Street Jail, the PREA television station must be on in conjunction with each recreation period to provide continued PREA education.

The agency exceeds the standard with the thorough PREA education provided to the inmate population through the intake education, comprehensive education by the Classification Counselors, the facility specific PREA education provided to each transferred inmate to the Ash Street Jail, PREA posters throughout the facilities, and the playing of the PREA video daily in the housing units to reinforce the PREA information. The agency also provides comprehensive education to all inmates that are housed over 72 hours.

Standard 115.34: Specialized training: Investigations

115.34 (a)

- 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 have received 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 ☐ No ☐ NA

115.34 (b)

- Does this specialized training include techniques for interviewing sexual abuse victims? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).] ☒ Yes ☐ No ☐ NA
- 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 ☐ No ☐ NA
- 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 ☐ No ☐ NA

- 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 ☐ No ☐ NA

115.34 (c)

- 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 ☐ No ☐ NA

115.34 (d)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Policy 03.06.00 Section 03.06.22 Employment, Training, and Education states, "SIU investigators assigned to conduct PREA investigations shall receive specialized training. This training shall be in addition to the standardized PREA training requirement for all employees. Per National PREA standards, this specialized PREA Investigator training shall include, but not limited to, the following: interviewing techniques for alleged sexual abuse victims, perpetrators, and witnesses in a neutral, fact-finding manner, considering the emotional needs and mental capabilities of sexual abuse victims and perpetrators; techniques for moving alleged victims of sexual abuse, perpetrators, or witness without rousing suspicion to others; proper use of Miranda and Garrity-type warnings; collection techniques and preservation of sexual abuse evidence, including the use of video/recording and photo equipment and the identification and storage of DNA evidence, forensic evidence and other types of evidence; criteria and evidence required to substantiate a case for administrative action or prosecution referral (standard of proof); any other topic approved by the Sheriff or his designee. The Major/Special Investigations and the Training Division shall maintain documentation verifying that those SIU investigators assigned to conduct PREA investigations have completed required training. This training may be provided by the MA State Police, the MA Department of Correction, or another recognized agency." The investigators attended the PREA/Sexual Assault Investigator Training held by the Massachusetts Department of Corrections and/or the Prison Rape Elimination Act (PREA) Training presented by the Moss Group in conjunction with Middlesex Sheriff's Office and/or the Basic Sex Crime Investigations. These training curriculums cover the topics of techniques for interviewing sexual abuse victims, proper use of the Miranda and Garrity warnings, sexual abuse evidence collection in confinement setting, and the criteria and evidence to substantiate a case for administrative action or prosecution referral. The PREA Compliance Manager shared all investigators within our Special Investigation Unit (SIU) are qualified to conduct PREA investigations and all investigators participate in annual in-service training also. The PREA Coordinator stated all correctional staff, including SIU investigators, receive evidence collection

training both at the academy and at in-service training. The SIU also provided additional evidence collection training during 2021.

The agency currently has eight specialized trained investigators documented through training certificates. The Investigator interviewed confirmed attending specialized investigator training and the training covered PREA investigations. He explained techniques for interviewing sexual abuse victims including being compassionate, make sure they are ready to be interviewed so not to cause further harm, and treat the individual like a victim. He understood the difference between Miranda and Garrity warning and shared if Miranda is used for staff the legal department and the Massachusetts State Police would be involved. He stated evidence is collected by trained investigators and the SANE kits have a tracking process. He also stated that 51% of evidence is required to substantiate a case. The specialty training was verified through the Investigator's interview and review of the training records including training certificates of all investigators.

Standard 115.35: Specialized training: Medical and mental health care

115.35 (a)

- 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? ☒ Yes ☐ No
- 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? ☒ Yes ☐ No
- 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? ☒ Yes ☐ No
- 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? ☒ Yes ☐ No

115.35 (b)

- If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams.) ☐ Yes ☐ No ☒ NA

115.35 (c)

- 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?
☒ Yes ☐ No

115.35 (d)

- Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? ☒ Yes ☐ No
- Do medical and mental health care practitioners contracted by and volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Policy 03.06.00 Section 03.06.22 Employment, Training, and Education: Specialized PREA Training for Medical and Mental Health Care Personnel states: "The Contracted Medical Provider shall ensure that full-time and part-time medical and mental health practitioners assigned to work regularly within the Bristol County correctional facilities receive PREA related orientation and in-service training. This training shall include the following topics: 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; how and to whom to report allegations or suspicion of sexual abuse and sexual harassment; and any other subject matter, so approved by the Contracted Medical Provider and the Superintendent." Policy CPS J-F-06 states, "All CPS employees are hired, promoted, trained, and disciplined and terminated, as needed, in compliance with PREA. Training includes how to detect, assess, and respond to signs of sexual abuse and sexual harassment, as well as how to preserve physical evidence of sexual abuse. All CPS staff members shall be trained regarding their responsibilities under the BCSO sexual abuse and harassment policies, most notably BCSO policy 03.06.00 "Prevention of Inmate Sexual Abuse" and shall comply with the requirements of these policies which includes a prohibition of staff sexual misconduct. In addition, all CPS qualified health care professionals shall receive documented specialized training that includes 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." The medical and mental health staff of Dartmouth Correctional Complex are contractors through Correctional Psychiatric Services. The medical and mental health practitioners receive specialized training through Correctional Psychiatric Services Lesson Plan What Should be Done When A PREA Case is Reported. The training curriculum includes 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 who to report allegations or suspicions of sexual abuse and sexual harassment. The PREA Compliance Manager shared per policy, all contractors receive PREA training upon hire and during annual in-service. The Contracted Medical Provider also provides its employees with PREA training, Sexual Abuse and Assault Behind Bars: Prison Rape Elimination Act (PREA) annually on-line in addition to the training they receive through the Bristol County Sheriff's Office. Contractors must attend annual in-service with the BCSO staff. The five medical and mental health care staff interviewed stated they receive annual PREA training through their company through an on-line course and with BCSO during annual in-service training with facility staff. The staff further confirmed receiving specialized PREA healthcare training through their company annually which covers detecting

and assessing signs of sexual abuse; preserving physical evidence; how to respond effectively and professionally to victims of sexual abuse and harassment; and how and whom to report allegations of sexual abuse and harassment. Interviews with the healthcare staff demonstrated they understood 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 who to report allegations or suspicions of sexual abuse and sexual harassment. They also stated they would report an allegation to the Watch Commander and/or an officer immediately.

Policy CPS J-F-06 states, "CPS staff members are prohibited from collecting forensic information." The medical staff are not trained on conducting forensic exams. Through the healthcare staff interviews, they stated all alleged victims of sexual assault who require a forensic exam will be taken to the nearest hospital emergency department for completion of the exam and emergency medical care with no cost to the inmate. A memo to file from the Health Services Administrator stated CPS does not conduct forensic exams.

Policy 03.06.00 Section 03.06.22 states, "The Training Division shall maintain employee training documentation regarding this subject matter. The Contracted Medical Provider shall provide copies of these training records to the Training Division, upon request. The BCSO annual in-service training for healthcare staff is documented on the Training Attendance Sheets by signature to verify class attendance and class completion. The agency's Training Director maintains these training records. The specialized healthcare training is documented through a CPS certificate. The Health Care Administrator and the agency's Training Director maintain copies of the training certificates. The Auditor reviewed training files that documented general PREA and specialized training was completed by medical and mental health staff.

SCREENING FOR RISK OF SEXUAL VICTIMIZATION AND ABUSIVENESS

Standard 115.41: Screening for risk of victimization and abusiveness

115.41 (a)

- 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 ☐ No
- 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 ☐ No

115.41 (b)

- Do intake screenings ordinarily take place within 72 hours of arrival at the facility?
☒ Yes ☐ No

115.41 (c)

- Are all PREA screening assessments conducted using an objective screening instrument?
☒ Yes ☐ No

115.41 (d)

- 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 ☐ No
- 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 ☐ No
- 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 ☐ No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?
☒ Yes ☐ No
- 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 ☐ No
- 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 ☐ No
- 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 ☐ No
- 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 ☐ No
- 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 ☐ No
- 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 ☐ No ☐ N/A

115.41 (e)

- In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior acts of sexual abuse? ☒ Yes ☐ No
- In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior convictions for violent offenses? ☒ Yes ☐ No
- In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: history of prior institutional violence or sexual abuse? ☒ Yes ☐ No

115.41 (f)

- 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 ☐ No

115.41 (g)

- Does the facility reassess an inmate's risk level when warranted due to a: Referral? ☒ Yes ☐ No
- Does the facility reassess an inmate's risk level when warranted due to a: Request? ☒ Yes ☐ No
- Does the facility reassess an inmate's risk level when warranted due to a: Incident of sexual abuse? ☒ Yes ☐ No
- Does the facility reassess an inmate's risk level when warranted due to a: Receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness? ☒ Yes ☐ No

115.41 (h)

- 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 ☐ No

115.41 (i)

- 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 ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

The agency's Policy 03.06.00 Section 03.06.06 Risk Assessment Screening for Sexual Victimization and Abusiveness outlines the assessment and classification process. The policy states, "All sentenced inmates and pre-trial/ICE detainees shall be objectively assessed during their intake screening and upon transfer to another facility/agency for their risk of being sexually abused or sexually abusive towards others. Screening information gathered shall be used for security, medical, classification, and housing/bunk assignment purposes. Intake screenings for sentenced inmates and pre-trial/ICE detainees shall ordinarily take place within 72 hours of arrival." The initial assessment is conducted with inmates during the intake/booking process by intake officers utilizing the PREA Screening Instrument. This risk assessment assists with determining an inmate's vulnerability for risk of sexual abuse or sexually aggressive behavior towards other inmates. The Auditor observed the intake/booking and screening process of an inmate. The intake officer started the interview with the inmate by asking if the inmate could read, write, and the language of preference. The inmate acknowledged he could read and write and spoke English. The officer first completed the general booking information and then explained PREA information to the inmate. The officer then explained the risk screening process and told the inmate that he could refuse to answer any of the questions. The officer completed the PREA Screening Instrument by asking the inmate the questions on the PREA Screening Instrument. The inmate and staff member both signed and dated the form. The inmate scored as no determination. The interview with the inmate was conducted in a private office with a closed-door allowing privacy. This process conforms to the PREA standards. The random inmates interviewed acknowledged being asked the risk screening questions upon arrival at the facility, usually right away, in the intake area. One inmate also shared his assessment was completed through a translator on the phone. The three Classification Counselors interviewed stated the initial risk screening occurs at intake booking on the day of the inmate's intake into the facility. The Auditor reviewed twelve inmate files and all the files documented the initial risk screening occurring the same day of the inmate's arrival to the facility. The Pre-Audit Questionnaire indicated that all inmates were screened within 72 hours of arrival to the facility.

Policy 03.06.00 Section 03.06.06 states, "Intake screenings shall be objectively conducted using the approved PREA Risk Assessment Screening Instrument. This PREA Risk Assessment Screening Instrument shall consider, at a minimum, the following criteria to assess for sexual victimization: whether the inmate or detainee has a mental, physical or developmental disability; the age of the inmate or detainee; the physical build of the inmate or detainee; whether the inmate or detainee has been previously incarcerated; whether the inmate or detainee's criminal history is exclusively nonviolent; whether the inmate or detainee has prior convictions for sex offenses against an adult or child; whether the inmate or detainee is or is perceived to be gay, lesbian, transgender, intersex, or gender nonconforming; whether the inmate or detainee has previous experienced sexual victimization; the inmate or detainee's own perception of vulnerability; and whether the inmate or detainee is detained solely for civil immigration purposes. In assessing the risk of a sentenced inmate or pre-trial/ICE detainee as being sexually abusive, the PREA Risk Assessment Screening Instrument shall consider prior acts of sexual abuse; prior convictions for violent offenses; and the history of prior institutional violence or sexual abuse, if known." The agency has created an objective risk screening instrument, PREA Screening Instrument. The form is broken into two sections, Vulnerability Identifiers and Predatory Identifiers. The Vulnerability Identifiers

section has eighteen questions: have you previously experienced sexual victimization; are you or have you ever been a victim of a sexual assault or rape while incarcerated; have you ever been placed in protective custody for sexual acts against you while incarcerated; are you currently under psychiatric care, a patient of the DMH or the DMR; do you have any mental health limitations; do you have any physical disabilities; do you have any developmental disabilities; are the inmate's crimes exclusively non-violent; do you claim to be homosexual or bi-sexual; are you a member of the LGBTI community or Gender non-conforming; have you ever been sexually abused or victimized outside the correctional setting; have you ever been placed in protective custody for violent acts against you while incarcerated; have you ever been involved in or been victimized by the sex industry; do you perceive yourself as vulnerable or easily taken advantage of; is the inmate being detained for civil immigration status only; is the inmate small in stature (defined as less than 5'6" tall and less than 140 lbs.); is this a first-time incarceration (if no, did the inmate serve less than 30 days?); what is your current age; and is the inmate under 18 years of age or over 65 years of age. The form captures the inmate's responses in a yes and no format. If the inmate has five or more yes responses or answered yes to specific questions (1, 2, or 3), the inmate is identified as a known victim. If the inmate has five or more yes responses, the inmate is identified and designated as a potential victim. If the inmate does not score as a known or potential victim, their coding is a no designation. If the inmate answers affirmative to questions 1, 2, 3, or 4, an automatic referral to mental health is made. The Predatory Identifiers section has eighteen questions for the risk of sexual abusiveness: is the inmate a predator or have a history of predatory sexual behavior while incarcerated; have you ever touched someone sexually, against their will, or forced anyone into sexual activity; do you have any STG / Gang affiliation; have you ever physically assaulted anyone; have you ever physically assaulted anyone while incarcerated; do you have a history of strong-arming while incarcerated; do you have an institutional history of violence; have you ever been administratively segregated for violent acts while incarcerated; do you have a history of counseling or treatment for assaultive behavior while incarcerated; do you have any anger management problems; have you ever received counseling or treatment for assaultive behavior; are you a registered sex offender; do you have any prior convictions for rape or child abuse; have you ever been charged with rape or child abuse; do you have any prior convictions for domestic violence; do you have any documented violations of a 209A order; do you have a history of sexual activity while incarcerated; and have you ever been administratively segregated for sexual acts while incarcerated? If the inmate has yes responses to specific questions 1 and 2, the inmate is identified and designated as a known predator. If the inmate has five or more yes responses, the inmate is identified and designated as a potential predator. If the inmate does not score as a known or potential predator, their coding is a no designation. If the inmate answers affirmative to questions 1 or 2 in the Vulnerability Identifiers and Predatory Identifiers, an automatic referral to mental health is made. The staff member also has the ability to add comments if needed to the form. If the inmate has a designation, Central Classification is notified during business hours to make housing assignments accordingly. After business hours, the Watch Commander is notified and makes the appropriate housing assignment that will be reviewed the next business day by Central Classification.

Policy 03.06.00 Section 03.06.06 PREA Reassessment Screening states, "Each sentenced inmate or pre-trial/ICE detainee at the Dartmouth Correctional Complex shall undergo a PREA Reassessment Screening within 30 days of intake. A Classification Counselor shall typically conduct this screening during orientation. The inmate or detainee's risk of victimization or abusiveness shall be reassessed, based upon any additional, relevant information received by the facility since the Initial PREA Risk Assessment Screening." A Classification Counselor will reassess the inmate's risks of victimization and abusiveness within thirty days of intake, however, staff interviewed indicated this is usually completed within 72 hours from intake as part of the orientation process. The reassessment is completed utilizing the PREA Reassessment Screening Instrument, which is the same format and questions as the initial PREA Screening Instrument completed at intake. The PREA Reassessment Screening has another section to capture the results of the classification reassessment, factors that may have caused a change

in the interview results based on supporting documentation, change in inmate's response, disciplinary history, or other reason which would be explained. The PREA Coordinator and/or Central Classification shall be notified whenever new information about an inmate's risk for victimization or abusiveness is discovered during the reassessment. Only the PREA Coordinator and/or Central Classification have the authority to override an initial PREA classification. The security, housing, or health of the inmate may also be reexamined. A new inmate management plan may also be developed. Each sentenced inmate also receives a classification review every sixty days where this information is reviewed. Staff indicated that no inmate deemed a high risk for sexual victimization or abusiveness would be transferred to the Ash Street Jail housing unit, they must be cleared for transfer by mental health. When an inmate is transferred to the Ash Street Jail housing unit, the inmate is reassessed by the Classification Counselor at the Ash Street Jail. If the reassessment indicates a change in classification, the inmate is returned to the Dartmouth House of Correction. The Auditor observed the Classification Intake/Orientation of an inmate. The Classification Counselor reviewed the initial PREA Screening Instrument that was completed at booking. The Classification Counselor completed the PREA Reassessment Screening Instrument by asking the inmate all the questions and reviewed for any differences from the Initial PREA Screening Instrument. There were no differences and the designation remained as No Designation. The Classification Counselor asked the inmate if she had incurred any issues or concerns while in the facility and whether the inmate felt safe. The inmate had no concerns and felt safe. The Classification Counselor noted the inmate had disclosed prior victimization and asked the inmate if she wanted to see mental health. The Classification Counselor sent a referral to the PREA Coordinator and an email note to Mental Health. The Auditor reviewed twelve inmate files and all inmates had reassessments completed within five days with five reassessments occurring within 24 hours. The three Classification Counselors interviewed stated inmates are reassessed based on new information, due to a referral, or due to a sexual abuse incident. They stated they would complete the reassessment for new information and/or due to a referral and the PREA Coordinator would complete the reassessment due to sexual abuse incident. The PREA Coordinator stated no reassessments occurred on the sexual abuse incidents during the audit period. The agency interpreted the standard that a reassessment was required only on substantiated cases of sexual abuse. The facility did have one substantiated case of sexual abuse, and the facility completed the reassessment during the on-site audit to document practice. The facility acknowledged the reassessment process for inmates will occur on all sexual abuse cases.

Recommendation: The Auditor recommended the reassessment be completed between 14-30 days to allow inmates time to acclimate to the facility and suggested the facility review the Standard in Focus 115.41.

Action Taken: The agency updates the policy and conducted a remedial training class with Classification Counselors on PREA reassessments are to be conducted by staff between 14-30 of arrival. The policy now states, "Each sentenced inmate or pre-trial/ICE detainee at the Dartmouth Correctional Complex shall undergo a PREA Reassessment Screening within *14 to 30 days of intake*." The remedial training occurred on November 11, 2021, as documented with the training agenda and signed Training Attendance Sheets. The information provided to the Classification Counselors was "The PREA Reassessment Screening Instrument will be completed by the unit classification counselor between 14-30 days from the booking date. This will allow an adjustment period for the inmate. The classification counselor will ask the inmate every question on the screening tool. The form must be completed and signed by the inmate and classification counselor. For non-English speaking inmates the translation must be used. You must document in OMS that the PREA Reassessment Screening was completed and if the translation line was used with inmate's preferred language."

Policy 03.06.00 Section 03.06.06 states, "The Booking Office shall notify each sentenced inmate or pre-trial/ICE detainee that they are not required to answer questions regarding their sexual orientation. This should be done before the PREA Risk Assessment Screening is initiated. No sentenced inmate or pre-trial /ICE detainee shall be disciplined for refusing to answer such questions on the screening instrument or for not disclosing complete information in response to such questions." The PREA Compliance Manager shared no inmate or detainee has been disciplined for refusing to answer, or for not disclosing complete information in response to questions asked during the PREA risk assessment. It is noted on the PREA Screening Instrument when an inmate or detainee is uncooperative or refuses to answer staff questions." On the PREA Screening Instrument and the PREA Reassessment Instrument has a question of "is the inmate uncooperative/refused to complete the form." During the observation of an intake, the officer explained to the inmate that the inmate could refuse to answer any of the questions. The three Classification Counselors interviewed stated inmates are not disciplined for refusing to respond to the risk screening questions. They stated they would explain to the inmate the information is utilized for their own safety and try to talk the inmate into answering the questions. If the inmate refuses to answer the questions, the inmate is automatically designated as a known victim and know predator. The designation could change on the next reassessment if the inmate cooperates.

Policy 03.06.00 Section 03.06.06 Control of Information states, "The Sheriff's Office shall implement controls on the dissemination of responses to questions asked or tabulations generated from any Initial or Reassessment PREA Risk Assessment Screening Instrument. This information shall be considered confidential and shall not be exploited by staff or others to the detriment of any inmate. Appropriate dissemination controls shall be followed." The Classification Counselors interviewed confirmed appropriate controls have been implemented to ensure that staff or inmates do not exploit sensitive information. The paper records are secured in the records room. The staff stated only the classification staff, Captain of Classification, Assistant Deputy Superintendent of Classification, medical, mental health, and PREA Coordinator have access to the inmate files. Other staff may have sign-in levels based on their clearance levels and approval. The PREA Coordinator stated that staff can view in OMS the inmate's classification if designated a known victim, potential victim, known predator, and potential predator, but not the risk screening instruments. Any employee who fails to follow these basic rules of confidentiality shall be disciplined, up to and including termination.

Standard 115.42: Use of screening information

115.42 (a)

- 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 ☐ No
- 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 ☐ No
- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments? ☒ Yes ☐ No

- 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 ☐ No
- 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 ☐ No

115.42 (b)

- Does the agency make individualized determinations about how to ensure the safety of each inmate? ☒ Yes ☐ No

115.42 (c)

- 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 ☐ No
- 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 ☐ No

115.42 (d)

- 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 ☐ No

115.42 (e)

- 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 ☐ No

115.42 (f)

- Are transgender and intersex inmates given the opportunity to shower separately from other inmates? ☒ Yes ☐ No

115.42 (g)

- 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? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

The agency's Policy 03.06.00 section 03.06.06 Risk Assessment for Sexual Victimization and Abusiveness states, "Based on the results from the PREA Risk Assessment Screening Instrument, a sentenced inmate or pre-trial/ICE detainee shall be classified as being a "known perpetrator" (KP), a "known victim" (KV), a "potential perpetrator" (PP), a "potential victim" (PV) for sexual abuse or as "ND" (no designation). Initial bunk assignments can then be made accordingly. During regular business hours, Central Classification shall determine the initial bunk assignments for those new inmates or detainees determined to be "at risk" for sexual victimization or abusiveness. During non-business hours, the Watch Commander shall make these decisions, which shall be reviewed by Central Classification the next business day. Housing assignments for those who are transgender, intersex or gender non-conforming or those with other "at risk" indicators shall be made on a case-by-case basis." The risk screening information and identified custody level is utilized to determine housing, bed, work, education, and program assignments with the goal of keeping inmates at high risk of being sexually victimized from those at high risk of being sexually abusive. If during the initial risk assessment or reassessment an inmate screens as potential victim, known victim, potential predator, or known predator, an immediate referral will be made to the Central Classification or the Watch Commander to determine housing assignment, work, education, and program placement. The inmate is asked during the screening and reassessment process if they perceive themselves as vulnerable or easily taken advantage of. This information is also taken into consideration for housing, work, education, and program assignments. If the inmate feels at risk, protective custody housing is offered to the inmate. The PREA Coordinator stated the risk screening instruments are a tool used to identify at risk inmates and assist with the housing placements to ensure the separation of victims and predators. Initial Classification housing placements are made based upon the inmate's classification level and the results of their initial PREA Screening. The placement of an inmate with a high risk of sexual victimization is not to be placed into a cell where they could be victimized. Individualized determinations are also made when housing unit officers are making cell changes/placements. An inmate's PREA Screening designation is listed in the Offender Management System (OMS) within the Alerts Section. The OMS system blocks the placement of housing a victim or predator together. The OMS information is available to assist the officers when making cell placement / housing decisions on the housing units. The officers review the inmate's PREA designation in OMS. These individual determinations are also made when an inmate requests or is offered housing in protective custody. The PREA Compliance Manager shared based on the information gathered from the risk assessment screening, as well as other security/safety indicators, at risk inmates are separated from inmates who are high risks of being sexually abusive. The three Classification Counselors interviewed

stated inmates are housed based on their vulnerabilities and the facility does not house victims and predators together. Each inmate that has a designation has an individualized housing placement based on Classification and the Watch Commander's decision. The Classification Counselors also added that inmates are separated from known enemies. If staff identify an inmate at risk during the initial risk screening process, then a housing placement is not made, the inmate is placed in a medical single cell until a full risk assessment is completed and housing assignment made. The inmate may also be offered protective custody if staff determine it is warranted. The housing and program assignments are made on a case-by-case basis based on information obtained during the screening interview. The housing and program assignments may be changed after the inmate is further evaluated through the classification and reassessment process by the appropriate staff. The Classification Officer reviews the PREA Screening Instrument and the classifications reassessment to determine if the supervisor concurs with the instrument outcomes. During this classification review, the housing placement is made as orientation unit, general population, administrative segregation, protective custody or other. When there is a difference between the initial screening instrument and the reassessment, a review is completed to determine what caused the change including a change in an inmate's response, disciplinary history, supporting documentation, or other factors. The initial Inmate Classification Form is completed with program, education, work, and housing recommendations. The form is signed and dated by the Classification Officer. The form then is reviewed by the Assistant Deputy Superintendent who approves, denies, or modifies the recommendation. The form is provided to the inmate at the Classification Hearing where the inmate signs acknowledgement of receiving the completed Classification Form. The inmate can appeal the classification decision within five days of receipt. Through interviews with inmates and staff, it was determined that the facility addresses the needs of the inmates consistent with the security and safety of the individual inmate. The Auditor also reviewed twelve inmate files to follow the classification process paperwork and decisions from intake through the classification hearing that demonstrated housing and programming assignments are based on the safety and security of the inmate. The file reviewed demonstrated the agency makes individual placement decisions based on the inmate's safety and needs.

The agency's Policy 03.06.00 Section 03.06.06 Risk Assessment Screening for Sexual Victimization and Abusiveness states, "Sentenced inmates or pre-trial/ICE detainees who self-identify upon intake as gay, lesbian, bisexual, transgender, intersex, or gender non-conforming shall be asked about their need for heightened protection while incarcerated. These views shall be given consideration with respect to their safety." Policy 12.14.00 Transgender, Intersex and Gender Non-Conforming Inmates, Detainees, and Prisoners, Section 12.14.06– Housing Considerations states, "Central Classification shall make an initial housing assignment for a cross-gender inmate or detainee during regular business hours. During non-business hours, the Watch Commander shall do so, followed by a review from Central Classification the next business day. During orientation, a Classification Counselor shall also review the housing assignment with the cross-gender inmate or detainee, which shall be documented. Central Classification shall conduct regular meetings with designated security, programming, and medical personnel. These meeting shall include an assessment of housing placements for cross-gender inmates and detainees held within the Bristol County correctional facilities at that time. Any safety threats experienced by such inmates or detainees or requests for heightened protection shall also be assessed at this time, if not sooner. A management plan may be developed and updated accordingly. These matters can also be discussed by staff during daily security briefings. The Sheriff's Office shall give serious consideration to the views expressed by a cross-gender inmate or detainee with respect to their own safety. The safety, security, and overall facility operations, however, shall be the Sheriff's Office primary concern." The PREA Coordinator stated the housing and program assignments for each transgender or intersex inmate

is conducted at the initial classification hearing, during weekly Classification Board meetings, and at the monthly PREA Committee meetings. At these reviews, a management plan may be developed and updated as needed. All such housing and program assignments reviews and updates are documented. The PREA Coordinator also stated housing and program decisions are determined on a case-by-case basis with the input from the inmate. The inmate is asked about safety concerns and housing placements. The Classification Counselors interviewed stated transgender inmates are asked about their safety, where do they feel comfortable being housed, what pronoun they want to be called by, and if there are any privacy issues. The Classification Counselors stated a form at booking is used to capture the transgender's preferences and the classification staff follow-up during the orientation process. The Statement of Search Acknowledgement Form was implemented in early 2021. The form captures the transgender inmate's name, number, preferred pronoun, preferred name, search gender preference, the inmate's signature, booking staff signature, and supervisor's signature and date. The transgender/non-binary inmate interviewed stated she was placed on a mental health watch for suicide upon arrival at the facility and after the watch completion, she was placed in general population. She stated she felt she could be in general housing but now does not feel safe in the male general population housing unit. The Auditor asked the inmate if this information could be shared with the PREA Coordinator; the inmate agreed. The PREA Coordinator joined the discussion and asked the transgender/non-binary inmate what housing concerns she was having and her housing preference. The PREA Coordinator had the inmate moved to medical until the Classification Board could review housing options with the transgender/non-binary inmate. The inmate agreed to this housing change.

Although Policy 12.14.00 Section 12.14.06 states "the Central Classification shall conduct regular meetings with designated security, programming, and medical personnel. These meeting shall include an assessment of housing placements for cross-gender inmates and detainees held within the Bristol County correctional facilities at that time. Any safety threats experienced by such inmates or detainees or requests for heightened protection shall also be assessed at this time, if not sooner. A management plan may be developed and updated accordingly. These matters can also be discussed by staff during daily security briefings." The agency provided copies of the PREA Monthly Meeting minutes that demonstrated the committee discusses sexual abuse cases to be reviewed; pending investigation cases; inmates currently incarcerated who are considered to be at high risk for sexual victimization; and transgender inmates in custody. The Classification Counselors interviewed were not aware that transgender and intersex inmates are to be reassessed at least twice each year. The Central Classification meetings do not meet the standard of reassessing each transgender or intersex inmate for placement and programming assignments at least twice each year to review any threats to safety experienced by the inmate.

Did Not Meet: Staff were not aware of the standard and policy requirements for completing reassessments on transgender inmates at least twice a year. Staff must be trained on the policy and procedures for completing reassessments on transgender inmates at least twice a year.

Corrective Action Taken: The agency provided refresher training for Classification Counselors on November 10, 2021. As part of the training, discussion on the need for transgender inmates when housed at the facility are to be assessed and reassessed during regularly scheduled housing and PREA meetings as well as to further comply with the standard, there shall also be another reassessment conducted on those transgender inmates housed at the facility every six month if still incarcerated. The PREA Remedial Training handout stated, "Transgender inmates will have a PREA Reassessment Screening completed every 6 months after the original PREA Reassessment Screening Instrument. The facility provided documentation of the training through

staff signatures on the Meeting Attendance Sheet to demonstrate compliance. Substantial compliance has been met.

The facility has a process in place for transgender and intersex inmates the opportunity to shower separately from other inmates. Policy 12.14.00 Section 12.14.08 Showers and Grooming Issues states, "Incoming cross-gender inmates and detainees shall be given the opportunity to shower separately from others. This information shall be communicated to such inmates or detainees by their Classification Counselor or a Unit Correctional Officer." The housing units have single shower stalls with privacy shower curtains or barriers as observed during the facility tour. The PREA Compliance Manager stated if the inmate was not comfortable in the single showers, the housing unit officer would offer the transgender inmate shower time during lockdown periods. A shower schedule can also be created for a transgender inmate that allows them to shower without other inmates in the area. In restrictive housing the inmates are placed on the daily inmate shower schedule and shower separately (alone) from other inmates inside these housing units. Showers are documented on OMS and appropriate restrictive housing forms. The Classification Counselors stated the housing units have single showers with curtains that provide privacy to transgender and intersex inmates. The one transgender/non-binary inmate interviewed stated she was able to shower separately and was afforded privacy.

Policy 12.14.00 Section 12.14.06 states, "No cross gender, gay or lesbian inmate/detainee shall be placed inside a dedicated facility, unit, or other living area bases solely upon such identification or status, unless such placement is in connection with a consent decree, legal settlement or legal judgment for the purpose of protecting such individuals." The Auditor interviewed one transgender/non-binary, two gay, two bisexual, and one lesbian inmate. All the inmates stated they were not housed in dedicated facilities, units, or wings on the basis of their identification. The inmates stated they were treated with respect. The PREA Coordinator stated the agency does not have a dedicated facility or unit solely for the housing of lesbian, gay, bisexual, transgender, or intersex inmates. These inmates are housed in the general population, although their specific housing location will be influenced by their vulnerability. The Auditor reviewed the housing assignments of the inmates, and it demonstrated the inmates are housed throughout the facility.

Standard 115.43: Protective Custody

115.43 (a)

- 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 ☐ No
- 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 ☐ No

115.43 (b)

- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible? ☒ Yes ☐ No

- 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 ☐ No
- 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 ☐ No
- 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 ☐ No
- If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The opportunities that have been limited? ☒ Yes ☐ No
- If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The duration of the limitation? ☒ Yes ☐ No
- If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The reasons for such limitations? ☒ Yes ☐ No

115.43 (c)

- 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 ☐ No
- Does such an assignment not ordinarily exceed a period of 30 days? ☒ Yes ☐ No

115.43 (d)

- 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 ☐ No
- If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged? ☒ Yes ☐ No

115.43 (e)

- 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 ☐ No

Auditor Overall Compliance Determination

- ☒ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☐ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ **Does Not Meet Standard** (*Requires Corrective Action*)

The agency's Policy 03.06.00 Section 03.06.08 Segregation Housing Placement states, "Inmates and detainees at risk for sexual victimization shall not be placed into involuntary segregation unless an assessment of all available housing alternatives has been conducted and a determination has been made that there is no available alternative means of separation from likely abusers. If this housing assessment cannot be conducted immediately, the inmate or detainee may be held in involuntary segregation for less than 24 hours while the assessment is being completed. The Superintendent stated the agency prohibits placing inmates at high risk for sexual victimization or who have alleged sexual abuse in involuntary segregated housing in lieu of other housing options. He stated the inmate would be housed in a medical cell until another housing option can be determined and this is usually completed by the next day. The inmate would not be placed in isolation. He stated medical housing is used so the inmate is not isolated. Medical placement would be for the safety of the inmate since most housing units do not have locking doors. The PREA Compliance Manager shared an assessment is conducted by the Watch Commander or Classification staff to determine if an inmate at high risk of sexual victimization would be placed in segregation housing. Per staff interviews and the PAQ, there have been no inmates at risk for sexual victimization placed in involuntary segregated housing during the audit period.

Policy 03.06.00 Section 03.06.08 states, "Inmates or detainees placed into segregated housing for this purpose shall have access to programs, privileges, education and work opportunities to the extent possible. If access to programs, privileges, education, or work opportunities is restricted, the facility shall document the type, duration, and reasons for such limitations." Policy 10.01.07 Restricted Housing Section 10.01.07 Management of Restrictive Housing Units outlines the inmates access to programs, privileges, education, and work opportunities. The policy outlines inmates in restrictive housing for administrative segregation shall have the same access to commissary as general population inmates; same privileges to retain property in their cells; have access to two hours of exercise each day including access to outdoor exercise; have the same health care services as general population inmates, including dental, eye care, etc. and shall also receive mental and psychiatric examinations, treatment, and supervision by mental health professionals; have the opportunity to shower and shave three times per week, according to unit schedule; have reasonable access to legal materials and the Inmate Legal Research computer; can write and receive mail in the same manner as those in general population; meet with the chaplain or another religious leader at any time; same access for visits (legal and non-legal) as those in general population. The Lieutenant who supervises inmates in segregated housing stated inmates would have access to programs, privileges, education, and work opportunities. The inmates would be escorted to classrooms for programs. The inmates would receive privileges the same as the general population including visitation, commissary, recreation, phone calls, library books, and law library materials with access to the law computer. For education, the inmates would receive educational packets and have opportunity to attend classes and testing. The work opportunities would be limited to unit workers for the inmate's safety. The Lieutenant also stated that programming, privileges, work opportunities, and education would only be restricted based on the inmate's behavior as determined through the disciplinary process after being found guilty of a rule violation. The disciplinary hearing would document the restriction duration, what opportunities was restricted, and the reasons for restriction.

Policy 03.06.00 Section 03.06.08 states, "Inmates and detainees placed in involuntary segregation shall only remain so until an alternative means of separation from likely abusers can be arranged. Such a housing assignment shall not ordinarily exceed a 30-day time period. If an involuntary housing assignment is made pursuant to this section, the basis for the facility's concern for the inmate or detainee's safety and the reason why no alternative means of separation can be arranged shall be clearly

documented.” Policy 10.01.00 Restricted Housing Section 10.01.04 states, “If such an inmate is placed in restrictive housing longer, the Sheriff or designee shall certify in writing: the reason(s) why the inmate may not be safely held in general population; there is no available housing inside a housing unit comparable to general population; that efforts are being taken to find an appropriate housing unit and the status of those efforts; the anticipated time from the resolution; a copy of the written certification shall be provided to the inmate.” The Superintendent stated a risk assessment would be completed by classification, the investigator would meet with the inmate to determine any concerns, and classification will review housing options and make an appropriate housing placement. This all occurs usually in a day, about twenty-four hours even though the policy allows up to 30 days. The Lieutenant stated the certification of housing longer than thirty days would be documented on an incident report form to the Superintendent.

Policy 03.06.00 Section 03.06.0 states, “The segregation housing status shall be reviewed every 30 days. This is to determine if there is a continuing need for such segregation from general population.” If an inmate would be placed in involuntary administrative segregation housing, the inmate would have a daily review conducted by the Lieutenant to access any needs or concerns of the inmate. Also, on a daily basis, a Classification committee including the Lieutenant, classification staff, and other staff as needed reviews the inmate’s placement. The Special Housing Unit Routing Sheet will document any changes or housing placements made including when the inmate is returned to general population. and The PREA Compliance Manager shared thirty-day reviews are conducted also during the monthly PREA Review Committee meeting. As part of the monthly PREA Review Committee meeting, the committee discusses inmates who are considered to be at high risk for sexual victimization as documented through meeting agenda and minutes.

The Dartmouth Correctional Complex has not placed an inmate in protective custody involuntarily during the audit period. Although the facility has not held an inmate in involuntary segregated housing, the Auditor reviewed the process by the documentation of other inmates housed in protect custody at the inmates’ requests for other reasons than PREA related. From the interviews with staff and the review of the documentation samples of protective custody placements, the Auditor determined that the facility was addressing individual housing and program needs consistent with the security and safety of the inmate. The procedure and practice of daily reviews by the Lieutenant and the Classification committee exceeds the standard requirement of reviews every thirty (30) days.

REPORTING

Standard 115.51: Inmate reporting

115.51 (a)

- Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment? ☒ Yes ☐ No
- 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 ☐ No

- 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 ☐ No

115.51 (b)

- Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency? ☒ Yes ☐ No
- Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials? ☒ Yes ☐ No
- Does that private entity or office allow the inmate to remain anonymous upon request? ☒ Yes ☐ No
- 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? ☒ Yes ☐ No ☐ N/A

115.51 (c)

- Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties? ☒ Yes ☐ No
- Does staff promptly document any verbal reports of sexual abuse and sexual harassment? ☒ Yes ☐ No

115.51 (d)

- Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

The Dartmouth Correctional Complex established procedures allowing for multiple internal and external ways for inmates to report sexual abuse, sexual harassment, and retaliation. These procedures are outlined in the agency's Policy 03.06.00 Section 03.06.12 PREA Reporting Procedures for Inmates, Detainees, and Prisoners. The policy states "The Sheriff's Office shall provide all inmates with multiple internal ways to privately report incidents of sexual abuse/sexual harassment; inmate or employee

retaliation for reporting sexual abuse/harassment; and the neglect or violation of responsibilities by staff, which may contribute to such incidents. Sentenced inmates and pre-trial/ICE detainees can report allegations of sexual abuse/harassment in the following manner: by placing a written grievance or emergency grievance into a locked grievance box; by speaking with a health care practitioner during daily sick call; by speaking with any Sheriff's Office employee; by using the Sheriff's Office "hotline" telephone service for access to SIU Investigators; by contacting an outside agency or victim advocate service by mail or telephone." This is the same reporting methods for the Ash Street Jail inmates. These methods are also listed in the Inmate Handbook along with calling or writing someone outside the facility who can notify administrative staff, letter to Superintendent, letter to employee, grievance, and a written note marked confidential. Inmates may also report allegations through third-party reporting or send an anonymous note. The PREA reporting methods are shared with inmates at intake, during orientation, in the Inmate Handbook, and on posters throughout the facility. The hotline goes directly into the Special Investigation Unit. The inmates can use the SIU hotline for reporting an allegation and for third-party reporting. The Inmate Handbook informs the inmates that "Inmates who believe they are a victim of sexual assault or misconduct must tell a staff member or someone else who can help. Such matters shall be handled confidentially. Inmate victims shall be protected. Physical protection shall be provided, as well as medical and mental health services. Inmates who report sexual harassment or abuse will allow staff to protect others by investigating, isolating, and prosecuting the abuser. All reports concerning the identity of an inmate victim of sexual assault shall be limited only to those on a "Need to Know" basis. Inmates may report allegations of sexual abuse or sexual harassment to Sheriff's Office officials by reporting the allegation verbally to an employee, medical/mental health professional, chaplain, etc.; submitting a Sick Call Slip to meet with the Health Service Unit and/or reporting to HSU staff during sick call; forwarding a written grievance to the Grievance Coordinator; forwarding a written note (marked "confidential") to a medical/ mental health professional, PREA Coordinator, Grievance Coordinator, chaplain or other employee; calling or writing someone outside the facility who can notify facility administrative staff; forwarding a letter to the Superintendent or designee at 400 Faunce Corner Road, North Dartmouth Ma, 02747; and using the STRICTLY CONFIDENTIAL Hot Line which goes directly to the Sheriff's Investigation Unit. This call is no charge. To access the hotline, dial PIN# 959606, then 508-995-9609." The same information is provided to the inmates on the PREA poster in each housing unit. During interviews with random inmates, the inmates knew the options available to them for reporting. They indicated they could report through telling an officer, writing a note, call the hotline number on the poster, tell any staff member (nurse, mental health, case manager), put in a medical slip, write to individuals outside the facility, tell another inmate, and tell someone outside the facility like family or a friend. Also, during the informal interviews with inmates during the facility tour, the inmates knew the numerous reporting methods and pointed out the PREA poster with reporting information. The inmates interviewed stated they felt comfortable reporting to the housing unit officer or a security supervisor and felt the staff would handle the situation properly. The random staff interviewed also acknowledged the numerous ways inmates could report an allegation including the hotline, drop a note in the drop box, notify any staff, medical slip, contact family and friends, telling another inmate; and anonymously through the phone or writing a note. Of the eleven allegations reported, one was reported by another facility, one was reported to the Massachusetts Department of Correction through an inmate letter, eight verbally to staff (two to mental health staff, one to a nurse, four through case managers, one to the Major), and one was reported during an investigation for fighting.

The Auditor tested the reporting and the emotional support services numbers posted in the housing unit. The phones required an inmate pin to be used for any phone calls, which would identify an inmate and not allow an anonymous call. The facility corrected the issue by allowing the PREA numbers to be dialed

without entering an inmate pin providing the inmate with a private, free, and anonymous reporting method. This was accomplished while the Auditor was on-site. A posting in the housing unit informs the inmates that "Calls are subject to monitoring and recording."

Policy 03.06.00 Section 03.06.12 states, "The Sheriff's Office shall provide all inmates with access to at least one way of reporting sexual abuse/harassment to a public or private entity or an independent office that is able to receive and immediately forward such reports to department officials. These can be anonymous requests. Staff shall communicate these reporting procedures by poster, CCTV, and staff conversations." The Inmate Handbook and the PREA Poster informs the inmates they can report outside the facility to the Bristol County District Attorney's Office Special Victims Unit which includes an address and a confidential toll-free number to call. The District Attorney's Office will forward any reporting incidents to the agency with the consent of the inmate. If the inmate requests to stay anonymous then the allegation with basic information is forwarded without the inmate's name or number. These reporting systems were demonstrated through review of policies and procedures, information in the Inmate Handbook and on the PREA poster, and interviews with inmates and staff. One allegation for the audit period was reported to an outside agency, the inmate wrote a letter to the Massachusetts Department of Correction.

Policy 03.06.00 Section 03.06.12 states, "All verbal, written, or anonymous allegations of sexual abuse or sexual harassment shall be accepted and investigated by the Sheriff's Office, including third-party allegations. Verbal allegations shall be documented and reported no later than the end of the work shift." Random staff interviewed stated they would report an allegation immediately to the Watch Commander and complete a written report utilizing the incident report form. The staff indicated the report would be completed as soon as possible and must be completed prior to the end of shift. The staff's PREA information card also outlines the reporting requirements. Staff also shared that the information would not be shared with other staff unless there was a need to know. Through the Auditor's review of the investigative files, the files demonstrated that allegations reported to staff were reported immediately and an incident report was written.

Policy 03.06.00 Section 03.06.13 Staff Reporting Duties/First Responder Procedures states, "An employee can privately report an allegation of sexual abuse and sexual harassment by using the SIU hotline telephone number, by writing anonymously to SIU investigators, or by other private means of communication. All anonymous allegations shall be investigated." Nine of the twelve random staff interviewed stated they would have to report to their Watch Commander and follow the chain of command. Only three staff knew they could contact SIU in person or through the hotline and/or contact the District Attorney's Office. The majority of staff were not aware they could report privately outside their chain of command. The SIU hotline available to staff is answered during normal business hours and after hours it goes to a recording. The SIU investigator stated the recording is checked regularly.

Did Not Meet: Staff were unaware how they could report privately report sexual abuse and sexual harassment of inmates. Refresher training for staff must be conducted on the method staff can report privately sexual abuse and sexual harassment of inmates, through SIU.

Corrective Action Taken: The agency created new posters (Report Sexual Abuse Now Notice to Employees) which state that employees can report a PREA allegation privately by contacting the Sheriff's Investigative Unit, the MA State Police, and the Bristol County District Attorney's Office. The posters have been placed in locations within the Dartmouth Complex and the Ash Street Jail, especially where employees gather (break rooms). This new information was communicated to Correctional staff on November 10, 2021, with a training bulletin. The training bulletin Anonymous

PREA Reporting states, "A reminder to all Security Staff that an employee can report a PREA allegation anonymously using the SIU hotline at 508-995-9609. They can now also anonymously report such an allegation by contacting the M State Police at 508-993-2016 and/or: The Bristol County District Attorney's Office at 508-996-1844. New posters communicating this information shall be posted throughout the facility break rooms and other locations. PLEASE ENSURE STAFF ON EACH SHIFT REVIEWS AND SIGN OFF ON THIS MEMO ACKNOWLEDGING ITS CONTENT." The agency provided photos of the posters placed in staff locations and Anonymous PREA Reporting Procedure sign off sheets that documented staff signatures receiving the refresher training to demonstrate compliance. Substantial compliance has been met.

Standard 115.52: Exhaustion of administrative remedies

115.52 (a)

- Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse. ☒ Yes ☐ No ☐ NA

115.52 (b)

- Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA
- Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

115.52 (c)

- 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 ☐ No ☐ NA
- 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 ☐ No ☐ NA

115.52 (d)

- 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 ☐ No ☐ NA

- If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)
☒ Yes ☐ No ☐ NA
- At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

115.52 (e)

- 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 ☐ No ☐ NA
- Are those third parties also permitted to file such requests on behalf of inmates? (If a third-party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA
- If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)
☒ Yes ☐ No ☐ NA

115.52 (f)

- 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 ☐ No ☐ NA
- After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)
☒ Yes ☐ No ☐ NA
- After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA
- After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)
☒ Yes ☐ No ☐ NA

- Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA
- Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA
- Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

115.52 (g)

- 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 ☐ No ☐ NA

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

The agency's policies 13.02.00 Inmate Grievances Section 13.02.15 Grievances Regarding Allegations of Sexual Abuse and Policy 03.06.00 Section 03.06.12 PREA Reporting Procedures for Inmate, Detainees, and Prisoners – Grievance System addresses administrative procedure for inmate grievances regarding sexual abuse and the agency's policies and procedures for filing emergency grievances when an inmate is subject to a substantial risk of imminent sexual abuse. The information is shared with the inmate through PREA education, the Inmate Handbook, and by policy on the Inmate Legal Computer System. Policy 03.06.00 Section 03.06.12 states, "Sentenced inmates and pre-trial/ICE detainees can report allegations of sexual abuse or sexual harassment through the written grievance process. All grievance forms alleging imminent sexual abuse or sexual harassment shall be accepted and forwarded to the PREA Coordinator for immediate action. Inmate grievance reporting procedures can be found in 13.02.00 "Inmate Grievances", which is available within the Inmate Legal Computer System." Policy 13.02.00 Section 13.02.15 states, "Inmates may use the grievance process as one method to privately report incidents of sexual abuse; however, if an inmate chooses to report an allegation of inmate sexual abuse using the grievance process, inmates may only use the Formal Grievance process to report such allegations. If an inmate wishes to grieve a claim of sexual abuse alleged to have already occurred, including allegations of sexual harassment, voyeurism, retaliation concerning the submission of a report or grievance concerning sexual abuse or harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents, the inmate must submit an Inmate Grievance Form. Inmates may not use the informal grievance process to grieve an alleged incident of sexual abuse. The process for grievances alleging sexual abuse shall consist of the two-step process applicable to all formal grievances, which consists of the following: Step One: The filing of an Inmate Grievance Form; and Step Two: The filing of an appeal to request a review of a decision denying a grievance." The PREA

Compliance Manager shared the agency has an administrative process to address inmate/detainee grievances regarding sexual abuse and harassment. The PREA Coordinator is responsible for addressing any inmate or detainee grievance relative to sexual abuse or harassment. There has not been a Formal Grievance Form submitted by an inmate or detainee at the Dartmouth Correctional Complex or Ash Street Jail during the audit period.

Policy 03.06.00 Section 03.06.12 states, "There shall be no time limit imposed on when a sentenced inmate or pre-trial/ICE detainee can submit a grievance alleging sexual abuse or sexual harassment. Applicable time limits and procedural rules, however, may be applied to other portions of the grievance process which do not apply to a PREA related allegation. If those portions are rejected, the PREA allegation(s) will continue to be accepted until the conclusion of a PREA investigation and, if requested, appeal process." Policy 13.02.00 Section 13.02.15 states, "Time limits or other rules and procedures applicable to any portion of a grievance that does not allege an incident of sexual abuse may otherwise apply. No claim of sexual abuse contained in an Inmate Grievance Form shall be rejected; however, an Inmate Grievance Form that alleges an incident of sexual abuse and an additional complaint(s) regarding an incident, a condition of confinement, or application of a facility policy, rule or regulation shall result in the rejection of the additional complaint(s). The inmate shall be given notice of the rejection of the additional complaint(s) and the grievance shall be processed regarding the incident of alleged sexual abuse only. Inmates shall not be required to submit a Formal Grievance to an employee who is the subject of the complaint. The Sheriff's Office shall ensure that an inmate who alleges sexual abuse may submit a grievance without submitting it to an employee who is the subject of the complaint and that such grievance shall not be referred to an employee who is the subject of the complaint."

Policy 13.02.00 Section 13.02.15 states, "The total time to issue a Final Decision concerning an allegation of sexual abuse shall not exceed ninety (90) calendar days from the date the grievance was initially filed by the inmate. Computation of the ninety (90) calendar day period shall not include the time consumed by the inmate in preparing and filing his/her appeal. The Sheriff's Office may extend the time to issue a Grievance Decision or Appeal Decision, up to a total of seventy (70) calendar days if the normal time period is insufficient to make an appropriate decision. The inmate shall be notified in writing of any extensions. At any point during the administrative process that an inmate does not receive a response within the allotted time period for reply, the inmate may consider the absence of a response as a denial at that level. If the inmate does not receive a Grievance Decision within thirty (30) business days of the date the grievance was filed, plus any properly noticed extension of time, the grievance shall be considered denied at the expiration of this time limit. Inmates may appeal such denied grievances within five (5) business days of the grievance being considered denied. If the inmate does not receive an Appeal Decision within thirty (30) business days of the date the appeal was filed, plus any properly noticed extension of time, the appeal shall be considered denied and shall constitute a Final Decision by the Sheriff's Office at the expiration of this time limit. A denied grievance or grievance that is considered denied that is not appealed by an inmate shall constitute a Final Decision by the Sheriff's Office." The agency had no grievances files that alleged sexual abuse per the PAQ and the PREA Compliance Manager. The Auditor reviewed the investigative files, and no allegation was reported through the grievance process.

The policy also addresses third party assistance. Policy 13.02.00 Section 13.02.15 states, "A third party shall be permitted to assist an inmate in filing a grievance relating to allegation of sexual abuse. A third party may file a grievance on behalf on an inmate; however, the Sheriff's Office may require as a condition of processing the grievance that the inmate agree to have the grievance filed on his or her behalf and may also require the inmate to personally pursue any subsequent steps in the administrative remedy process. Should an inmate decline to have a grievance filed on his/her behalf by a third party, this fact shall be documented." There were no third-party grievances filed.

Grievances alleging sexual abuse are handled as emergency grievances. Policy 13.02.00 Section 13.02.15 states, "Inmates submitting an Inmate Grievance Form concerning imminent sexual abuse shall write "Emergency" clearly on the top of the grievance form and hand it to any employee. Grievances alleging that an inmate is subject to a substantial risk of imminent sexual abuse shall be treated as an emergency grievance. An employee who first receives an Emergency Grievance regarding imminent sexual abuse shall contact and apprise either the PREA Coordinator (during regular business hours) or the Watch Commander (during nonbusiness hours) of the situation and forward the grievance to them. The on-call SIU Investigator and the Duty Officer may also be contacted during non-business hours. The Superintendent or designee shall be notified of this grievance by the next business day. Upon notice of the Emergency Grievance, the Superintendent or designee (during business hours) or the Watch Commander (during non-business hours) shall review the situation and take appropriate steps regarding the housing/security of the inmate who wrote the grievance. If necessary, the inmate may be transferred to a segregation housing unit until a proper investigation of the inmate's emergency grievance can occur. The Duty Officer shall be notified." The policy also outlines timeframes. Policy 13.02.00 Section 13.02.15 states, "The PREA Coordinator or other appropriate employee shall conduct an investigation of the Emergency Grievance and shall provide the inmate with an initial response within forty-eight (48) hours and a final decision within five (5) calendar days documenting the determination whether the inmate is in substantial risk of imminent sexual abuse and the action taken in response to the Emergency Grievance. An inmate may appeal the denial of an emergency grievance alleging a substantial risk of imminent sexual abuse within five (5) business days of being served with the decision denying the grievance. The inmate may not appeal an approved grievance. The Appellate Authority shall issue an Appeal Decision within thirty (30) business days. The Appeal Decision shall constitute a Final Decision on the merits of the grievance. The PREA Coordinator shall retain a copy of the Emergency Grievance and forward the original to the Grievance Coordinator to record the receipt of the Emergency Grievance, the initial response and final decision. The Grievance Coordinator shall serve the inmate with his/her copy of the grievance and maintain a record of the grievance." The PREA Compliance Manager shared the agency has not received an emergency inmate grievance during the audit period alleging that an inmate is at risk of imminent sexual abuse. If so, the emergency grievance would be reported to the PREA Coordinator for initial response within 48 hours.

Policy 13.02.00 Section 13.02.15 states, "The Sheriff's Office may discipline an inmate for filing a grievance related to alleged sexual abuse only when the agency demonstrates that the inmate filed the grievance in bad faith." The PREA Compliance Manager shared there have been no causes to discipline an inmate for a "bad faith" allegation thus far in 2021. The agency provided an example where an inmate reported a false PREA allegation of sexual abuse against a staff member in 2020 to demonstrate practice. The allegation was investigated and determined unfounded, deemed to have not occurred. The video evidence showed no time did the alleged staff member or any other staff member enter the inmate's cell and witness statements also supported the documentation. The inmate was issued a discipline report from SIU for falsifying a PREA allegation. The inmate had already received discipline for a previous false PREA report.

During the random inmate interviews, the inmates indicated they felt comfortable reporting sexual abuse or sexual harassment to the staff. They know the options available to them for reporting including filing a grievance.

There were no grievances that alleged sexual abuse or emergency grievances during the audit period. There were no inmates disciplined for filing a grievance in bad faith during the audit period.

Standard 115.53: Inmate access to outside confidential support services

115.53 (a)

- 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 ☐ No
- 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? ☒ Yes ☐ No
- Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible? ☒ Yes ☐ No

115.53 (b)

- Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws? ☒ Yes ☐ No

115.53 (c)

- Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse? ☒ Yes ☐ No
- Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

The agency provides access to victim advocates for emotional support services through a phone number and mailing addresses for inmates. This information is provided to the inmate population through the Inmate Handbook and the PREA poster. The agency's Policy 03.06.00 Section 03.06.12 PREA Reporting Procedures states, "The Sheriff's Office shall provide all inmates with access to outside victim advocates for emotional support services related to sexual abuse. They shall be provided mailing addresses and telephone numbers, including toll-free hotline numbers of local, state, or national victim advocacy or rape crisis organizations, where available. Reasonable communication between inmates and these outside

services shall be provided in as confidential a manner as possible. The Sheriff's Office shall inform all inmates 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. The Sheriff's Office shall maintain or attempt to maintain agreements with at least one community service agency that is able to provide confidential emotional support related to sexual abuse for all inmates (such as the New Bedford Women's Center.) Memoranda of Understanding shall be secured and maintained."

The agency has a Memorandum of Understanding (MOU) with the New Bedford Women's Center to provide victim advocate services to inmates. The agency has worked with the New Bedford Woman's Center for over twenty years. A representative from the Women's Center is on-site for about twenty-one hours a week. The MOU outlines the services provided including: responding promptly to allegations of sexual abuse or sexual harassment; report allegations of sexual abuse or sexual harassment to the Sheriff's Office while maintaining confidentiality as required by state standards for certified crisis counselors and the New Bedford Women's Center; provide emotional support, crisis intervention, information, and referrals to inmate victims of sexual abuse; accompany and support victims of sexual abuse through the forensic medical examination process, investigatory interview, when requested by the victim; communicate any questions and communication to the PREA Coordinator and other relevant personnel; provide training for Sheriff's Office employees when requested; and comply with National PREA Standards. The New Bedford Women's Center representative also provides education classes for inmates including Domestic Violence Group; Sexual Assault; PREA – Effects on Family and Self; Motivation to Change; Healthy Relationships; Self-Esteem; and Art Therapy. Through an interview with a New Bedford Women's Center representative, she stated emotional support services is provided for a forensic exam at the hospital and the Center tries to mandate a follow-up face to face meeting however an inmate can decline. She also stated most emotional support services are provided over the phone to inmates at the facility, however, individual meetings can be set up with the inmate within twenty-four hours. If a visit is scheduled, the facility is notified, and the visit is scheduled. The agency indicated that the facility is very cooperative in the process. If an inmate is released, the agency will continue to provide service to the inmate. If the inmate moves out of the catchment area, then a referral would be made to another provider.

The inmates are informed of the emotional support services through the Inmate Handbook and the PREA poster. The Inmate Handbook and PREA poster states, "Inmates may confidentially contact an outside victim advocate regarding incidents of sexual abuse or sexual harassment. This service shall be for crisis intervention, information, and emotion support only- not for reporting purposes. All inmates may contact this agency as follows: The New Bedford Women's Center 400 County Street New Bedford MA 02740 Confidential Toll- Free Number: 508-996-6636." Inmates can contact the agency by dialing the phone number on the phone system 24/7. The Auditor tested the phone number from an inmate phone and was able to contact to the Women's Center. Inmates are also able to write as a privileged correspondence. Inmates are informed to the extent communications will be monitored through the Inmate Handbook, Inmate PREA Acknowledgement Form, and on the PREA poster. It states, "Except when required by law, communications between an inmate and the victim advocate shall be confidential." The PREA Compliance Manager shared all conversations between inmates and the victim advocate are confidential, except when required by law.

The inmates interviewed were not aware of services available outside of the facility for dealing with sexual abuse and emotional support services. However, the facility provides the information with contact numbers and addresses to the inmates in numerous methods as demonstrated through the Inmate Handbook and the PREA poster posted throughout all housing units. The inmate that reported sexual abuse could not remember if emotional support service information was provided to her.

The agency and facility exceed the standard with the numerous ways emotional support is provided to the inmates. The instant accessibility through the phone number. And the cooperative relationship the facility has with the New Bedford Women's Center for emotional support services including a representative from the Women's Center is on-site for about twenty-one hours a week.

Standard 115.54: Third-party reporting

115.54 (a)

- Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment? ☒ Yes ☐ No
- Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

The agency's Policy 03.06.00 Section 03.06.12 PREA Reporting Procedures states, "The Sheriff's Office shall publicly distribute information on how third-party allegations of sexual abuse and sexual harassment can be reported, including on its website. This includes anonymous claims made by telephone or mail. All third-party and anonymous allegations shall be accepted, recorded, and investigated. SIU Investigators shall not deny an anonymous third-party allegation because the reporting person has refused to provide a written statement about their allegation or when the reporting person wishes to remain anonymous." The agency's website provides a phone number and address to the Special Investigation Unit as a method for third-party reporting of sexual abuse and sexual harassment. The website encourages family members and the general public to report allegations of sexual assault. It also states all allegations of sexual abuse or sexual harassment shall be investigated, including anonymous reports. Third party reporting information for the public is also shared through the Visitor Handbook and the PREA poster for the public. The Visitor Handbook states, "The Sheriff's Office has a Zero Tolerance Policy towards inmate sexual abuse or sexual harassment, Visitors are required to report such acts confidentially to the BCSO Special Investigations Unit at 508-995-6400. Allegations of sexual abuse or harassment shall be discussed with the victim named in the report. False allegations of inmate sexual abuse or harassment may be criminally prosecuted by the Sheriff's Office." The PREA poster for the public that is posted in areas of the facility where visitors have accessibility states, "VISITORS: The Bristol County Sheriff's Office has ZERO tolerance for sexual abuse or harassment. If you suspect your loved one is being harassed or pressured for sex, call the confidential number below: Confidential Phone Number 774-328-3900." The PREA Compliance Manager shared Visitor posters, pamphlets and the agency's website provide contact information for third-party and anonymous reporting. All such reports

shall be investigated by SIU Investigators. Random staff interviewed acknowledged that third-party reporting would be accepted and investigated.

OFFICIAL RESPONSE FOLLOWING AN INMATE REPORT

Standard 115.61: Staff and agency reporting duties

115.61 (a)

- 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 ☐ No
- 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 ☐ No
- 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 ☐ No

115.61 (b)

- Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions? ☒ Yes ☐ No

115.61 (c)

- 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 ☐ No
- Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services? ☒ Yes ☐ No

115.61 (d)

- 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 ☐ No

115.61 (e)

- 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 ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

The agency's Policy 03.06.00 Section 03.06.13 Staff Reporting Duties / First Response Procedures states, "All employees are required to immediately report any first-hand knowledge, suspicion, or information regarding one or more of the following allegations. ("Information" shall include third-hand information received, whether verifiable or believed to be credible): incidents of sexual abuse, misconduct, or harassment that have occurred in a correctional facility or elsewhere; acts of retaliation against any inmate, detainee, prisoner or employee who has reported an alleged incident of sexual abuse or harassment; acts of neglect or irresponsibility by an employee which may have contributed to an alleged incident of sexual abuse, sexual harassment or retaliation; knowledge that an inmate, detainee or prisoner is subject to a substantial risk of imminent sexual abuse; and/or physical evidence of an alleged incident of sexual abuse or sexual harassment." Staff are also informed of the reporting requirement on the PREA Information Card issued to all staff identifying the steps to take as a first responder, and reporting requirements. This is covered in the Lesson Plan: PREA -Duty to Report section covered in the orientation and annual in-service training. The staff PREA poster, Report Sexual Abuse Now, states, "NOTICE TO STAFF: The Bristol County Sheriff's Office has a ZERO tolerance for inmate sexual abuse or harassment. As a member of the Sheriff's Office, it is your duty to privately report any alleged PREA incident immediately to the on-duty WATCH COMMANDER, either by telephone or in person (no radio). All reported allegations of sexual abuse or sexual harassment, including third-party and anonymous reports, shall be investigated." The specialized and random staff interviews confirm that staff are knowledgeable in their reporting duties, the process of reporting, and to whom to report sexual abuse and sexual harassment of inmates. Staff interviewed indicated they would report immediately to the Watch Commander. After verbal reporting, a written report would be completed and forwarded to the Watch Commander. The Immediate Action Checklist Sexual Abuse / Assault Record is used to ensure all steps of the reporting process are followed. The PREA Compliance Manager shared the agency has requires that staff immediately report sexual abuse and harassment incidents, and employees are trained during orientation and in-service on PREA reporting procedures. Of the eleven allegations reported, eight allegations were verbally reported to staff (two to mental health staff, one to a nurse, four through case managers, one to the Major), and one was reported to staff during an investigation for fighting. Through the Auditor's review of the investigative files, the files demonstrated that allegations reported to staff were reported immediately and an incident report was written.

Policy 03.06.00 Section 03.06.13 states, "No employee shall reveal information related to a report of alleged sexual abuse or harassment to any other person except those designated supervisors and officials approved to make treatment, investigative, security or management decisions. Failing to protect such confidential information shall be a disciplinary offense, up to and including termination." Policy

03.06.00 Section 03.06.24 Confidentiality Issues states, "Information pertaining to sexual abuse or sexual harassment incidents shall be considered strictly confidential. Only those persons with a legitimate "need-to-know" should be aware of and be apprised of information and/or investigations of sexual abuse or harassment. Such persons shall include: the Sheriff, Special Sheriff or their designee; the Superintendent; the PREA Coordinator and PREA Compliance Manager(s); the ADS/Medical Services; employees assigned to the Central Classification Office; employees assigned to the Special Investigations Unit; employees assigned to the Legal Services Office; employees assigned to the Booking Office; authorized personnel, designated by the Contracted Medical Provider; designated Facility Managers (Ash Street Jail/Regional Lockup and Women's Center); personnel assigned to prepare for PREA compliance audits and other related external audits within the Sheriff's Office; and any other employee or contracted vendor, so authorized by the Sheriff or his designee. Apart from reporting to designated personnel or officials, internal communications regarding allegations of sexual abuse or sexual harassment shall be strictly controlled and limited to only persons identified herein. The Sheriff, Special Sheriff and/or the Superintendent, however, may limit information access to the individuals listed herein, based on the nature/sensitivity of the inmate sexual abuse/sexual harassment case. No employee shall reveal any information related to a sexual abuse report to anyone other than to the extent necessary, to make treatment, investigation, and other security/management decisions. Any employee who fails to follow these basic rules of confidentiality shall be disciplined, up to and including termination." The employee PREA poster also informs staff "it is your duty to privately report an alleged PREA incident immediately to the on-duty Watch Commander either by telephone or in person (no radio)." This is also part of the staff PREA training during orientation and annual in-service. Random staff interviewed stated any allegation is reported to the Watch Commander immediately or a block supervisor. The allegation information is strictly private and only shared with chain of command and other staff as needed, as the investigators.

Policy 03.06.00 Section 03.06.13 states, "Unless otherwise precluded by federal, state, or local law, medical and mental health practitioners shall report sexual abuse to appropriate Sheriff's Office officials. Medical and mental health practitioners shall inform inmates, detainees, and prisoners of their duty to report such matters and the limitations of confidentiality at the initiation of services." Policy CPS J-B-05 Response to Sexual Abuse states, "Any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to CPS qualified health care professionals and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments. CPS qualified health care professionals 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. This provision of informed consent shall be explicitly documented in a progress note." The policy also informs that CPS staff person will inform inmates of the staff person's duty to report sexual abuse, and the limitations of confidentiality, at the initiation of services. The medical and mental health practitioners are trained during the BCSO orientation and in-service training about mandatory PREA reporting procedures and the CPS Lesson Plan Training for Medical and Mental Health Staff also covers the requirement of confidential reporting and the responsibility of informing the inmate at the initiation of services the duty of staff to report. Medical and mental health practitioners indicated they would report any allegation of sexual abuse to the Watch Commander immediately. If the sexual abuse occurred outside the correctional facility, they would need informed consent from the inmate prior to reporting the incident. Of the eleven allegations reported, three were reported to healthcare staff (two mental health staff, one to a nurse). Through the Auditor's review of the investigative files, the files demonstrated that allegations reported to healthcare staff were reported immediately and an incident report was written.

Policy 03.06.00 Section 03.06.13 states, "Allegations of sexual abuse involving a juvenile (under 18) or a person considered a vulnerable adult under state or local statute shall be reported to a designated state

or local service agency, per applicable mandatory reporting laws.” Policy CPS J-B-05 Response to Sexual Abuse states, “CPS qualified health care professionals 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. The Superintendent stated the agency does not house juvenile/youthful offenders. If the inmate was a vulnerable individual, the agency would contact the District Attorney’s Office and the Massachusetts State Police for investigation. The agency would also contact the Department of Mental Health and Disabled Persons Protection Commission and if the inmate was elderly, the Executive Office of Elder Affairs would be contacted. The facility does not house youthful offenders. The PREA Compliance Manager and PREA Coordinator shared the agency has not held a juvenile or a vulnerable adult at the Dartmouth Correctional Complex or Ash Street Jail within the audit period.

Policy 03.06.00 Section 03.06.13 Staff Reporting Duties / First Response Procedures states, “All allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, shall be reported to SIU investigators.” The PREA Compliance Manager shared all allegations of sexual abuse or harassment, including third-party or anonymous reports, shall be reported by staff to the Special Investigations Unit and such allegations shall be investigated by qualified PREA trained investigators from that unit. The Superintendent stated all allegations are investigated by the SIU. There were two allegations reported by third parties, one was reported by another facility and the other through the Massachusetts Department of Correction. Both reported allegations were investigated confirmed through the Auditor’s review of the investigative files.

Standard 115.62: Agency protection duties

115.62 (a)

- 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 ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

The agency’s Policy 03.06.00 Section 03.06.12 PREA Reporting Procedures for Inmates, Detainees, and Prisoners states, “Once an employee learns that any inmate is subject to a substantial risk of imminent sexual abuse, immediate action shall be taken to protect that inmate.” The Superintendent stated staff would separate the inmate from the area for safety. Classification staff would see the inmate to determine a safe housing unit. If needed the inmate may be housed overnight on medical or restricted housing until a safe housing placement can be made. Medical and mental health staff would also see the inmate. The Superintendent also stated if SIU determines there is a legitimate threat, an investigation would be started. An inmate at risk for sexual victimization or a potential predator may be reclassified to another

housing unit or transferred if a housing option is not appropriate at the facility to ensure the safety of the inmate. The PREA Compliance Manager shared when an employee learns that an inmate or detainee is subject to a substantial risk of imminent sexual abuse, immediate action shall be taken to protect that inmate or detainee. They shall be separated from an inmate known to be a high risk for sexual abusiveness or alleged sexual abuser. Random staff interviewed knew the steps to take to protect an inmate at risk for sexual abuse with immediately action taken to protect inmates who are in substantial risk of sexual abuse by removing the inmate from the area to a safe location and contact the Watch Commander. Line and supervisory staff work simultaneous to take protective measures as information is reported.

In the past twelve months, no inmate reported feeling at imminent risk of sexual abuse, or any staff reported that an inmate was subject to substantial risk of imminent sexual abuse, therefore, there were no protective measures to implement.

Standard 115.63: Reporting to other confinement facilities

115.63 (a)

- 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 ☐ No

115.63 (b)

- Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation? ☒ Yes ☐ No

115.63 (c)

- Does the agency document that it has provided such notification? ☒ Yes ☐ No

115.63 (d)

- Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

The agency's Policy 03.06.00 Section 03.06.12 PREA Reporting Procedures for Inmates, Detainees, and Prisoners states, "When the Sheriff's Office receives an allegation that any inmate was sexually abuse while confined at another correctional agency, the Superintendent shall notify the appropriate

governmental or non-governmental administrator from that agency. This notification shall be made no later than 72 hours after receiving the allegation and shall be documented. It is expected that an investigation into such allegations shall be conducted by the outside correctional agency, according to National PREA Standards.” The PREA Compliance Manager shared per policy, the Superintendent shall notify the appropriate official when the agency received an allegation of alleged abuse occurring at another facility. There was only one case of this situation occurring in the past 12 months. In this case, due to the Superintendent’s absence, Major Perry notified the other agency (Plymouth County Sheriff Office) of the situation. The Auditor reviewed an email chain that documented the agency contacted the other correctional facility regarding the reported incident which occurred 2014-2015 as reported by the inmate. The Major acknowledged in the email to the other agency that the inmate claimed the case was already investigated. The other agency responded that the allegation was investigated, and the case was substantiated. The allegation was reported on November 9, 2020, after the SIU interviewed the inmate and the case was reported to the other agency on November 12, 2020, within the 72-hour requirement.

The agency’s policy did not address that PREA allegations received from other facilities/agencies that occurred at the Dartmouth Correctional Complex are investigated in accordance with PREA standards. Policy 03.06.00 Section 03.06.12 states, “It is expected that an investigation into such allegations shall be conducted by the outside correctional agency, according to National PREA Standards.” The PREA Compliance Manager shared if such an incident was reported, this agency would monitor to ensure that the allegation was properly investigated. The agency interpreted the standard as the agency they reported an allegation to would complete an investigation in accordance with the PREA requirements. The Auditor discussed the standard intent with the agency in the pre-audit review notes and during the on-site audit.

Did Not Meet: The facility’s policy does not address the actions taken when the facility is notified of a sexual allegation by another facility that occurred at your facility. The facility policy must be updated to address the standard language and provide training to staff on the policy update and action to be taken.

Corrective Action Taken: The agency updated policy 03.06.00 Prevention of Inmate Sexual Abuse and Sexual Harassment, Section 03.06.12 PREA Reporting Procedures to address the actions taken when the facility is notified of a sexual allegation by another facility. The policy language added states, “It is expected that the agency or facility head who receives such notification shall ensure that the allegation is investigated in accordance with National PREA Standards. The Superintendent or designee (e.g., the Major/Special Investigations Unit) shall contact the facility head/agency in writing after a reasonable time period (e.g., approximately 30 days) to verify the status/conclusion of the investigation.” The updated policy provided to demonstrate compliance addresses the policy requirement of the standard. Substantial compliance has been met.

Standard 115.64: Staff first responder duties

115.64 (a)

- 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 ☐ No

- Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence? ☒ Yes ☐ No
- 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 ☐ No
- 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 ☐ No

115.64 (b)

- If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

The agency's Policy 03.06.00 Section 03.06.13 Staff Reporting Duties / First Response Procedures and Policy 09.23.00 Section 09.23.04 Initial Response to a Crime / Incident Scene Control of Evidence requires that all staff must report immediately any knowledge, suspicion, or information regarding an incident of sexual abuse. The policies clearly specify the detailed procedures for security and non-security staff when responding to an allegation of sexual abuse. Policy 03.06.00 Section 03.06.13 states, "When a Correctional Officer is the First Responder to an allegation of sexual abuse or sexual harassment, they shall quickly take the following actions, regardless of facility or location. They shall ensure the immediate separation of the alleged victim and perpetrator(s), if known; promptly report to the Watch Commander or the Zone/Block Supervisor all known details of the allegation(s) and then initiate further instructions, if given. (Such reports shall be made in person or by phone— but NOT by radio); assess the acute medical needs of the alleged victim to determine if they need medical treatment or be stabilized; escort or arrange the escort of the alleged victim to a separate housing location, away from alleged perpetrator(s) and known witnesses. (The Watch Commander shall decide where the alleged victim will be placed if a secure location is not readily available); ensure that the alleged victim remains in visual contact with an employee until one or more Correctional Officers or SIU investigators arrive at the scene; request that the alleged victim and perpetrator(s) do not take any action that could destroy physical evidence, including, washing

body parts, brushing teeth, changing clothes, urinating, defecating, drinking or eating; ensure that the cell doors of the alleged victim and perpetrator(s) are secured until so ordered by SIU investigators (Both cells should be emptied); preserve and protect any crime scene until appropriate steps can be taken to collect evidence; secure physical property at the scene belonging to the alleged victim and perpetrator(s); perform any other actions that would benefit the protection of an alleged victim and to enhance the ability of the Sheriff's Office to conduct a proper investigation into the alleged incident; and submit an Incident Report of known details regarding the matter by the end of their work shift, following established reporting procedures." Policy 09.23.00 Section 09.23.04 states, "When a potential or known crime/incident occurs within a correctional facility, the first Correctional Officer(s) to arrive at the scene shall ensure that the crime/incident scene is not disturbed, accessed or contaminated and is cornered off immediately; ensure that the notification procedures established in 09.23.05 are followed; if the scene is located inside an inmate's living quarters, coordinate with the Watch Commander and/or Zone Supervisor to evacuate the inmates within the area and then lock access to the living quarters. (The living quarters nearest to the scene may also be evacuated until an investigation is completed and the scene is cleared.); ensure that no person removes, adds or alters anything at the scene, except for an Evidence Control Officer, another member of the Special Investigation Unit or other authorized personnel; protect and preserve evidence found at the scene unless there are serious health and/or safety concerns which would require the immediate removal of the evidence from the scene; ensure that the names of persons that were present during the establishment of the crime/incident scene are documented, as well as any other persons who subsequently enter the scene; a record/logbook shall be used to document the name, time and purpose of these persons. (It is critical that this be established for criminal investigations.) No inmate or unauthorized employee should be allowed into the general area until the investigation is completed, and the scene has been cleared; in instances of serious injury, death or serious criminal activity or imminent danger, it is incumbent upon the first Correctional Officer(s) at the scene to immediately and properly secure the area for future investigation." Each staff member is provided an informational card identifying the steps to take as a first responder and reporting requirements. The first responder duties are covered in orientation and annual in-service training. Random staff interviewed including the investigative, higher and intermediate level supervisors, first responders, non-security staff, and correctional officers were knowledgeable in the steps to take as a first responder. The first responders interviewed outlined the process taken to ensure the safety of the inmate including separate the inmates; secure the area; request the inmates not to destroy evidence and keep them in a secure area preferably with no sink or toilet; ask them not to change clothes, brush teeth, use bathroom; take the victim to medical; and contact the Watch Commander. Then document all details of the incident on an incident report. The Watch Commander will notify the Superintendent, PREA Coordinator, and SIU. The Watch Commander will complete the Sexual Abuse/Assault Immediate Action Checklist to record the incident actions taken. There was one allegation reported within a time frame that still allowed for the collection of physical evidence. In this case, the area was protected and preserved for the collection of evidence and the inmates were requested to take no action to destroy evidence, and the supervisor was notified as documented in the investigative file review.

The agency's Policy 03.06.00 Section 03.06.13 states, "When a non-correctional (civilian) employee is the First Responder of an allegation of sexual abuse or sexual harassment, they shall quickly take the following actions — regardless of location. They shall report the allegation confidentially to the Watch Commander, the Zone/Block Supervisor or a nearby Correctional Officer. Initiate further instructions, if given. (Such reports shall be made in person or by phone — but NOT by radio); remain at the location until one or more Correctional Officer or SIU investigator reports to the scene; take reasonable steps to prevent the alleged victim and perpetrator(s) from activities which could hamper an investigation, such as destroying possible evidence (e.g. washing body parts, brushing teeth, changing clothing, urinating, defecating, drinking or eating.); perform any action that would protect an alleged victim and enhance the ability to conduct a proper PREA investigation; and submit an Incident Report regarding the matter to the Watch Commander by the end of the work shift, following established reporting procedures." Policy

09.23.00 Section 09.23.04 states, "In the event that a civilian employee or another person (volunteer, vendor) is first to arrive at a suspected or known crime/incident scene, he/she shall immediately contact the closest Correctional Officer(s). The Correctional Officer(s) shall then follow the procedures established. Policy CPS J-F-06 Response to Sexual Abuse states, "CPS staff who receive information regarding a possible or actual incident of inmate or detainee sexual abuse shall inform the victim to avoid taking actions that might compromise physical evidence; notify BCSO staff of this information, if needed; assess the affected inmates or detainees for medical and emotional trauma; and take steps to safely address inmate and detainee needs." The non-security first responder interviewed stated the inmate was removed from the location and the Watch Commander was notified. The inmate was asked not to destroy evidence. An officer secured the area, and the inmate was taken to medical.

Standard 115.65: Coordinated response

115.65 (a)

- 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 ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

The Dartmouth Correctional Complex has a written institutional plan, Policy 03.06.00 Prevention of Inmate Sexual Abuse and Sexual Harassment and the Sexual Abuse/ Assault Immediate Action Checklist. The plan coordinates the actions taken in response to an incident of sexual abuse among first responders, security, medical and mental health practitioners, Special Investigations Unit, facility leadership, and victim advocates. Policy 03.06.00 Section 03.06.02 General Policy states, "This policy is the written institutional PREA plan, designed to coordinate actions taken among First Responders, medical and mental health practitioners, Investigators, and Sheriff's Office leadership following an allegation of sexual abuse." The policy sections include PREA reporting procedures, staff reporting duties/first responder procedures; investigation and evidence protocols; referrals to outside investigative agencies/criminal investigations, medical and mental health screening, and access to emergency medical and mental health services. The Sexual Abuse/ Assault Immediate Action Checklist is utilized to ensure all process steps are completed and notifications are made. During staff interviews, each area detailed their responsibilities in their coordinated efforts during an incident. The Superintendent stated all staff are trained on their responsibilities to a PREA incident through PREA training and also through the procedures in the PREA policy. He also shared the supervisors have a checklist of steps to follow and notifications to be made.

Standard 115.66: Preservation of ability to protect inmates from contact with abusers

115.66 (a)

- 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 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? ☒ Yes ☐ No

115.66 (b)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Policy 03.06.00 Section Prevention Measures and Planning states, "The Sheriff's Office shall not enter into or renew any Contractual or Collective Bargaining Agreement that would limit its ability to remove alleged staff sexual abusers from inmate contact, pending the outcome of an investigation or a determination on whether and to what extent discipline are warranted. Nothing shall restrict the Sheriff's Office from entering or renewing a Contractual Agreement that governs the conduct of the disciplinary process - as long as such an agreement is not inconsistent with the provisions regarding the evidentiary standard for administrative investigations and staff discipline; or whether a no-contact assignment that is imposed pending the outcome of an investigation shall be expunged from or retained in the employee's personnel file following that the allegation is no substantiated." The Sheriff's Office has collective bargaining agreements with Massachusetts Correctional Officers Federated Union, National Correctional Employee Union (Captains/Majors), National Association of Government Employees (Unit A), and National Association of Government Employees (Unit C). The Superintendent stated the union contracts allow removing alleged staff through a formal discipline process. An alleged staff member would be placed on administrative leave or removed from inmate contact until the outcome of the investigation. Based on the outcome of the investigation, a determination would be made of the appropriate discipline, if warranted, including termination. The agency has a right to reassign a staff member, move staff, and discipline staff.

Standard 115.67: Agency protection against retaliation

115.67 (a)

- Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff? ☒ Yes ☐ No
- Has the agency designated which staff members or departments are charged with monitoring retaliation? ☒ Yes ☐ No

115.67 (b)

- Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations? ☒ Yes ☐ No

115.67 (c)

- 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 offenders or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? ☒ Yes ☐ No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? ☒ Yes ☐ No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation? ☒ Yes ☐ No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports? ☒ Yes ☐ No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes? ☒ Yes ☐ No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes? ☒ Yes ☐ No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff? ☒ Yes ☐ No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff? ☒ Yes ☐ No

- Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need? ☒ Yes ☐ No

115.67 (d)

- In the case of inmates, does such monitoring also include periodic status checks?
☒ Yes ☐ No

115.67 (e)

- 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 ☐ No

115.67 (f)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

The agency's Policy 03.06.00 Section 03.06.18 Protection Against Retaliation states, "Any inmate or employee who reports an allegation of sexual abuse or harassment, or who cooperated with an investigation regarding sexual abuse or harassment, shall be protected from retaliation by other inmates or staff. SIU investigators shall be designated to monitor possible retaliation. Any person with knowledge or suspicion of such retaliation shall report the matter to SIU investigators in writing, in person, or by the confidential SIU hotline number. Verbal reports shall be documented. All reports shall be copied and forwarded to appropriate officials. Immediate steps shall be taken to protect any person who fears retaliation. Relevant whistle blower protection laws and victim rights laws shall be communicated to them, as necessary." At the time of the on-site audit, the SIU investigators were responsible for monitoring retaliation by completing the Supplemental PREA Review Report. The form states the investigators will include post interviews with victim as well as contents of mail monitors and phone calls. The investigators conclusion with recommendations are forwarded to classification. These reviews shall be conducted on all PREA Investigations that were founded to be substantiated or unsubstantiated. The PREA Compliance Manager shared SIU Investigators are responsible for monitoring staff and inmates from retaliation for reporting sexual abuse or harassment or for cooperating with a PREA related investigation. It was reported that the PREA Monitoring Form has not been needed for use in 2020-2021. The inmates are informed about retaliation monitoring through the PREA poster that states, "Inmates who report or cooperate with investigators regarding allegations of sexual abuse or sexual harassment will be protected from possible retaliation Any such occurrence is a very serious matter that may result in administrative or criminal sanctions." The PREA Coordinator stated the agency always checks on the victims on how

they are doing however, there is no formal documentation. He would review housing changes, disciplinary reports, and incident reports for inmates to determine if retaliation is occurring. For staff, the review would include staff call offs, disciplinary issues, and if a staff member requests a post change.

Policy 03.06.00 Section 03.06.18 states, "Appropriate measures shall be taken by the Sheriff's Office to protect any other person cooperating with a PREA investigation who expresses a fear of retaliation. Appropriate protective measures shall be taken to protect any person who reports a PREA allegation or cooperates with a PREA investigation who expresses a fear of retaliation. Any concerns or perceptions they may have about their own safety shall be addressed. Such measures may include changing a housing assignments and initiating transfers for an alleged victim and/or perpetrator(s); preventing contact between an alleged victim and perpetrator(s); providing employee assistance services (e.g. the Employee Assistance Program) or other resources for employees who may need psychological or emotional support; re-assigning alleged staff sexual abusers from contact with any victim pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted; re-assigning any other employee to another location or facility, as necessary; and providing support services to victims who may need psychological or emotional support." The Superintendent stated that staff training covers that retaliation is not accepted. If retaliation was suspected or known, the individual would be removed from the area and a separation order initiated whether an inmate or staff. The retaliation would be investigated and if substantiated the staff member would be removed legally and would take all appropriate actions if an inmate that may include transfer from the facility. The PREA Coordinator stated the agency would use housing movements, emotional support, removal of the abuser as measures to protect inmates and staff from retaliation and an investigation would be started. The agency provided notices of two officers reassigned and could not work a specific housing unit while the PREA investigation was being completed from the previous audit period to document practice. The one inmate interviewed that reported sexual abuse indicated the Major and Lieutenant would check on her to see if she had any concerns.

Policy 03.06.00 Section 03.06.18 states, "For at least 90 days following a report of sexual abuse, SIU investigators shall monitor the conduct and treatment of any inmate, detainee or employee who reported the sexual abuse to officials. Such monitoring shall continue for at least 90 days following a report of sexual abuse. For at least 90 days, any victim who reports to have suffered sexual abuse shall also be monitored for signs of possible retaliation by others. Inmate disciplinary reports, housing assignments or programming changes shall be monitored, as well as negative employee performance reviews, employee disciplinary actions and staff reassignments, etc. Monitoring may continue beyond 90 days if there is a continual need. When applicable, this procedure shall also apply to Regional Lockup prisoners. In the case of inmates or detainee monitoring, status checks shall be conducted periodically." The PREA Compliance Manager shared when required, investigators and other personnel periodically conduct status checks of inmates. There has been no situation requiring retaliation during the audit period. The PREA Coordinator stated an individual would be monitored for at least ninety days and monitoring would be expanded as long as needed. Policy 03.06.00 Section 03.06.18 also states, "Monitoring efforts shall be terminated when allegations of sexual abuse are determined to be unfounded."

The facility was not conducting a formal retaliation monitoring process and could not provide documentation of retaliation monitoring. This was acknowledged by the PREA Compliance Manager and the PREA Coordinator.

Did Not Meet: The facility could not provide documentation to demonstrate retaliation monitoring being completed. Staff acknowledged retaliation monitoring had not occurred. The facility must provide retaliation monitoring for inmates and staff who report sexual abuse or sexual harassment

or cooperate with sexual abuse or sexual harassment investigations from retaliation from other offenders or staff.

Corrective Action Taken: The agency submitted the updated policy 03.06.00 Prevention of Inmate Sexual Abuse and Sexual Harassment, Section 03.06.18 Protection Against Retaliation to change the requirement of retaliation monitoring from the investigator to the PREA Coordinator. The agency also provided three examples of retaliation monitoring documented on the Monitoring Retaliation Against Inmates/Staff Log to demonstrate compliance. Substantial compliance has been met.

Recommendation: That a staff member(s) be assigned to monitor retaliation instead of the investigative unit. The investigative unit may not be seen as an impartial individual for monitoring as the ones that completed the investigations. The agency updated the policy to have the PREA Coordinator complete the retaliation monitoring. This practice was demonstrated through the example retaliation monitoring forms submitted to demonstrate compliance.

Standard 115.68: Post-allegation protective custody

115.68 (a)

- 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 ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

The agency's Policy 03.06.00 Section 03.06.08 Segregation Housing Placement states, "Inmates and detainees at risk for sexual victimization shall not be placed into involuntary segregation unless an assessment of all available housing alternatives has been conducted and a determination has been made that there is no available alternative means of separation from likely abusers. If this housing assessment cannot be conducted immediately, the inmate or detainee may be held in involuntary segregation for less than 24 hours while the assessment is being completed." Policy 10.01.00 Restricted Housing Section 10.01.04 states, "If an inmate needs to be separated from general population for protection from harm by others (Protective Custody), they shall not be placed in restrictive housing, but inside a housing unit that provides approximately the same conditions, privileges, amenities, and opportunities as general population. Staff may place an inmate on Protective Custody in restrictive housing when suitable housing is not immediately available, but such placement should only be for no longer than 72 hours. If such an inmate is placed in restrictive housing longer than 72 hours, the Sheriff or designee shall certify in writing the reason(s) why the inmate may not be safely held in general population; there is no available housing inside a housing unit comparable to general population; that efforts are being taken to find an appropriate housing unit and the status of those efforts; and the anticipated time from the resolution. A copy of the

written certification shall be provided to the inmate.” The Superintendent stated the agency prohibits placing inmates at high risk for sexual victimization or who have alleged sexual abuse in involuntary segregated housing in lieu of other housing options. He stated the inmate would be housed in a medical cell until another housing option can be determined and this is usually completed by the next day. The inmate would not be placed in isolation. He stated medical housing is used so the inmate is not isolated. Medical placement would be for the safety of the inmate since most housing units do not have locking doors. The PREA Compliance Manager shared an assessment is conducted by the Watch Commander or Classification staff to determine if an inmate at high risk of sexual victimization would be placed in segregation housing. Per staff interviews and the PAQ, there have been no inmates placed in post allegation protective custody during the audit period.

Policy 03.06.00 Section 03.06.08 states, “Inmates or detainees placed into segregated housing for this purpose shall have access to programs, privileges, education and work opportunities to the extent possible. If access to programs, privileges, education, or work opportunities is restricted, the facility shall document the type, duration, and reasons for such limitations.” Policy 10.01.07 Restricted Housing Section 10.01.07 Management of Restrictive Housing Units outlines the inmates access to programs, privileges, education, and work opportunities. The policy outlines inmates in restrictive housing for administrative segregation shall have the same access to commissary as general population inmates; same privileges to retain property in their cells; have access to two hours of exercise each day including access to outdoor exercise; have the same health care services as general population inmates, including dental, eye care, etc. and shall also receive mental and psychiatric examinations, treatment, and supervision by mental health professionals; have the opportunity to shower and shave three times per week, according to unit schedule; have reasonable access to legal materials and the Inmate Legal Research computer; can write and receive mail in the same manner as those in general population; meet with the chaplain or another religious leader at any time; same access for visits (legal and non-legal) as those in general population. The Lieutenant who supervises inmates in segregated housing stated inmates would have access to programs, privileges, education, and work opportunities. The inmates would be escorted to classrooms for programs. The inmates would receive privileges the same as the general population including visitation, commissary, recreation, phone calls, library books, and law library materials with access to the law computer. For education, the inmates would receive educational packets and have opportunity to attend classes and testing. The work opportunities would be limited to unit workers for the inmate’s safety. The Lieutenant also stated that programming, privileges, work opportunities, and education would only be restricted based on the inmate’s behavior as determined through the disciplinary process after being found guilty of a rule violation. The disciplinary hearing would document the restriction duration, what opportunities was restricted, and the reasons for restriction.

Policy 03.06.00 Section 03.06.08 states, “Inmates and detainees placed in involuntary segregation shall only remain so until an alternative means of separation from likely abusers can be arranged. Such a housing assignment shall not ordinarily exceed a 30-day time period. If an involuntary housing assignment is made pursuant to this section, the basis for the facility’s concern for the inmate or detainee’s safety and the reason why no alternative means of separation can be arranged shall be clearly documented.” Policy 10.01.00 Restricted Housing Section 10.01.04 states, “If such an inmate is placed in restrictive housing longer, the Sheriff or designee shall certify in writing: the reason(s) why the inmate may not be safely held in general population; there is no available housing inside a housing unit comparable to general population; that efforts are being taken to find an appropriate housing unit and the status of those efforts; the anticipated time from the resolution; a copy of the written certification shall be provided to the inmate.” The Superintendent stated a risk assessment would be completed by classification, the investigator would meet with the inmate to determine any concerns, and classification will review housing options and make an appropriate housing placement. This all occurs usually in a day, about twenty-four hours even though the policy allows up to 30 days. The Lieutenant stated the

certification of housing longer than thirty days would be documented on an incident report form to the Superintendent.

Policy 03.06.00 Section 03.06.0 states, "The segregation housing status shall be reviewed every 30 days. This is to determine if there is a continuing need for such segregation from general population." If an inmate would be placed in involuntary administrative segregation housing, the inmate would have a daily review conducted by the Lieutenant to access any needs or concerns of the inmate. Also, on a daily basis, a Classification committee including the Lieutenant, classification staff, and other staff as needed reviews the inmate's placement. The Special Housing Unit Routing Sheet will document any changes or housing placements made including when the inmate is returned to general population. and The PREA Compliance Manager shared thirty-day reviews are conducted also during the monthly PREA Review Committee meeting. As part of the monthly PREA Review Committee meeting, the committee discusses inmates who are considered to be at high risk for sexual victimization as documented through meeting agenda and minutes.

The Dartmouth Correctional Complex has not placed an inmate in post allegation protective custody during the audit period. Although the facility has not held an inmate in post allegation protective custody, the Auditor reviewed the process by the documentation of other inmates housed in protect custody at the inmates' requests for other reasons than PREA related. From the interviews with staff and the review of the documentation samples of protective custody placements, the Auditor determined that the facility was addressing individual housing and program needs consistent with the security and safety of the inmate. The procedure and practice of daily reviews by the Lieutenant and the Classification committee exceeds the standard requirement of reviews every thirty (30) days.

INVESTIGATIONS

Standard 115.71: Criminal and administrative agency investigations

115.71 (a)

- 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 ☐ No ☐ NA
- 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 ☐ No ☐ NA

115.71 (b)

- Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34? ☒ Yes ☐ No

115.71 (c)

- Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data? ☒ Yes ☐ No
- Do investigators interview alleged victims, suspected perpetrators, and witnesses?
☒ Yes ☐ No
- Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator? ☒ Yes ☐ No

115.71 (d)

- 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 ☐ No

115.71 (e)

- 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 ☐ No
- 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 ☐ No

115.71 (f)

- Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse? ☒ Yes ☐ No
- 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 ☐ No

115.71 (g)

- 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 ☐ No

115.71 (h)

- Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?
☒ Yes ☐ No

115.71 (i)

- 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 ☐ No

115.71 (j)

- 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 ☐ No

115.71 (k)

- Auditor is not required to audit this provision.

115.71 (l)

- 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 ☐ No ☐ NA

Auditor Overall Compliance Determination

- ☒ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☐ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

The agency Policy 03.06.00 Section 03.06.14 Investigations and Evidence Protocols outlines the investigation process including that all allegations of sexual abuse and sexual harassment be referred immediately for investigation. The policy states, "Only qualified SIU investigators shall conduct an initial investigation whenever there is a report of first-hand knowledge, suspicion, or other information regarding an allegation of sexual abuse or harassment. This includes any third party or anonymous allegations/reports. Such investigations shall be conducted promptly, thoroughly, and objectively." The Superintendent stated that all allegations are referred for investigation immediately. The Special Investigations Unit (SIU) will conduct the administrative investigation and the Massachusetts State Police would conduct the criminal investigation, if warranted. The PREA Compliance Manager shared per policy, a trained SIU Investigator is notified by the Watch Commander whenever an allegation of sexual abuse or sexual harassment is made including third party and anonymous reports. A preliminary investigation is promptly conducted and documented. The allegation is further investigated to conclusion, which is documented. The Investigator interviewed stated an investigation would be started immediately once the allegation is reported during work hours and if after hours the investigator on call would be called to report and begin the investigation. The Investigator said it is the same process for anonymous and third-party reports. He said in a previous audit year he had an attorney report an allegation on the tip line and it was investigated as any other allegation. Policy 03.06.00 Section 03.06.14 states, "Within 72 hours from the start of their initial PREA investigation, the Lead Investigator shall complete a 72 Hour Sexual Abuse

Notification Form. This form shall provide a preliminary status report on the investigation up to that point (such as the names of alleged victims/perpetrators, allegations made, summary report, evidence, etc.). A Final PREA Investigative Report shall be submitted by investigators as a result of an initial or administrative PREA investigation.”

The agency Policy 03.06.00 Section 03.06.14 states, “SIU investigators who have received specialized training shall conduct PREA investigations. During regular business hours, at least one SIU investigator shall report to the scene of an alleged PREA incident, following notification. During nonbusiness hours, the on-call SIU investigator shall be contacted to report to the scene. If that investigator is not PREA qualified, arrangements shall be made so that a qualified investigator can report as soon as possible. The first, qualified SIU investigator to report to the scene shall be the Lead Investigator and shall remain so until relieved.” The agency currently has eight specialized trained investigators documented through training certificates. The Investigator interviewed confirmed attending specialized investigator training and the training covered PREA investigations. He explained techniques for interviewing sexual abuse victims including being compassionate, make sure they are ready to be interviewed so not to cause further harm, and treat the individual like a victim. He understood the difference between Miranda and Garrity warning and shared if Miranda is used for staff the legal department and the Massachusetts State Police would be involved. He stated evidence is collected by trained investigators and the SANE kits have a tracking process. He also stated that 51% of evidence is required to substantiate a case. The specialty training was verified through the Investigator’s interview and review of the training records including training certificates of all investigators. Upon review of the investigative files, the investigations were conducted by specialized trained investigators.

The agency Policy 03.06.00 Section 03.06.14 states, “Only SIU investigators or other qualified persons shall gather, collect, and preserve physical and/or DNA evidence at an incident scene, regardless of the circumstances, including available electronic monitoring data. The location of alleged sexual abuse, such as a cell, shall remain closed until so ordered by SIU Investigators. Evidence may be collected within 96 hours from the reporting of the alleged incident. Evidence collection shall be properly documented.” The PREA Coordinator stated all correctional staff, including SIU investigators, receive evidence collection training both at the academy and at in-service training. The SIU was also provided additional evidence collection training during 2021. Both administrative and criminal investigations and evidence collection start immediately following an allegation. The investigators complete the Sexual Assault Notification Form which has sections that address evidence protocols including securing the crime scene, was a rape kit conducted at the outside hospital, and a summary of the incident including evidence collected. Also, to ensure evidence is not destroyed, staff are trained on first responder duties that includes securing the scene and requesting the involved inmates not to destroy evidence. The Investigator stated the first steps in initiating an investigation would be go to medical health to review reports for information and conduct interviews with staff and inmates, that is assuming the inmates have already been separated and taken to medical. If not, the inmates would be separated to ensure the safety of the inmates: secure the crime scene, preserve, and protect the evidence; ensure the inmate is taken to medical and transported to outside hospital if needed; start initial inquiries; and collect reports from staff. The investigative process would continue with reviewing mail correspondence and phone calls, gather all available information that has been collected to that point, conduct interviews with the victim and the abuser, and gather further evidence. Evidence would include bedding, towels, clothes, and the SANE kit, if applicable. The Auditor reviewed the investigative files, the investigation reports outlined the evidence collected in each case. There were no forensic exams conducted during the audit period per the Major and medical staff.

Policy 03.06.00 Section 03.06.14 states, “When the quality of evidence appears to support criminal prosecution, SIU investigators shall only conduct compelled interviews after consulting with prosecutors on whether conducting such an interview may be an obstacle for subsequent criminal prosecution.” The

PREA Compliance Manager shared if the quality of evidence appears to support criminal prosecution, SIU Investigators shall consult with the Massachusetts State Police regarding conducting compelled interviews. The Investigator stated if the incident appears criminal in nature the Investigators will also meet with the Assistant District Attorney's office to present the case. The Investigator also stated an investigator would confer with the Assistant District Attorney before compelled interviews would be conducted. The Assistant District Attorney may come to the facility to work with the investigator on the case and may assign a state trooper to the case. The SIU investigator will have the inmate sign the Consent Agreement/ Refusal to Meet and Miranda Warning for Inmate Interview Form before conducting a compelled interview. The lead investigator will ensure that an alleged victim and/or perpetrator have been advised of their rights under federal and state laws. The Miranda rights shall also be read. The form lists the inmate interviewed, interviewer, and list the Miranda rights. The form is signed and dated by the inmate and the interviewer. There is a section to complete if the inmate refuses to meet with the agency investigator. If a prosecutable crime occurred, the case would be referred to the Assistant District Attorney for prosecution. A memo to file from the Major stated there were no PREA investigations conducted by SIU that were turned over to the Massachusetts State Police for criminal prosecution.

Policy 03.06.00 Section 03.06.14 states, "The credibility of an alleged victim, suspect(s) or witness(s) shall be determined individually during an initial PREA investigation and shall not be determined by the person's status as inmate, detainee, prisoner, employee, etc. Any inmate, detainee, or prisoner who alleges sexual abuse is not required to submit to a polygraph exam or other truth telling devices as a condition for proceeding with an investigation from such an allegation." The PREA Compliance Manager shared SIU investigators assess the credibility of alleged victims, suspects, and witnesses on an individual basis. This agency does not require inmates or detainees to submit to polygraph examination or other truth telling devices. The Investigator stated he judges the credibility of an individual on an individual basis and not judgmental. He treats everyone the same and follows the evidence. The inmate that reported sexual abuse stated she was not required to take a polygraph exam or other truth telling device. Upon review of the investigative files, there was no reference to polygraph exams.

Policy 03.06.00 Section 03.06.14 states, "Final PREA Investigative Report shall be submitted by investigators as a result of an initial or administrative PREA investigation. This report shall determine whether or not staff actions contributed to the allegation of sexual abuse or sexual harassment and/or if an employee failed to act. It shall also include a description of any physical and testimonial evidence, the reasoning behind credibility assessments and investigative facts and findings. A determination shall be made as to whether or not the allegations made are substantiated, unsubstantiated, or unfounded. If substantiated, disciplinary sanctions shall be rendered, and possible criminal prosecution sought. This final report should be submitted to the Major/Special Investigations in a timely, yet confidential, manner." The Investigator stated to determine if staff actions or failure to act contributed to the abuse, he reviews camera footage and conducts interviews with victims and witnesses. He said the PREA Review Committee will also assess during the committee meeting when reviewing the case. The Investigator has to complete a Sexual Assault Notification Form within 72 hours of the incident notification. The Sexual Assault Notification Form includes suspect information, victim information, type of allegation, suspect bunk history, victim bunk history, witness information, treatment and protection provided, investigative standing, and summary of the incident. Once the investigation is completed, the investigator will complete a final report, administrative or criminal. The Investigator stated the final investigation report will include the victim statement, abuser statement, camera footage reviewed, monitored phone calls, incident reports from staff, witness statements, and any evidence collected. The Auditor reviewed all the investigative files, the closed investigations had completed investigation reports, The investigation report format included a general narrative of the incident, video reviewed and the results of the video review, interviews, information from calls monitored, and the conclusion. The investigation reports were detailed, well written, and easy to follow the reasoning of the findings.

Policy 03.06.00 Section 03.06.14 states, "Criminal investigations conducted by an outside investigative agency should be documented with a final written report. Said reports should contain a thorough description of physical, testimonial, and documentary evidence gathered, as well as attached copies of documentary evidence, where feasible." The PREA Compliance Manager shared Massachusetts State Police conducts inmate sexual abuse criminal investigations, if necessary. These investigations shall be documented according to standard and agency policy. The Investigator stated the criminal investigation report follows the same format as the administrative report and further includes the criminal complaint, the criminal charge, and SANE kit and lab kits, if applicable. If criminal the Investigators will also meet with the Assistant District Attorney's office.

Policy 03.06.00 Section 03.06.15 Referrals to Outside Investigative Agencies/Criminal Investigations states, "When a substantiated allegation of sexual abuse or harassment appears to be criminal in nature, the case shall be referred to an outside investigative agency that has the legal authority to conduct a criminal investigation. Such referrals shall be documented. The outside agency shall then conduct an administrative or criminal investigation on the allegation of sexual abuse or sexual harassment. Regarding referrals to outside agencies, the following procedures shall apply: INMATE-ON-INMATE INVESTIGATIONS: At any point during an inmate-on-inmate PREA investigation, SIU investigators shall refer substantiated allegations of apparent criminal conduct to the Bristol County District Attorney's Office. The Special Investigations Unit shall typically make contact with this agency. The Sheriff and the Superintendent shall be notified before making such contact. STAFF-ON-INMATE INVESTIGATIONS: At any point during a staff-on-inmate PREA investigation, SIU Investigators shall refer substantiated allegations of apparent criminal conduct to the Bristol County District Attorney's Office. The Major/Special Investigations shall notify the Sheriff and the Superintendent before making such contact." The PREA Compliance Manager stated there have been no criminal investigations conducted by the Massachusetts State Police relative to this standard during the audit period.

Policy 03.06.00 Section 03.06.14 states, "All initial, administrative and final PREA investigation reports (administrative or criminal) shall be considered confidential materials and handled appropriately. Such reports shall be held at least as long as the alleged abuser is incarcerated or employed by the Sheriff's Office, plus 5 years and/or otherwise in accordance with MA state law." The PREA Compliance Manager shared investigative reports are maintained in accordance with the records retention schedule of the Commonwealth of Massachusetts. The Massachusetts Statewide Retention Schedule indicates that records are maintained for ten years. The agency maintains the investigative files and supporting documents per the record retention schedule.

Policy 03.06.00 Section 03.06.14 states, "The departure of an alleged abuser or victim from the employment or control of the Sheriff's Office shall not provide the basis for terminating a criminal or administrative PREA investigation. Such an investigation shall continue even when a perpetrator or victim has been transferred to another correctional system or released from custody." The Investigator stated all investigations are completed to a final outcome and it would follow the same investigative process if an inmate is transferred or release or if a staff member departs employment with the agency. The Investigator shared that one case during the audit period did not have a final outcome. The investigation was started and then the victim was released. The victim did not respond to Investigator's request for interviews. The Investigator attempted contact with the victim numerous times as documented in the investigative file. The case was closed with no outcome pending contact with the victim, there was not enough information/documentation to complete the investigation. The case was referred to the Assistant District Attorney's office.

Policy 03.06.00 Section 03.06.15 Referrals to Outside Investigative Agencies/Criminal Investigations states, "The Sheriff's Office shall cooperate with participating state or federal agencies whenever an independent PREA investigation is initiated. SIU Investigators shall endeavor to remain informed on the

status of these investigations with routine follow-up conversations and correspondence.” The PREA Compliance Manager shared if an outside agency investigates an allegation of sexual abuse for the Sheriff’s Office, the agency shall cooperate with outside investigators. SIU Investigators shall endeavor to remain informed about the progress of such an investigation with the outside agency. The Investigator stated the SIU investigator would work hand in hand with the Massachusetts State Police. The SIU investigators complete the initial interviews and the evidence collection, this information would be shared with the Massachusetts State Police. The Investigator also stated the Sheriff’s Office cooperates fully in the investigative process and remains informed about the progress of the investigation. The Investigator and the Superintendent indicated the Sheriff’s Office has a good working relationship with open communication with the Massachusetts State Police and the Assistant District Attorney’s Office.

There were eleven allegations reported during the audit period, ten within the facility and one report from another facility of an incident that occurred at Dartmouth. The ten allegations reported at the facility were one staff-on-inmate sexual abuse, six inmate-on-inmate sexual harassment, and three inmate-on-inmate sexual abuse. Eight cases had completed investigations, two cases were still open investigations, and one case was closed without an investigative outcome. The staff-on-inmate sexual assault was found unsubstantiated. Of the six inmate-on-inmate sexual harassment; two were substantiated, three were unsubstantiated, and one still open. One inmate-on-inmate sexual abuse cases was substantiated, and one was still open. The third inmate-on-inmate sexual abuse investigation had no outcome. The investigation was started and then the victim was released. The victim did not respond to Investigator’s request for interviews. The case was closed pending contact with the victim. The case was referred to the Assistant District Attorney’s office. The incident reported by another agency was an inmate-on-inmate sexual abuse. The case had previously been investigated and determined unsubstantiated. There were no cases that warranted prosecution. The Auditor reviewed the eleven administrative investigation files and found investigations were started immediately and the closed cases were completed timely with a final report.

The Auditor determined the facility exceeds this standard through the partnership with Massachusetts State Police and the Assistant District Attorney’s Office which is demonstrated in the investigation process and the open communication. The investigation reports were very detailed, well written, and easy to follow the reasoning of the findings. The timeliness of the investigation reports with the initial report completed within 72 hours and the closed cases completed with a detailed, well written final report. And the investigation files are maintained for ten years beyond the five-year requirement of the standard.

Standard 115.72: Evidentiary standard for administrative investigations

115.72 (a)

- 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 ☐ No

Auditor Overall Compliance Determination

☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)

- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

The agency Policy 03.06.00 Section 03.06.14 Investigations and Evidence Protocols states, "No standard higher than a preponderance of the evidence shall be imposed in determining whether an allegation of inmate sexual abuse or sexual harassment is substantiated." The Investigator stated the standard of proof to substantiate an administrative investigation is 51%, a preponderance. This is also documented through the Investigation Training lesson plan. The Investigator's interview and review of the investigation reports confirm compliance with the policy and standard.

Standard 115.73: Reporting to inmates

115.73 (a)

- 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 ☐ No

115.73 (b)

- If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.) ☐ Yes ☐ No ☒ NA

115.73 (c)

- Following an inmate's allegation that a staff member has committed sexual abuse against the offender, unless the agency has determined that the allegation is unfounded, or unless the offender has been released from custody, does the agency subsequently inform the offender whenever: The staff member is no longer posted within the inmate's unit? ☒ Yes ☐ No
- Following an inmate's allegation that a staff member has committed sexual abuse against the offender, unless the agency has determined that the allegation is unfounded, or unless the offender has been released from custody, does the agency subsequently inform the offender whenever: The staff member is no longer employed at the facility? ☒ Yes ☐ No
- Following an inmate's allegation that a staff member has committed sexual abuse against the offender, unless the agency has determined that the allegation is unfounded, or unless the offender has been released from custody, does the agency subsequently inform the offender whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility? ☒ Yes ☐ No

- Following an inmate's allegation that a staff member has committed sexual abuse against the offender, unless the agency has determined that the allegation is unfounded, or unless the offender has been released from custody, does the agency subsequently inform the offender whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility? ☒ Yes ☐ No

115.73 (d)

- 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 ☐ No
- 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 ☐ No

115.73 (e)

- Does the agency document all such notifications or attempted notifications? ☒ Yes ☐ No

115.73 (f)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Policy 03.06.00 Section 03.06.16 Reporting to Victims states, "Following an investigation into an allegation that an inmate or detainee suffered sexual abuse at a Bristol County correctional facility, the alleged victim shall be notified by staff as to whether the allegations have been determined to be substantiated, unsubstantiated, or unfounded. Such notifications shall be documented. If the Sheriff's Office did not conduct this investigation, it shall request the relevant information from the investigative agency in order to inform the inmate or detainee." The Superintendent stated the investigator or the PREA Coordinator meets with the inmate to notify them of the outcome of the investigation. The Investigator stated the PREA Coordinator completes the notification process with the inmate. The agency utilizes the Inmate Notification Form to inform the inmate in writing of the outcome of the investigation. The form states, "An investigation has been conducted into your allegation that you suffered sexual abuse, and the result is" and then the outcome is checked as substantiated, unsubstantiated, or unfounded. The form then instructs the inmate if they have any questions to correspond with the PREA Coordinator's office. The inmate that reported sexual abuse stated she received notification by mail of the outcome of the

investigation which was substantiated. She was released prior to the completion of the investigation. Of the eight investigations completed, inmates were informed of the outcome in five cases as documented through the investigation files. The Auditor could not verify the inmates received the notifications since the form does not capture the inmate's signature or any other method to ensure the inmate received the notification. The PREA Compliance Manager shared when applicable, the Sheriff's Office would request information from an outside investigative agency so that inmates would be informed on the final determination of their case. No investigations were conducted by outside agencies during the audit period.

Recommendation: The Inmate Notification Form used to report the outcome of the investigation could be updated to include the inmate's signature. This ensures the inmate received the outcome information. Also, the form could define the three outcomes for the inmate's understanding.

Action Taken: The agency updated the Inmate Notification Form to capture the inmate's signature and date when they are informed of the investigation outcome. They stated the new form was initiated in November 2021. The agency provided three examples of the new form being utilized.

Policy 03.06.00 Section 03.06.16 states, "Following an allegation that an employee committed sexual abuse, the following shall be provided to the involved inmate or detainee - except when it has been determined that the allegation has been considered unfounded: that the employee is no longer posted within the inmate or detainee's housing unit; that the employee is no longer employed by the Sheriff's Office; that the Sheriff's Office has learned that the employee has been indicted of a charge related to sexual abuse within a correctional facility; and that the Sheriff's Office has learned that the employee has been convicted on a charge related to sexual abuse within the facility. Following an inmate or detainee's allegation that they have been sexually abused by another inmate or detainee, the Sheriff's Office shall subsequently inform the alleged victim whenever it learns that the alleged abuser has been indicted and/or convicted on a charge related to sexual abuse within the facility." The policy also states, "All such notifications or attempted notifications shall be documented." Another form called the Inmate Notification informs the inmate "Based upon the findings rendered under PREA investigation # , I am informing you of the following; the staff member in your complaint is no longer posted within your unit, the staff member in your complaint is no longer employed at the facility, the staff member in your complaint has been indicted on a charge related to sexual abuse within the facility; the staff member in your complaint has been convicted on a charge related to sexual abuse within the facility. Please be advised that notifications on this matter will cease upon your release from custody. If you have any questions or concerns, please feel free to correspond with my office." The notification is provided through the PREA Coordinator. Another version of the Inmate Notification Form informs the inmate "An investigation has been conducted into your allegation that you suffered sexual abuse, and the result is: the inmate in your complaint has been indicted on a charge related to sexual abuse within the facility; and the inmate in your complaint has been convicted on a charge related to sexual abuse within the facility." In both form versions, the PREA Coordinator will check the appropriate response. The inmate that reported sexual abuse stated she was informed the inmate predator was being charged and she had to go to the grand jury.

The agency meets substantial compliance based on five out of eight cases had inmates' notifications completed.

DISCIPLINE

Standard 115.76: Disciplinary sanctions for staff

115.76 (a)

- Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies? ☒ Yes ☐ No

115.76 (b)

- Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse? ☒ Yes ☐ No

115.76 (c)

- 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 ☐ No

115.76 (d)

- 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 ☐ No
- 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 ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

The agency's Policy 03.06.00 Section 03.06.17 Disciplinary Sanctions states, "Employees shall be subject to disciplinary sanctions, up to and including termination, for violating the Sheriff's Office's sexual abuse or sexual harassment policies and applicable state/federal laws. The presumptive disciplinary sanction for an employee who has engaged in sexual abuse is termination from service and possible criminal prosecution. Unless the activity was clearly not criminal, such a termination shall be reported to appropriate law enforcement agencies and to any relevant licensing bodies. Discipline for employees who violate policy relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) shall be commensurate with the nature and circumstances of the acts committed, the employee's disciplinary history, and the sanctions imposed for comparable staff offenses with similar histories." The

PREA Compliance Manager shared the agency shall discipline an employee for violating policy, up to and including termination. No employee has been disciplined or terminated for violating policies on inmate sexual abuse or sexual harassment during the audit period. Employee discipline is documented on the Employee Disciplinary Report which lists the nature of the incident, facts of the incident, witnesses, employee comments, action to be taken, timetable for improvement, consequences of failure to improve, signature of the supervisor, signature of the employee, and a list of last offense and other offenses. Actions to be taken and the consequences of failure to report both have termination as a sanction. The agency had no employees disciplined or terminated for PREA violations during the audit period.

Policy 03.06.00 Section 03.06.17 states, "Appropriate law enforcement agencies and relevant licensing bodies shall be notified when an employee has been terminated for violating policy relative to sexual abuse or sexual harassment or when such an employee resigns prior to termination — unless the activity was clearly not criminal in nature."

There was one staff-on-inmate sexual abuse allegation reported during the audit period, the investigation outcome was unsubstantiated.

Standard 115.77: Corrective action for contractors and volunteers

115.77 (a)

- Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates? ☒ Yes ☐ No
- Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)? ☒ Yes ☐ No
- Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies? ☒ Yes ☐ No

115.77 (b)

- In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

The agency's Policy 03.06.00 Section 03.06.17 Discipline Sanctions states, "Any contractor, intern, or volunteer who engages in sexual abuse shall be prohibited from further contact with inmates, detainees, or prisoners. They shall be reported to law enforcement agencies and relevant licensing bodies, unless the activity was clearly not criminal. In the case of any other violations of sexual abuse or sexual harassment policies by a contractor, intern, or volunteer, the Sheriff's Office shall take appropriate remedial measures and shall consider whether to prohibit their further contact with inmates, detainees, or prisoners. The Superintendent stated that if a violation of agency sexual abuse or sexual harassment occurred by a contractor or volunteer, an investigation would be initiated and the volunteer and/or contractor would be restricted from the facility during the investigation. If the investigation is substantiated, the volunteer/contractor would be permanently banned from the facility. The agency would also contact the vendor to inform them of the incident and investigation outcome. If the incident was criminal in nature, the case would be referred for prosecution. During the audit period, there were no contractors or volunteers suspended or reported to law enforcement for engaging in sexual abuse of inmates per the PAQ, the Superintendent and the PREA Compliance Manager. The Auditor's review of the investigation files showed no allegations were made against a contractor or volunteer.

Standard 115.78: Disciplinary sanctions for inmates

115.78 (a)

- 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 ☐ No

115.78 (b)

- Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories? ☒ Yes ☐ No

115.78 (c)

- 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 ☐ No

115.78 (d)

- 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 ☐ No

115.78 (e)

- 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 ☐ No

115.78 (f)

- 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 ☐ No

115.78 (g)

- 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 ☐ No ☐ NA

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

The agency's Policy 03.06.00 Section 03.06.17 and Policy 17.01.00 Inmate Discipline state, "Inmates and detainees shall be disciplined following an administrative finding that they engaged in inmate-on-inmate sexual abuse or following a guilty criminal finding for inmate-on-inmate sexual abuse. Disciplinary sanctions shall be commensurate with the nature and circumstances of the committed abuse or harassment, the disciplinary history of the inmate or detainee, and the sanctions imposed for comparable offenses by those with similar histories." The Superintendent stated an inmate that violated agency's rules would go through the disciplinary process for sanctions and based on the incident criminal charges may be filed. He also stated the agency has a Disciplinary Board and the disciplinary process utilizes a disciplinary grid to maintain consistency in the process. Sexual assault on a staff member, another inmate, or visitor and engaging in sexual acts, including indecent exposure, or subjecting another person to sexually harassing conduct, through physical action, and/or verbal or written statements, and the other person does not express or imply consent to the accused inmate's conduct is classified as a Major Offense. Under Minor Offenses is acts of sexually suggestive conduct, use of obscene, insolent, abusive or threatening language, actions or gestures to any staff, staff member, or visitor; and possession of any photographic, hand drawn material and/or unauthorized publication that depicts sexually explicit acts, and/or nudity.

Policy 03.06.00 Section 03.06.17 states, "When determining what type of sanction, if any, should be imposed, the disciplinary process shall consider whether the mental illness or disabilities of an inmate or detainee contributed to their behavior." The Superintendent stated an inmate's mental disability or mental illness is considered through the disciplinary process. Mental health practitioners work with the Disciplinary Board to make determinations on the inmate and have input into the sanctions. The PREA Compliance Manager stated per policy, when an inmate's disabilities or mental illness is suspected to contribute to their behavior, the mental health vendor shall be contacted to determine if the inmate is competent. The Major/Discipline Officer stated that he has not needed to consult with mental health

practitioners regarding an inmate's mental illness or disability prior to issuing a disciplinary sanction during the audit period. If he needed to consult with mental health, the matter would be discussed during scheduled Restricted Housing Review Meetings, which are attended by disciplinary staff and mental health professionals.

Policy 03.06.00 Section 03.06.17 states, "If specific therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations is offered for cases of sexual abuse, this fact shall be considered while imposing disciplinary sanctions. An offender may be asked or ordered to participate in such a program as part of their disciplinary sanction. Inmates or detainees with severe mental illness shall not be punished with prolonged isolation/disciplinary segregation which would limit their access to mental health services or impose conditions otherwise inconsistent with their mental health needs." The Auditor interviewed five healthcare staff. The staff indicated that an inmate would be referred to mental health for services. Mental health offers mental health services to victims and predators. The mental health staff stated they check with a predator and offer services after a PREA incident. The services are voluntary for the inmate and no services are mandatory. Mental health notes demonstrated that mental health saw inmates after PREA incidents. The mental health notes from a meeting with an alleged predator stated the inmate denied the allegation and refused services.

Policy 03.06.00 Section 03.06.17 states, "An inmate or detainee shall be disciplined for engaging in sexual contact with an employee, whether such contact was consensual or not." The Auditor informed the agency during the pre-audit documentation review the policy was non-compliant with the standard. The PREA Compliance Manager shared there have been no incidents at the Dartmouth complex of inmates or detainees having sexual contact with an employee during the audit period.

Did Not Meet: The facility's policy (and practice) is non-compliant with the standard. Per the standard, an inmate should only be disciplined for sexual contact only upon a finding that the staff member did not consent. The agency policy must be updated to address the standard language.

Corrective Action Taken: The agency updated policy 03.06.00 Prevention of Inmate Sexual Abuse and Sexual Harassment, Section 03.06.09 Limits to Cross Gender Viewing and Search Procedures. The new language states, "'An inmate or detainee may be disciplined for sexual contact with staff, but only upon a finding that the staff member did not consent to such contact.'" The updated policy provided to demonstrate compliance addresses the policy requirement of the standard. Staff were provided training on the new policy through in-service training and policy updates. Substantial compliance has been met.

Policy 03.06.00 Section 03.06.17 states, "Any inmate or detainee who reports in good faith an allegation of sexual abuse or sexual harassment when based on a reasonable belief that such an incident occurred shall not be disciplined for lying or false reporting, even when an investigation does not establish enough sufficient evidence to substantiate the allegation." The PREA Compliance Manager shared inmates and detainees would not be disciplined for reporting an allegation of sexual abuse made in good faith. There were no disciplinary actions against inmates for sexual contact with staff. There were no incidents of inmate on staff sexual contact during the audit period.

Policy 03.06.00 Section 03.06.17 states, "All sexual activity between inmates and/or detainees is prohibited and will be disciplined accordingly. Such action, however, may not constitute sexual abuse when determined that the activity was not coerced." The Inmate Handbook informs inmates that all forms of sexual activity in a Bristol County correctional facility are prohibited. The PREA poster also informs the inmates that "acts of sexually abusive behavior, contact, intimacy or harassment between an inmate and another person are strictly prohibited. There shall be no consensual status."

MEDICAL AND MENTAL CARE

Standard 115.81: Medical and mental health screenings; history of sexual abuse

115.81 (a)

- 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 ☐ No ☒ NA

115.81 (b)

- If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, 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 ☐ No ☒ NA

115.81 (c)

- 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? ☒ Yes ☐ No

115.81 (d)

- 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 ☐ No

115.81 (e)

- 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 ☐ No

Auditor Overall Compliance Determination

☒ **Exceeds Standard** (*Substantially exceeds requirement of standards*)

☐ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ **Does Not Meet Standard** (*Requires Corrective Action*)

The agency's Policy 03.06.00 Section 03.06.06 states, "If an Initial PREA Risk Assessment Screening indicates that a sentenced inmate or pre-trial/ICE detainee has experienced prior sexual victimization inside another correctional facility or within the community, the Contracted Medical Provider shall be notified. A follow-up meeting with a medical or mental health care practitioner shall then be offered within 14 days of their intake screening. If an Initial PREA Risk Assessment Screening indicates that a sentenced inmate or pre-trial/ICE detainee has previously perpetrated sexual abuse in an institutional setting or within the community, the Contracted Medical Provider shall be notified. A follow-up meeting with a medical or mental health care practitioner shall then be offered within 14 days of their intake screening." Policy CPS J-B-05 Correctional Psychiatric Services – Response to Sexual Abuse states, "Inmates and detainees who have been identified as being victims of sexual abuse in an institutional or community setting are offered a meeting with a qualified health care professional within 14 days of admission. Inmates and detainees who have been identified as being perpetrators of sexual abuse in an institutional or community setting are offered a meeting with a mental health clinician within 14 days of admission." If the inmate answers affirmative to questions 1, 2, 3, or 4, on the risk screening an automatic referral to mental health is made (have you previously experienced sexual victimization; are you or have you ever been a victim of a sexual assault or rape while incarcerated; have you ever been placed in protective custody for sexual acts against you while incarcerated; are you currently under psychiatric care, a patient of the DMH or the DMR). If the inmate answers affirmative to questions 1 or 2 in the Vulnerability Identifiers and Predatory Identifiers, an automatic referral to mental health is made (is the inmate a predator or have a history of predatory sexual behavior while incarcerated; have you ever touched someone sexually, against their will, or forced anyone into sexual activity). The Classification Counselors stated that inmates that have experienced prior sexual victimization or previously perpetrated sexual abuse are referred to mental health for a follow-up through an email also the new OMS sends a notification. They stated mental health staff see the inmate usually within twenty-four hours or sooner based on the circumstances. When the Mental Health Director or designee comes in in the morning, they check to see what inmates disclosed prior victimization or abusiveness the previous day through an alert queued in the computer and the system tags the inmate to be placed on the schedule for at least one appointment. If an inmate is not on the mental health line, the inmate is added to the line with a note as to why they are being seen. The electronic record will track the inmate and an alert is sent to ensure the inmate is seen within 14 days. If deemed as an emergency or a serious nature, the inmate is seen immediately by medical and mental health. All other follow-ups from referrals will be seen by medical and mental health within fourteen (14) days. The mental health staff stated they see the inmate usually the next day and is always completed within two weeks

The Auditor interviewed five inmates that disclosed prior sexual victimization during the risk screening, three inmates stated they were referred to mental health and two inmates stated staff did not offer them to see mental health. The three inmates that stated they saw mental health and indicated they saw the mental health staff member the next day. The Auditor reviewed the mental health files for the five inmates; of the three inmates that acknowledged a referral was seen by mental health and continues to see mental health every two weeks. The other two inmates declined any further services. The two inmates that stated a referral was not offered were seen by mental health and they declined services. All the follow-up mental health referrals were seen within the appropriate timeframe.

Policy 03.06.00 Section 03.06.19 Medical and Mental Health Screening states, "Any information related to sexual victimization or abusiveness occurring inside an institutional setting shall be strictly limited to medical and mental health care practitioners and employees with a legitimate "need to know", unless

otherwise required by federal, state or local law. Treatment plans and security management decisions, including housing, bed, work, education and programming assignments, shall be developed. The Contracted Medical Provider shall not communicate incidents of sexual assault occurring within a non-institutional setting to non-health care professionals without the victim's consent - unless otherwise required by mandatory state reporting requirements. (Mandated reporting is required to certain state agencies if a victim of abuse or neglect, which would include sexual assault, is a child (under age 18), a disabled person, or an elderly person (aged 60 or older).” Policy CPS J-B-05 Response to Sexual Abuse states, “Any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to CPS qualified health care professionals and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments. CPS qualified health care professionals 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. This provision of informed consent shall be explicitly documented in a progress note.” The medical and mental health practitioners are trained during the BCSO orientation and in-service training about confidential and the CPS Lesson Plan Training for Medical and Mental Health Staff also covers the requirement of confidential reporting. Policy CPS J-B-05 Response to Sexual Abuse also states, “CPS qualified health care professionals 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. The Superintendent stated the agency does not house juvenile/youthful offenders. The PREA Compliance Manager and PREA Coordinator shared the agency has not held a juvenile or a vulnerable adult at the Dartmouth Correctional Complex or Ash Street Jail within the audit period.

Recommendation: The agency should create a process to ensure that all inmates that disclose prior sexual victimization are referred to mental health for follow-up meeting.

Action Taken: The agency created a spreadsheet to monitor compliance with the standard and verify that inmates who disclose prior victimization are referred to a mental health practitioner for follow-up within 14 days. The Mental Health Referral Tracking Sheet captures the inmate’s name, date of commitment, housing unit, potential known victim, prior history of victimization, potential know predator, and the mental health review date.

The facility exceeds the standard by referring inmates that disclosed prior sexual victimization and/or previously perpetrated sexual abuse to mental health services for a follow-up meeting and services, if warranted. This is not a requirement for jails to refer inmates that previously perpetrated sexual abuse to mental health and the facility exceeds by performing these standard protocols.

Standard 115.82: Access to emergency medical and mental health services

115.82 (a)

- 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 ☐ No

115.82 (b)

- If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62? ☒ Yes ☐ No
- Do security staff first responders immediately notify the appropriate medical and mental health practitioners? ☒ Yes ☐ No

115.82 (c)

- 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 ☐ No

115.82 (d)

- 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 ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

The agency's Policy 03.06.00 Section 03.06.20 Access to Emergency Medical and Mental Health Services states, "Alleged victims and perpetrators shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services following an allegation of sexual abuse. The nature and scope of these services shall be determined by medical and mental health practitioners, according to their professional judgment. Medical assessments and treatments shall be documented accordingly." The Policy CPS J-F-06 states, "CPS qualified staff provide inmate and detainee victims of sexual abuse with follow-up medical and mental health care as clinically indicated." The policy also states, "When a CPS qualified health care professional is informed that an inmate or detainee may have been the victim or perpetrator of sexual abuse, s/he shall also take these actions: assess and treat the involved inmates for any acute medical needs. All medical assessments shall be documented; crisis intervention services shall be provided, as necessary; assess the effects of trauma and determining the inmate's or detainee's risk for suicide and self-harm; refer the involved inmates to a hospital in the community, if clinically indicated, for further assessment and treatment of acute medical problems; and order that the victim be transported to a hospital in the community for the collection of forensic evidence and specialized sexual assault services if so ordered by the BCSO. This hospital shall be able to obtain the services of a Massachusetts Sexual Assault Nurse Examiner (SANE) and of a rape crisis program designated by the Massachusetts Executive Office of Health and Human Services." Upon an allegation of sexual abuse, the Watch Commander begins the notifications which include medical and mental health services. The inmates from an incident are taken to medical for medical assessment and any emergency treatment.

The interviews with medical staff confirmed that victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services. Emergency medical attention is provided through the facility's medical department. Health care services are provided seven days a week, twenty-four hours a day. If after normal business hours, the physician on call will be notified. If further services are needed or a forensic exam, the inmate is transported to the local hospital. The healthcare staff stated medical services are provided as soon as the sexual abuse incident is reported, and the inmate is brought to medical. This usually occurs within five to ten minutes. The inmate's care becomes priority with the medical department. The inmate is assessed for injuries and if penetration occurred the inmate is sent out to a local hospital for a forensic exam and emergency medical care. The healthcare staff stated the scope of medical and mental health services is determined based on their professional judgement, policy and procedures, protocols, and doctors' orders. The inmate that reported sexual abuse stated she was taken to medical as soon as she reported the sexual abuse. She further stated she did not need any follow-up services.

Policy 03.06.00 Section 03.06.20 states, "When appropriate, qualified medical or mental health practitioners shall offer alleged victims and perpetrators timely information about sexually transmitted infections (STI) prophylaxis, in accordance with professionally accepted standards of care. The STI prophylaxis recommended by the MA Department of Public Health and the Center for Disease Control should inform treatment decisions. An infectious disease consult may also be made for HIV assessment and treatment, as clinically indicated. Female inmates or detainees who are victims of sexual abuse shall receive timely access to emergency contraception. They shall be offered pregnancy tests if they are victims of sexually abusive vaginal penetration. Should pregnancy result from an act of sexual abuse, the victim shall receive timely information and access to pregnancy related services provided. The Superintendent, the ADS/Family Programs, the ADS/Medical Services and other officials shall be notified whenever a female inmate or detainee is determined to be pregnant." The medical staff stated the inmate will be offered testing for sexually transmitted diseases and pregnancy at the hospital. The hospital would start the initial treatment of sexually transmitted infection prophylaxis. Once the inmate is returned to the facility, the medical staff will review the orders and would follow the hospital aftercare plan. The plan would be reviewed and approved by the physician. The staff stated the inmate can decline any treatment. The PREA Coordinator and the Health Services Administrator stated there were no instances where an inmate was sent to a hospital for emergency medical or mental health treatment following an allegation of sexual abuse during the audit period. The inmate that reported sexual abuse stated the incident did not require a forensic exam, pregnancy testing, or sexually transmitted infection prophylaxis.

The medical staff stated forensic examinations conducted by SANE/SAFE staff and emergency medical care are provided at the local hospital with no cost to the inmate. The Massachusetts Department of Public Health has Memorandum of Understandings (MOU) with the Charlton Memorial Hospital and St. Luke's of New Bedford for the Sexual Assault Nurse Examiner Program. The MOUs establish the terms and conditions for the planning, implementation, operation, and evaluation of the Sexual Assault Nurse Examiner (SANE) Program to provide sexual assault care to patients seeking sexual assault services through the emergency department. A letter from the Southcoast Health System confirms the Bristol County Sheriff's Office is covered by the MOUs and that "Southcoast Hospitals Group, Inc., dba Charlton Memorial Hospital, St. Luke's Hospital and Tobey Hospital provides both outpatient emergency and inpatient emergency services to inmates housed at the Bristol County House of Corrections at the Dartmouth and New Bedford, Massachusetts locations." An interview was conducted with a representative of the St. Luke's Hospital of New Bedford regarding the Sexual Abuse Nurse Examiner (SANE) services provided at the hospital. The SANE nurse interviewed stated the hospital has SANEs working on shift within the emergency department and indicated all emergency room nurses are a trained SANE/SAFE. The statewide SANE Program is also available if a nurse is not available on duty or on-call. A state SANE staff is available within 3-4 hours and is dedicated only to that victim. The PREA

Compliance Manager shared the contracted medical provider for the agency does not conduct SANE exams on property and the agency has contracts with local hospitals to conduct SANE exams, as necessary. There have been no allegations at the Dartmouth Complex or Ash Street Jail where a forensic exam was conducted by a SANE or SAFE within the audit period. From the Auditor's review of the investigative files, there was no allegation that required a forensic examination during the audit period.

Policy 03.06.00 Section 03.06.20 states, "Sentenced inmates and pre-trial/ICE detainees shall be provided free treatment services under all circumstances, regardless of whether they name the abuser or cooperates with any investigation arising out of the incident." Policy CPS J-F-06 states, "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." The inmate that reported sexual abuse stated there was no required payment for the medical and mental health services she received. The medical staff stated all alleged victims of sexual assault who require a forensic exam will be taken to the nearest hospital emergency department for completion of the exam and emergency medical healthcare with no cost to the inmate.

Standard 115.83: Ongoing medical and mental health care for sexual abuse victims and abusers

115.83 (a)

- 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 ☐ No

115.83 (b)

- Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody? ☒ Yes ☐ No

115.83 (c)

- Does the facility provide such victims with medical and mental health services consistent with the community level of care? ☒ Yes ☐ No

115.83 (d)

- Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if all-male facility.) ☒ Yes ☐ No ☐ NA

115.83 (e)

- If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if all-male facility.) ☒ Yes ☐ No ☐ NA

115.83 (f)

- Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate? ☒ Yes ☐ No

115.83 (g)

- 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 ☐ No

115.83 (h)

- 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 ☐ No ☐ NA

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

The agency's Policy 03.06.00 Section 03.06.20 Access to Emergency Medical and Mental Health Services states, "Inmates and detainees who have been victimized by sexual abuse shall be offered ongoing medical evaluations and, as appropriate, treatment by the Contracted Medical Provider. Perpetrators shall also receive such ongoing evaluations and treatment, as appropriate. Inmates and detainees shall receive, as appropriate, evaluation and treatment, including follow-up services, treatment plans and, when necessary, referrals for continues care following their transfer to, or placement in, other facilities or their release from custody." Policy CPS J-F-06 states, "CPS shall offer medical and mental health evaluation and as clinically indicated, treatment to all inmates and detainees who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility." The PREA Compliance Manager shared per policy, any inmate or detainee involved in a PREA related incident would receive a medical/mental health evaluation and treatment by health care practitioners. The medical staff stated the medical assessment would include a head-to-toe evaluation, take vital signs, would response to any trauma or bleeding before transport to the local hospital, note any bruises or marks, and based on the type of assault would determine the treatment required. The mental health staff stated a comprehensive mental health evaluation would be completed to access the mental health status to look for acute injuries, bruises, marks, and if the inmate was having suicidal thoughts. The staff said it is important to validate the victim's feelings and provide support through the medical exam process. The inmate that reported sexual abuse stated she was seen by medical the day of the reported allegation. The review of the medical file confirmed the inmate was seen by medical after the reported allegation.

Policy 03.06.00 Section 03.06.20 states, "The Contracted Medical Provider shall provide all inmate and detainee victims of sexual abuse with medical and mental health services consistent with the community level of care." Policy CPS J-F-06 states, "CPS shall provide such victims with medical and mental health services consistent with the community level of care. All or some of the mental health services may be provided by the BCSO through a vendor contracted to provide these services. This vendor may not be CPS. The Healthcare staff interviewed stated they felt the medical and mental health services offered were beyond the community level of care. The inmate has more access to services, no insurance or pre-approval required for services, timeliness of services, and the availability of follow-up services.

Policy 03.06.00 Section 03.06.20 states, "When appropriate, qualified medical or mental health practitioners shall offer alleged victims and perpetrators timely information about sexually transmitted infections (STI) prophylaxis, in accordance with professionally accepted standards of care. The STI prophylaxis recommended by the MA Department of Public Health and the Center for Disease Control should inform treatment decisions. An infectious disease consult may also be made for HIV assessment and treatment, as clinically indicated. Female inmates or detainees who are victims of sexual abuse shall receive timely access to emergency contraception. They shall be offered pregnancy tests if they are victims of sexually abusive vaginal penetration. Should pregnancy result from an act of sexual abuse, the victim shall receive timely information and access to pregnancy related services provided. The Superintendent, the ADS/Family Programs, the ADS/Medical Services and other officials shall be notified whenever a female inmate or detainee is determined to be pregnant." The medical staff stated the inmate will be offered testing for sexually transmitted diseases and pregnancy at the hospital. The hospital would start the initial treatment of sexually transmitted infection prophylaxis. Once the inmate is returned to the facility, the medical staff will review the orders and would follow the hospital aftercare plan. The plan would be reviewed and approved by the physician. The medical staff stated the medical department provides a female inmate with information and access to all lawful pregnancy related services. The inmate would also be referred to mental health for support if termination services are requested. The staff stated the inmate can decline any treatment. The PREA Coordinator and the Health Services Administrator stated there were no instances where an inmate was sent to a hospital for emergency medical or mental health treatment following an allegation of sexual abuse during the audit period. The inmate that reported sexual abuse stated the incident did not require a forensic exam, pregnancy testing, or sexually transmitted infection prophylaxis.

Policy 03.06.00 Section 03.06.20 states, "Sentenced inmates and pre-trial/ICE detainees shall be provided free treatment services under all circumstances, regardless of whether they name the abuser or cooperates with any investigation arising out of the incident." Policy CPS J-F-06 states, "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." The inmate that reported sexual abuse stated there was no required payment for the medical and mental health services she received. The medical staff stated all alleged victims of sexual assault who require a forensic exam will be taken to the nearest hospital emergency department for completion of the exam and emergency medical healthcare with no cost to the inmate.

Policy 03.06.00 Section 03.06.20 states, "Mental health evaluations of known perpetrators should be conducted within 14 days upon learning of such abuse history. Treatment shall be offered, when deemed appropriate, by mental health practitioners." Even though it is not required in a jail setting, the mental health staff indicated that a risk assessment and mental health evaluation of all known inmate-on-inmate perpetrators shall be attempted within sixty (60) days of learning of the abuse. Treatment shall be offered when deemed appropriate in accordance with policies. Mental health staff interviewed stated, in most cases, the inmate is seen immediately for an evaluation the day of the referral. Treatment will be offered based on the outcome of the mental health evaluation.

DATA COLLECTION AND REVIEW

Standard 115.86: Sexual abuse incident reviews

115.86 (a)

- 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 ☐ No

115.86 (b)

- Does such review ordinarily occur within 30 days of the conclusion of the investigation? ☒ Yes ☐ No

115.86 (c)

- Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners? ☒ Yes ☐ No

115.86 (d)

- 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 ☐ No
- 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 ☐ No
- 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 ☐ No
- Does the review team: Assess the adequacy of staffing levels in that area during different shifts? ☒ Yes ☐ No
- Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff? ☒ Yes ☐ No
- 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 ☐ No

115.86 (e)

- Does the facility implement the recommendations for improvement, or document its reasons for not doing so? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☒ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☐ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

The agency's Policy 03.06.00 Section 03.06.24 Reporting, Data Collection, and Review – Sexual Abuse Incidents states, "The Sheriff's Office shall conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded. Such reviews shall ordinarily occur within 30 days of the conclusion of the investigation. The review team shall include upper-level management officials, with input from correctional supervisors, investigators, and medical/mental health care practitioners." The agency had eight closed cases and incident reviews were completed on all cases. The incident reviews are completed by the PREA Incident Review Team which meets monthly to review all completed investigations as well as any pending cases. The Superintendent stated the PREA Committee meets monthly and completes monthly reviews of incidents. He also stated the PREA Committee meetings are chaired by the PREA Coordinator and other members of the committee are the Major, Colonel, Investigator, Classification, medical and mental health staff. Input from other staff will be provided as needed. The Investigator presents the investigative case and the outcome of the investigation to the Committee.

Policy 03.06.00 Section 03.06.24 states, "With each final report, the PREA Review Committee shall review whether a PREA incident has been substantiated, unsubstantiated or considered unfounded by PREA Investigators; consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect or respond to sexual abuse; consider whether the incident or allegation was motivated by race, ethnicity, gender identity, lesbian, gay, bisexual, transgender or intersex identification, status or perceived status; or gang affiliation, or was motivated or otherwise caused by other group dynamics at the facility; examine the area of the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse; assess the adequacy of staffing levels in that area during different shifts; assess whether monitoring technology should be deployed or augmented to supplement supervision by employees; and; prepare a report of its findings, including but not necessarily limited to determinations made pursuant to (a)-(e) of this section, and any recommendations for improvement and submit such report to the Superintendent and PREA Compliance Manager." The committee completes the PREA/Sexual Assault Notification Final Report Checklist that captures the victim(s) name, predator(s) name; allegation type (sexual abuse or sexual harassment); if sexual abuse, was it penetrative or non-penetrative; investigative outcome; and was the investigation report submitted to committee members. The Committee then answers the following questions: does the allegation or investigation indicate a need to change policy or practice to better prevent, detect, or respond to sexual abuse; was this incident motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility; assess whether physical barriers in the area where the incident took place may enable abuse; assess the adequacy of

staffing levels in that area during different shifts; and assess whether monitoring technology should be deployed or augmented to supplement supervision by staff.

The Incident Review Team members and the Superintendent interviewed identified all the elements that would be considered during the incident review. Under motivation they review the cause of the incident including the classification of the inmates, risk screening factors, gang issue, past predator, the charges of the inmates, past history, any identified relationships, racial, mental health, and gender identity. In reviewing the location of the incident, they consider the supervision sight lines, if isolated area, has blind spots, and any physical barriers. When assessing staffing, they review if staff are following rounds protocols, adequate staffing on the shift, if staff is following policies and procedures, staff placement on shift, and view staff interactions with inmates through camera footage. Under monitoring technology, the team reviews camera location, adequate mirrors, sufficient cameras, camera views, and whether cameras need to be adjusted. The team members interviewed stated that the only trend is that most incidents occur in the housing cells.

Policy 03.06.00 Section 03.06.24 states, "The Superintendent and others shall review recommendations for improvements made by the PREA Review Committee and shall implement them, as feasible, or shall document its reasons for not doing so." The incident review is documented through the PREA Review Committee meeting notes and the PREA/Sexual Assault Notification Final Report Checklist which is forwarded to the Superintendent for review of any improvement recommendations made by the PREA Review Committee. The PREA Coordinator stated it is his responsibility to follow-up with departments to ensure any recommendations are achieved when a recommendation is made by the PREA Committee or will document the reasons for not doing so. In this audit period, there were no recommendations from the incident reviews.

The Auditor reviewed the PREA Review Committee monthly meeting minutes and the PREA/Sexual Assault Notification Final Report forms for the closed cases reviewed. The agency exceeds the standard with the review of all cases and pending cases; meeting monthly; and also reviewing the status of inmates who are considered to be at high risk for sexual victimization monthly.

Standard 115.87: Data collection

115.87 (a)

- 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 ☐ No

115.87 (b)

- Does the agency aggregate the incident-based sexual abuse data at least annually?
☒ Yes ☐ No

115.87 (c)

- 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 ☐ No

115.87 (d)

- 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 ☐ No

115.87 (e)

- Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.) ☐ Yes ☐ No ☒ NA

115.87 (f)

- 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 ☐ No ☐ NA

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

The agency's Policy 03.06.00 Section 03.06.23 Reporting, Data Collection, and Review – Data Collection and Record Storage states, "The Sheriff's Office shall collect accurate, uniform data for every allegation of sexual abuse using a standardized instrument and set of definitions. The Sheriff's Office shall maintain, review, and collect data as needed from all available documents, including reports, investigative files, and PREA Committee Reviews. Reported sexual abuse allegations shall be documented in a timely and accurate manner using approved reporting materials, such as an Incident Report. Information may also be recorded in the Sheriff's Office computer system, as well as with other hard-copy documents. The Superintendent's Office shall be responsible for coordinating PREA statistics on a monthly and annual basis. This information shall be forwarded to appropriate employees with a legitimate "need to know" and shall be used for other reporting functions. Uniform data for every allegation of sexual abuse shall be aggregated at least annually. Data collected should 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 DOJ's Bureau of Justice Statistics. The data shall be collected from multiple sources, including investigative files, sexual abuse incident reports and other related documents." The facility's PREA Coordinator is responsible for maintaining the PREA statistics and the PREA Tracking Chart. The PREA Tracking Chart is a chronological listing of each sexual abuse, threat, or compliant that occurs in a month. The agency collects the uniform data using a standardized instrument, Data Collection/Standardized Instrument for Allegation of Sexual Abuse, and a data dictionary based on the most recent definitions provided by the Bureau of Justice Statistics. The agency aggregates the incident based sexual abuse data at least annually. The PREA Coordinator stated the monthly PREA statistics, investigation files, sexual abuse incident reports, vulnerability assessments, and monthly PREA Committee meeting minutes are reviewed

as part of the data collection. The PREA Coordinator creates the annual report. The Annual PREA Report 2020 is available for review on the agency's website. The Auditor also reviewed the Annual PREA Report 2019. The reports were reviewed as part of the audit process.

Policy 03.06.00 Section 03.06.23 states, "Upon request, the Sheriff's Office shall provide such data from the previous year to the Department of Justice no later than June 30 each year." The agency has submitted the Survey of Sexual Victimization for 2016 and 2019.

The agency does not contract with other agencies or private facilities for the confinement of inmates.

Standard 115.88: Data review for corrective action

115.88 (a)

- 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 ☐ No
- 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 ☐ No
- 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 ☐ No

115.88 (b)

- Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse? ☒ Yes ☐ No

115.88 (c)

- 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 ☐ No

115.88 (d)

- 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 ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

The agency's Policy 03.06.00 Section 03.06.23 Reporting, Data Collection, and Review – Data Review for Corrective Action states “The Sheriff's Office shall review data collected and aggregated pursuant to National PREA Standards in order to assess and improve the effectiveness of its sexual abuse prevention, detection and response policies, practices and training. This review shall include identifying problem areas, taking correcting action, as feasible. An annual Internal Assessment Report shall be approved by the Sheriff's Office. Such report shall include a comparison of the current year's data and corrective actions with those from prior years and shall provide an assessment of the agency's progress in addressing inmate sexual abuse. (The annual Survey of Sexual Violence Report to the DOJ may satisfy this requirement.) The annual Internal Assessment Report shall be approved by the Sheriff or Superintendent. It shall be made available to the public by the Sheriff's Office website. Specific material may be redacted from the reports when publication would present a clear and specific threat to the safety and security of the facility but must indicate the nature of the material redacted.” The Annual PREA Report is prepared by the PREA Coordinator and approved by the Sheriff's Office. The report includes a comparison of the current year's data and corrective actions with those from previous years and provide an assessment of the agency's actions in addressing inmate sexual abuse. The Superintendent stated information that is collected annually and information from the PREA committee is used to determine if policy updates are needed, is further training needed, and are there topics that need to be added to the PREA training. It was also shared the agency is constantly analyzing the system including what is contributing to situations, classification, risk screening, trends identified, staffing, and training needs. The agency collects over 250 data indicators daily through the Strategic Accountability Management System (SAMS). This data is reviewed monthly.

The PREA Coordinator creates the Annual PREA Report. The Superintendent stated the Annual PREA Report is first reviewed and approved by the PREA Committee. Then the Superintendent reviews the report and forwards the report to the Sheriff's for review and approval. The Annual PREA Reports for 2019 and 2020 were approved by the Sheriff as documented through his signature and date on each report (December 29, 2019, and November 30, 2020). Specific material may be redacted from the reports when publication would present a clear and specific threat to the safety of the facility. The PREA Coordinator stated the material that is redacted includes names and ID numbers of inmates and staff. The report will include the nature of any material redacted. The PREA Annual Report 2020 is available for review on the agency's website; www.bcsoma.us. The PREA Annual Report 2020 and PREA Annual Report 2019 were reviewed as part of the audit process.

Through interviews with the PREA Coordinator, PREA Compliance Manager, and the Superintendent and review of the facility's monthly reports and annual reports; it documents the data collection process.

Standard 115.89: Data storage, publication, and destruction

115.89 (a)

- Does the agency ensure that data collected pursuant to § 115.87 are securely retained?
☒ Yes ☐ No

115.89 (b)

- Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means? ☒ Yes ☐ No

115.89 (c)

- Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available? ☒ Yes ☐ No

115.89 (d)

- 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 ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

The agency's Policy 03.06.00 Section 03.06.23 Reporting, Data Collection, and Review – Data Storage, Publication and Destruction states, "Data collected pursuant to this section shall be securely retained in accordance with department policy and state law. Aggregated inmate sexual abuse data may be available to the public at least annually through the Sheriff's Office website. Before making aggregated data public, personal identifiers shall be removed. The Sheriff's Office shall maintain data collected pursuant to 03.06.22 C in accordance with state law, but for at least 10 years after the date of the initial collection." The PREA Compliance Manager shared the central location for all hardcopy PREA reports and records is the Superintendent's Office. The PREA Coordinator and SIU investigators maintain individual records and data on PREA as well. All locations are securely maintained. The PREA Coordinator indicated all the data files and final reports in his office are securely locked in file cabinets. Files maintained in the Superintendent's office are only accessible to the Superintendent and the Administrative Assistant.

The PREA Coordinator stated specific material may be redacted from the annual reports when publication would present a clear and specific threat to the safety of the facility. The information redacted includes names and ID numbers of inmates and staff. The report will include the nature of any material redacted. The PREA Annual Report 2020 is available for review on the agency's website; www.bcsoma.us. The PREA Annual Report 2020 and PREA Annual Report 2019 were reviewed as part of the audit process.

The PREA Compliance Manager shared PREA records, reports, and data are maintained in accordance with the records retention schedule of the Commonwealth of Massachusetts. The Massachusetts Statewide Retention Schedule indicates that records are maintained for ten years. The agency maintains the investigative files and supporting documents per the record retention schedule.

AUDITING AND CORRECTIVE ACTION

Standard 115.401: Frequency and scope of audits

115.401 (a)

- During the three-year period starting on August 20, 2013, and during each three-year period thereafter, 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? (N/A before August 20, 2016.)
☒ Yes ☐ No ☐ NA

115.401 (b)

- During each one-year period starting on August 20, 2013, 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? ☒ Yes ☐ No

115.401 (h)

- Did the auditor have access to, and the ability to observe, all areas of the audited facility?
☒ Yes ☐ No

115.401 (i)

- Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)? ☒ Yes ☐ No

115.401 (m)

- Was the auditor permitted to conduct private interviews with inmates, offenders, and detainees?
☒ Yes ☐ No

115.401 (n)

- 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 ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

The review of the agency's website confirms that a PREA audit was conducted on the agency's Dartmouth Correctional Complex in June 2018. This audit covered all the facilities of the complex: the Dartmouth House of Correction, Ash Street Jail, and the Women's Center. The report was posted for public information.

During the audit, the facility and agency provided the Auditor full access to all areas of each facility and the Auditor was able to observe facility's practices and processes. Prior to the audit, during the audit, and after the on-site audit, the agency and facility provided the Auditor requested documentation to demonstrate compliance. Private interview space was provided to the Auditor for conducting staff and inmate interviews. The inmate interviews were held in rooms that afforded privacy for the interviews; at Dartmouth the interviews were held in a housing unit office and at Ash Street they were held in general office off the program room. Staff interviews were held in offices within the housing units and the administrative conference room at Dartmouth and the program room at Ash Street, both locations afforded privacy for the staff interviews.

Audit Notices were posted throughout the facility advising staff and inmates they could send confidential information or correspondence to the Auditor. The Auditor did not receive any correspondence from staff, inmates, or outside individuals.

Based on the above information, the agency/facility meets the Standard 115.401 Frequency and scope of audit requirements.

Standard 115.403: Audit contents and findings

115.403 (f)

- The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports within 90 days of issuance by auditor. The review period is for prior audits completed during the past three years PRECEDING THIS AGENCY AUDIT. In the case of single facility agencies, the auditor shall ensure that the facility's last audit report was published. 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 that there has never been a Final Audit Report issued.) ☒ Yes ☐ No ☐ NA

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)

- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

A review of the agency's website www.bcsso-ma.us confirms that the agency publishes PREA final reports and makes them publicly available through the agency's website. The 2018 PREA Final Report was published on the agency's website under the Jail Information tab, then the PREA tab. The agency meets the requirements of this part of Standard 115.403 (f) Audit contents and findings.

AUDITOR CERTIFICATION

I certify that:

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

Barbara A. King

March 8, 2022

Auditor Signature

Date