D1.8.13  Offender Sexual Abuse and Harassment  Effective Date:  December 17, 2016

Signature on File

George A. Lombardi, Department Director

I. PURPOSE: This procedure establishes the department's zero tolerance for offender sexual abuse and harassment and establishes strategies and responses to reduce and prevent offender sexual abuse and harassment.

A. AUTHORITY: Sections 217.040 and 217.175 RSMo

B. APPLICABILITY: All department staff members, facilities, and programs under the department’s jurisdiction or contract.

C. SCOPE: Nothing in this procedure is intended to give a protected liberty interest to any offender. This procedure is intended to guide agency and staff member practices.

II. DEFINITIONS:

A. Adult Internal Risk Assessment: An instrument utilized to assess offenders during intake screening and upon transfer to another facility for their risk of being sexually abused by other offenders or sexually abusive towards other offenders.

B. Chief Administrative Officer (CAO): The highest ranking individual at the worksite and in accordance with the CAO reference document available in the department’s computer system. Exception: Staff members at the worksite who do not report to the worksite CAO will be accountable to the deputy or assistant division directors or central office section heads who are in their chain of command.

C. Community Confinement Facility: A community treatment center, halfway house, restitution center, (including residential reentry center), other than a juvenile facility, in which individuals reside as part of a term of imprisonment or as a condition of pre-trial release or post-release supervision while participating in gainful employment, employment search efforts, community service, vocational training, treatment, educational programs or similar facility-approved programs during non-residential hours.

D. Contractors: Non department staff members who work within a department facility in a permanent role (i.e. contracted medical and mental health, substance abuse, companies contracted to provide testing, etc.).

E. Coordinated Response: The department’s planned response to allegations of offender sexual abuse and harassment to ensure the appropriate actions of first responders, medical, mental health, investigators and administrators.

F. Department Computer System: The computer systems used by department staff members such as, but not limited to the Corrections Information Network (COIN), Missouri Corrections Integrated System (MOCIS), (OPII), Statewide Advantage for Missouri (SAMII), shared network drive, etc.

G. Direct Supervision: The offender is within sight of an assigned staff member at all times.
H. **Exigent Circumstances**: Any set of temporary unforeseen circumstances that require immediate action in order to combat a threat to the security or institutional order of a facility.

I. **Facility**: Any location that houses offenders supervised by the department of corrections to include institutions, community supervision centers, and community release centers.

J. **First Responder**: The first person arriving to the scene of an incident or the first person having contact with the alleged victim.

K. **Institutional Employer**: A facility or institution which is governmentally owned, operated, or managed by, or provides services on behalf of any political subdivision; and which is:

1. for persons who are mentally ill, disabled, or developmentally disabled, or chronically ill or handicapped,
2. a jail, prison, or other correctional facility,
3. a retrial detention facility,
4. for juveniles.

L. **Intersex Offender**: An offender whose sexual or reproductive anatomy or chromosomal pattern does not seem to fit typical definitions of male or female. Intersex medical conditions are sometimes referred to as disorders of sex development.

M. **Least Restrictive Housing**: Housing that affords victims of offender sexual abuse the most access to programming and privileges while ensuring the safety of the victim and the security of the institution.

N. **Limited English Proficiency**: Individuals who are unable to communicate, read or speak, effectively in English because their primary language is not English and they have not developed fluency in the English language.

O. **Offender Sexual Abuse**: Includes sexual abuse of an offender by another offender and sexual abuse of an offender by staff member.

1. **Offender on Offender Sexual Abuse**: Sexual abuse of one offender by another offender includes any of the following acts, if the victim does not consent, is coerced into such act by overt or implied threats of violence, or is unable to consent or refuse:

   a. Contact between the penis and the vulva or the penis and the anus, including penetration, however slight.

   b. Contact between the mouth and the penis, vulva, or anus.

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

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

2. **Staff Member on Offender Sexual Abuse**: Sexual abuse of an offender by a staff member, including any of the following acts, with or without consent of the offender:
a. Contact between the penis and the vulva or the penis and the anus, including penetration, however slight.

b. Contact between the mouth and the penis, vulva, or anus.

c. Contact between the mouth and any body part where the staff member has the intent to abuse, arouse, or gratify sexual desire.

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

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

f. Any attempt, threat, or request by a staff member to engage in the activities described in paragraphs (1) through (5) of this definition.

g. Any display by a staff member of his or her uncovered genitalia, buttocks, or breast in the presence of an offender.

h. Voyeurism by a staff member which is an invasion of privacy of an offender, for reasons unrelated to the staff members’ official duties, such as peering at an offender who is using a toilet in his cell to perform bodily functions; requiring an offender to expose his buttocks, genitals, or breasts; or taking images of all or part of an offender’s naked body or of an offender performing bodily functions.

P. **Offender Sexual Abuse Incident Debriefings:** A fact finding process used to determine information regarding a serious incident following an investigation.

Q. **Offender Sexual Harassment:**

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

2. Repeated verbal comments or gestures of a sexual nature to an offender, detainee, or resident by a staff member, contractor, or volunteer, including demeaning references to gender, sexually suggestive or derogatory comments about body or clothing, or obscene language or gestures.

R. **Prison Rape Elimination Act (PREA):** Federal law established to address the prevention, detection, response and monitoring of offender sexual abuse and harassment in prisons, jails, and community confinement facilities.

S. **PREA Coordinator:** A staff member responsible for the implementation and compliance of the PREA within the department.

T. **PREA Notification Checklist:** Checklists utilized by institutions and community confinement facilities in accordance with the coordinated response to offender sexual abuse and harassment to ensure appropriate notification and response to all allegations of offender sexual abuse and harassment.

U. **PREA Offender Management Team:** A facility team chaired by the PREA site coordinator tasked with addressing behavioral issues of offenders who make repeated false PREA allegations.
V. **PREA Site Coordinator:** A facility employee at the level of deputy warden or associate superintendent or higher; who is responsible for ensuring compliance of the PREA standards at his assigned facility.

W. **Preponderance of Evidence:** Enough proof to show that something is more likely to have occurred than not to have occurred.

X. **Prophylactic Treatment:** Preventive healthcare that consists of measures taken for disease prevention.

Y. **Qualified Mental Health Professional (QMHP):** Includes psychiatrists, psychiatric nurse practitioners, psychologists, licensed clinical social workers, licensed masters’ social worker, licensed professional counselors, provisionally licensed professional counselors and others who by the virtue of their education, credentials and experience are permitted by law to evaluate and care for the mental health needs of patients.

Z. **Rape and Abuse Crisis Center:** A community agency that provides intervention and related assistance to victims of sexual assault.

AA. **Retaliation:** Adverse action taken based upon a person's reporting and/or participating in an inquiry, investigation or proceedings involving charges of offender physical abuse, sexual abuse, discrimination, or harassment. This is applicable to both staff members and offenders.

BB. **Sexual Assault:** A sexual act that is coercive or assaultive in nature and where there is the use or threat of force.

CC. **Sexual Assault Exam:** An examination performed by a SANE/SAFE after a reported offender sexual abuse allegation which involved penetration of the mouth, anus, buttocks, or vulva, however slight, by hand, finger, object instrument, or penis that is alleged to have occurred within the last 120 hours.

DD. **Sexual Assault Forensic Examiner (SAFE):** Specifically trained health professionals who ensures victims of sexual assault are provided with competent, compassionate, and prompt care, while providing the most advanced technology associated with DNA and other sexual assault forensic evidence collection and preservation.

EE. **Sexual Assault Nurse Examiner (SANE):** Specifically trained nurse who ensures victims of sexual assault are provided with competent, compassionate and prompt care, while providing the most advanced technology associated with DNA and other sexual assault forensic evidence collection and preservation.

FF. **Site Advocacy Liaison:** Designated staff members at each institution responsible for coordination of advocacy services.

GG. **Staff Member:** Any person who is:

1. employed by the department on a classified or unclassified basis (permanent, temporary, part-time, hourly, per diem) and are paid by the State of Missouri’s payroll system;

2. contracted to perform services on a recurring basis within a department facility (i.e., medical services, mental health services, education services, vocational services, substance abuse services, etc.) pursuant to a contractual agreement and has been issued a permanent department identification card;

3. a volunteer in corrections;

---

1 All references in this procedure to the male gender are used for convenience only and shall be construed to include both female and male genders.
4. a student intern;

5. issued a permanent department identification card or special access in accordance with the department procedure regarding staff member identification.

HH. **Subjective Complaints, Objective Findings, Assessment, and Treatment Plan Format (SOAP Format):** This format is a charting or recording process, which reflects subjective complaints, objective findings, an assessment, and treatment plan.

II. **Substantiated:** An allegation that has been determined to have occurred.

JJ. **Transgender:** A person whose gender identity (i.e. internal sense of feeling male or female) is different from the person's assigned gender at birth.

KK. **Transgender Committee:** Each institution will have a transgender committee comprised of the health services administrator, medical director, institutional chief of mental health services and the deputy warden or PREA site coordinator. The deputy warden or PREA site coordinator will serve as the chair of the committee.

LL. **Unfounded:** An allegation that has been determined not to have occurred.

MM. **Unsubstantiated:** An allegation that, after an investigation or administrative inquiry, was investigated and the investigation produced insufficient evidence to make a final determination as to whether or not the event occurred.

NN. **Vending Contractor:** An individual approved to provide services to a department facility who will be accompanied by a department staff member at all times while providing services to that site.

OO. **Victim Advocate:** An individual with specialized training who provides direct services to male and female victims of sexual abuse.

PP. **Youthful Offender:** An offender under the age of 18 that has been adjudicated as an adult by the courts and sentenced to the department.

III. **PROCEDURES:**

A. **GENERAL INFORMATION**

1. All department staff members, contractors, or volunteers will not engage in abuse or sexual harassment of an offender which includes sexual contact with or without the offender’s consent.

2. The department has zero tolerance for all forms of offender sexual abuse, harassment, and retaliation.

3. Offender sexual abuse by a department staff member is a felony and could result in the requirement to register as a sex offender.

4. To ensure compliance with the Prison Rape Elimination Act (PREA), the department will employ a full-time PREA coordinator responsible for implementation and oversight of the department's efforts to prevent, detect, and respond to offender sexual abuse, harassment, and retaliation.

5. The department does not detain offenders solely for civil immigration purposes.
6. Each facility and community confinement facility will designate a PREA site coordinator who has sufficient time and authority to ensure the facility's compliance with the PREA standards at their assigned facility.
   a. The director of the division of adult institutions will designate a PREA site coordinator at each facility at the level of deputy warden.
   b. The director of the board of probation and parole will designate a PREA site coordinator at each facility at the level of unit supervisor or higher.

7. The CAO or designee will control the dissemination of sensitive information related to offender sexual abuse to ensure the offender is not exploited by staff members or other offenders.

8. Failure to report offender sexual abuse is a class A misdemeanor. All staff members, volunteers, and contractors will immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility and any knowledge of retaliation against offenders or staff members who reported such an incident and any staff member neglect or violation of responsibilities that may have contributed to an incident or retaliation in accordance with this procedure.
   a. Medical and mental health staff members will inform offenders at the initiation of services of the practitioner's duty to report in accordance with statutes.

9. Staff members are prohibited from revealing any information related to an allegation of offender sexual abuse or harassment other than to the extent necessary to make treatment, investigation, and other security and management decisions.

10. All residential contractors will adopt and comply with PREA standards as outlined in their contract with the department.
    a. The CAO or designee will regularly audit residential contractors to ensure compliance with the PREA standards.
    b. The department may enter into contracts with an entity that fails to comply with PREA standards only in emergency circumstances.
       (1) In such cases, the department will document its unsuccessful attempts to find an entity in compliance with the PREA standards.

11. The department will maintain staffing plans for each facility that provides adequate levels of staffing to protect offenders against sexual abuse. The staffing plan will consider the facility's physical plant to include but not limited to blind spots or areas where staff members or offenders may be isolated, the composition of the offender population, and the prevalence of substantiated and unsubstantiated offender sexual abuse allegations.

12. Each facility will comply with the staffing plan on a regular basis, deviations from the staffing plan will be documented and justification for deviations noted.

13. Each institution will ensure the classifications of lieutenant or above conduct and document unscheduled and unannounced rounds to identify and deter offender sexual abuse and sexual harassment.
    a. Each facility will ensure that rounds occur periodically in all areas of the facility.
b. Staff members will be prohibited from alerting other staff members that these rounds are occurring.

c. The rounds will be documented and readily accessible during audits as outlined in the facility's standard operating procedure.

B. HUMAN RESOURCES

1. Department staff members will not hire or promote any person, employee, or enlist the services of any contractor that may have contact with an offender when it is known that he:

   a. has engaged in sexual abuse with an offender in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution;

   b. has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, coercion, or if the victim did not consent or was unable to consent or refuse; or

   c. has been civilly or administratively adjudicated to have engaged in sexual activity by force, overt or implied threats of force, coercion, or if the victim did not consent or was unable to consent or refuse.

2. Department staff members will consider any incidents of sexual harassment in determining whether to hire or promote any person or enlist the services of any contractor who may have contact with offenders in accordance with the department's procedures regarding background investigations, promotional appointments, maintenance of employee records, employee discipline, and labor organizations.

3. Before hiring new employees the human resources staff members or designee will:

   a. perform a criminal background records check; and

   b. contact all prior institutional employers, when possible, for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse in accordance with the department procedure regarding background investigations.

4. PREA Training:

   a. All new staff members will complete the department's online sexual misconduct and harassment training within 5 days of employment.

   b. All staff members will receive initial PREA training during the department's basic training.

   c. All staff members will complete refresher training every two years to ensure knowledge of the agency's current sexual abuse and sexual harassment procedures.

   d. Years in which an employee is not required to complete training, the department's PREA coordinator will provide current information on sexual abuse and sexual harassment policies via the department's PREA intranet page http://docintranet.ads.state.mo.us/Division/OD/PREA.htm.

   e. Part-time employees, volunteers, contract staff members, vendors:

      (1) All part-time employees, volunteers, and contract staff members will receive PREA training specific to their classification as determined by the appropriate division director and chief of staff training.
(2) Vending contractors will be escorted by a staff member at all times or will receive PREA training prior to entering the facility.

(3) Contracted residential facilities will ensure all staff members are trained on PREA as outlined in the residential contract.

(4) Work release supervisors will receive specific PREA training during their offender work release procedure training.

f. Gender Specific Training:

(1) All new staff members who will be placed at a female facility will receive Working With The Female Offender training prior to being placed at a post.

(2) Staff members will receive additional training if they are reassigned from a facility that houses only male offenders to a facility that houses only female offenders.

(3) Staff members will receive additional training if they are reassigned from a facility that houses only female offenders to a facility that houses only male offenders if their basic training or institutional basic training occurred more than two years prior to the time of assignment.

(4) Staff members who have been away from the department due to a separation of service, deployment to the military, illness, or other leave for 2 years or more must attend the appropriate gender specific training applicable to the worksite requirements.

5. PREA Specialized Training:

a. Medical and mental health staff members will receive annual specialized PREA training.

b. All new investigators and administrative inquiry officers (AIOs) or designees assigned to investigate offender sexual abuse allegations will receive specialized PREA training.

6. Training Records:

a. All completed PREA training will require a PREA acknowledgment form or PREA basic training acknowledgment form stating the staff member understood and completed the training. This form will be routed through the facility training officer or regional training coordinator.

(1) The facility training officer or regional training coordinator will send the original PREA acknowledgment form to the central office human resources personnel for retaining in the employee's personnel file.

(2) Volunteer acknowledgment forms will be retained in the volunteer's file by designated facility staff members.

(3) Vending contractors acknowledgment forms will be retained in the vendor file by designated facility staff members.

(4) Work release supervisor acknowledgment forms will be retained by the work release coordinator at the facility in the work release supervisor's file.

C. RECEPTION AND ORIENTATION
1. Facilities will assess offenders for the risk of being sexually abused and the risk of being sexually abusive utilizing their divisional adult internal risk assessment in accordance with the institutional services procedure regarding diagnostic center reception and orientation, and probation and parole procedures regarding the community supervision center, the community release center, and contracted residential facilities.
   a. Offenders will be assessed within 72 hours of arrival.
   b. Offenders will be reassessed within 30 days of arrival.
      (1) The reassessment will consider additional relevant information received by the facility after the initial intake screening.
   c. The offender's risk level will be reassessed when warranted due to a referral, incident of sexual abuse, or upon request or receipt of additional information that impacts an offender's risk of sexual victimization or abusiveness.
   d. The offender will not be disciplined for refusing to answer or not disclosing complete information during the assessment.
   e. Offender interpreters or offender readers will not be utilized.

2. If the gender of the offender is unknown at the time of intake, staff members will not search the offender for the sole purpose of determining the offender's genital status.
   a. Genital status may be determined during conversations with the offender, reviewing medical records, or if necessary, through a broader medical examination conducted in private by the appropriate health care staff members.
   b. Housing assignment for transgender and intersex offenders will be made as outlined in this procedure, on a case-by-case basis by the institutional transgender/intersex committee or designee of the community confinement facilities to ensure the health and safety of the offender in accordance with the institutional services procedure regarding offender housing assignments and the probation and parole procedure regarding risk assessment and housing assignments.
   c. Youthful offenders will be processed in accordance with the institutional services procedures regarding reception and orientation.

3. Assessing for Risk of Sexual Victimization and Sexual Abusiveness:
   a. All offenders will be assessed during intake and upon transfer to another facility for their risk of being sexually abused by other offenders or sexual abusiveness towards other offenders in accordance with the institutional services procedure regarding offender housing assignments and the probation and parole procedures regarding the community supervision center, the community release center, and contracted residential facilities.
   b. Housing, cell, bed, education, and programming assignments will be individualized utilizing the adult internal risk assessment with the goal of keeping separate those offenders identified at high risk of sexual victimization from offenders assessed at high risk of being sexually abusive. This will be in accordance with the institutional services procedures regarding offender housing assignments, offender recreation and activities, and probation and parole procedures regarding the community supervision center, the community release center, and contracted residential facilities.
      (1) Contracted residential facilities will ensure appropriate assignments as outlined in the contract.
(2) The adult internal risk assessment will not be used by any staff member to preclude placement in a required activity.

c. All housing, cell, bed, education, and programming assignments for transgender or intersex offenders will be made in accordance with the institutional services procedures regarding offender housing assignments and programming assignments.

4. Youthful Offender Housing:

a. A youthful offender will not be placed in a housing unit in which he will have sight, sound, or physical contact with any adult offender through use of a shared day room or other common space, shower area, or sleeping quarters. Staff members will avoid placing youthful offenders in isolation to comply with this provision. If sight and sound separation is not possible, staff members will provide direct supervision. Staff members will provide direct supervision when offenders may have unavoidable contact with adult offenders.

(1) General population youthful offenders will be housed separate from offenders 18 years and older in accordance with the institution's standard operating procedure for the offender housing assignments.

(2) Youthful offenders who are placed in segregated housing, assigned to disciplinary segregation, or to the infirmary will only be housed with another youthful offender or in a single cell in accordance with the institutional services procedures regarding temporary administrative segregation confinement and disciplinary segregation.

(3) To the extent possible, youthful offenders will have access to work, programs, and/or activities in accordance with department and institutional services procedures.

5. Medical and Mental Health Screenings: History of Sexual Abuse:

a. If the screening indicates that an offender has experienced prior sexual victimization, whether it occurred in a correctional setting or in the community, staff members will ensure that the offender is offered a follow-up meeting with a medical or mental health practitioner within 14 calendar days of the intake screening.

b. If the screening indicates that an offender has previously perpetrated sexual abuse, whether it occurred in a correctional setting or in the community, staff members will ensure that the offender is offered a follow-up meeting with a mental health practitioner within 14 calendar days of the intake screening.

c. Medical and mental health practitioners will obtain informed consent from offenders before reporting information about prior sexual victimization that did not occur in an institutional setting.

6. Offender Education:

a. The department will provide PREA related education in formats accessible to all offenders, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to offenders who have limited reading skills in accordance with the department's procedures regarding deaf and hard of hearing offenders, disabled offenders, and blind and visually impaired offenders.

(1) Offenders who have limited English proficiency will be provided a copy of the video transcript and the PREA offender brochure in their native language.
(A) If these documents are not already translated as a recognized language by the department, the department will make reasonable accommodations to provide these documents in the offender's native language.

(B) If it is not possible to translate the documents to the offender's native language the department's PREA site coordinator or designee will utilize an interpreter to assist the offender in understanding the information provided.

b. The PREA site coordinator will make key information readily available or visible to all offenders through PREA posters, the offender rulebook, and the offender brochure on sexual abuse and harassment.

D. TRANSGENDER COMMITTEE

1. Each institution will have a transgender committee to make informed decisions regarding the health and safety of transgender and intersex offenders assigned at that facility.

2. The transgender committee shall meet with the offender upon arrival at the facility and every six months thereafter or more often if deemed necessary.

3. The transgender committee will complete a written report within 10 working days of the offender’s arrival at the facility and after each 6 month meeting

4. The report should be forwarded to the appropriate deputy division director of the division of adult institutions; the director of the division of rehabilitative service and the PREA coordinator for review and approval.

   a. A response should be made back to the transgender committee within 10 working days.

   b. The written decision shall be maintained in the offender’s classification and medical records in accordance with departmental procedures regarding record retention.

5. The transgender committee meeting and subsequent written report shall includes the following:

   a. offender’s view of his vulnerability within the general population,

   b. historical overview of the offender’s transgender/intersex status,

      (1) Include information regarding where the offender is in the transition process, amount of time living as a transgender, and the offender’s concerns and views regarding the transition process.

   c. review of the offender adult internal risk assessment,

      (1) The report should show the adult internal risk assessment was reviewed and whether the offender required a reassessment.

      (2) If information is obtained which would affect the offender's classification, the offender will be reassessed utilizing the adult internal risk assessment.

   d. review of the offender’s institutional adjustment,

   e. PREA allegations/investigations,
f. review of programming assignments,

g. recommendations regarding the offenders health and safety to include:

(1) housing assignment,

(A) Housing assignments for transgender or intersex offenders shall not be made based solely on genitalia but must consider the offender’s health and safety and the security of the facility through a review of the respective classification, medical and mental health records.

(B) The transgender or intersex offender’s own views with respect to his safety shall be given serious consideration when determining housing.

(2) showering,

(A) Transgender or intersex offenders shall be offered the opportunity to shower separately from other offenders.

(3) special needs.

(A) If the contracted mental health provider recommends hormone replacement therapy the recommendation will be included in the transgender committee report.

(B) If specialized clothing, such as a support garment, is recommended, the recommendation shall be included in the report. A written doctor’s recommendation shall accompany the report.

E. CROSS-GENDER VIEWING AND SEARCHING

1. Cross-gender strip searches are not allowed except in exigent circumstances. All cross-gender strip searches will be documented as outlined in the department, institutional services and probation and parole procedures regarding searches.

2. Offenders will be allowed to shower, perform bodily functions, and change clothing without non-medical staff members of the opposite gender viewing their breast, buttocks, or genitalia, except in exigent circumstances, or when such viewing is incidental to routine cell checks in accordance with department, institutional services, and probation and parole procedures regarding searches.

a. Staff members of the opposite gender will announce their presence prior to entering an offenders housing unit. If an opposite gendered staff member is assigned to the housing unit, the announcement will be made at the beginning of the shift. If there is no opposite gendered staff member assigned to the housing unit, an announcement will be made each time an opposite gendered staff member enters the housing unit.

(1) Each time a cross gender announcement is made it will be recorded in the housing unit chronological log.

(2) If a circumstance arises to where a cross gender announcement could comprise the safety, security, and good order of the facility, the shift supervisor may declare the circumstances to be exigent and grant the authority to waive the announcement. All exigent circumstances will be documented by the shift supervisor in the chronological log.
(3) To notify hearing impaired offenders of cross gender staff in the housing unit, all housing units should display a sign indicating when a cross gender staff member is present.

b. If a staff member of the opposite gender is required to venture past privacy barriers, and no exigent circumstances exist, the staff member will verbally announce their presence to the offenders and allow the offenders to seek privacy from the staff member viewing the offender's buttocks, breast, or genitalia.

3. Staff members will not perform strip- or pat-down searches or conduct a physical examination for the sole purpose of determining an offender's genital status in accordance with the institutional services procedures regarding searches, reception and orientation, and receiving screening intake center.

4. Staff members will be trained in how to conduct cross gender pat down searches of transgender and intersex offenders in a professional and respectful manner and in the least intrusive manner possible as consistent with security needs.

F. REPORTING SEXUAL ABUSE OR HARASSMENT

1. Each facility's CAO or designee will provide multiple ways for offenders to make anonymous reports of allegations of offender sexual abuse and harassment, retaliation, staff member neglect, and violation of responsibilities that may have contributed to an incident of offender sexual abuse, to include but not limited to:

   a. informal resolution request (IRR), grievance process, or offender complaint,
   
   b. a staff member,
   
   c. PREA hotline, and
   
   d. advocacy agency.

2. Offenders may make anonymous reports of allegations of offender sexual abuse to the Department of Public Safety, Crimes Victims Services Unit.

   a. All offender mail addressed to the Crimes Victims Services Unit will be treated as confidential mail and not subject to examination.

   b. Facilities will maintain strict policies prohibiting mailroom staff from revealing to staff members or administrators the fact that an offender sent correspondence to the sexual abuse reporting entity.

3. All allegations including anonymous, third party, verbal, or allegations made in writing will be accepted and moved forward in accordance with the offender sexual abuse coordinated response outlined in this procedure.

4. Staff members may anonymously report allegations of offender sexual abuse, harassment, or retaliation utilizing the staff member tips hotline.

5. All health services staff members will be required to report sexual abuse and to inform the offender of the practitioner's duty to report prior to the initiation of services.

6. Health services staff members will only reveal information related to a sexual abuse report that is necessary to make treatment, investigation, and other security and management decisions.
7. Probation and parole staff members that receive information that an offender under community supervision was a victim of offender sexual abuse occurring within any confinement setting, will make immediate notification to the department's PREA coordinator who will ensure the allegation is immediately forwarded for investigation.

8. Grievance or complaint and exhausting administrative remedies:
   a. The department will not require an offender to use any informal grievance or complaint process, or to otherwise attempt to resolve with staff members, an alleged incident of sexual abuse.
      (1) The department will not impose a time limit for an offender submitting a grievance or complaint regarding an allegation of sexual abuse.
      (2) The department may apply otherwise applicable time limits to any portion of a grievance or complaint that does not allege an incident of sexual abuse in accordance with the department procedure regarding offender grievance, administrative inquiries, and investigation unit responsibilities and actions.
   b. The department will ensure that an offender who alleges sexual abuse may submit a complaint to a staff member who is not the subject of the complaint and the grievance or compliant is not referred to a staff member who is the subject of the complaint.
   c. Staff members are to address grievances or complaints for allegations of sexual abuse and harassment in accordance with the department procedure regarding offender grievance, administrative inquiries, and investigation unit responsibilities and actions.

9. Protection Against Retaliation:
   a. The PREA site coordinator will ensure all victims and reporters and those that cooperate with offender sexual abuse and harassment investigations or inquiries are monitored and protected from retaliation.
   b. Immediately following any reported incident of sexual abuse or harassment, monitoring for retaliation will be conducted in the following manner:
      (1) The alleged victim and reporter of offender sexual abuse or harassment will be monitored for a minimum of 90 days to assess any potential risk or act of retaliation.
          (A) For offender victims and offender reporters, monitoring will include face-to-face status checks by staff members a minimum of every 30 days.
          (B) The assessment-retaliation status checklist form will be used during each of the assessment interviews.
          (C) If the victim or reporter expresses fear of retaliation, monitoring will continue for an additional 90 day period or until the victim or reporter is no longer in fear of retaliation or if the investigation or inquiry is unfounded.
      (2) The PREA site coordinator or designee will monitor all staff members who report offender sexual abuse or harassment for a minimum of 90 days. Monitoring will include but is not limited to monitoring for changes that may indicate retaliation, negative performance reviews, or reassignments.
(A) The assessment-retaliation status checklist form will be used during each of the assessment interviews.

(3) The PREA site coordinator or designee will ensure all witnesses receive an initial assessment utilizing the assessment-retaliation status checklist form.

(A) Witnesses who voice they have no concerns regarding potential retaliation will not receive further monitoring.

(B) The witness will sign the assessment-retaliation status checklist form showing they have no concerns regarding potential retaliation.

c. The PREA site coordinator will report all evidence of retaliation to the CAO or designee to ensure an inquiry or investigation is initiated in accordance with department procedures.

d. If possible retaliation is suggested, the PREA site coordinator will act promptly to remedy any such retaliation and protect the individual.

e. The PREA site coordinator will ensure victims, reporters, and witnesses that report a fear of retaliation or possible victims of retaliation be offered emotional support services.

(1) Emotional services for offender victims, reporters, or witnesses include but are not limited to a referral to mental health, chaplain, or advocacy when appropriate.

(2) Emotional services for staff member reporters or witnesses include but are not limited to, employee assistance program, peer action and care team referral, and/or chaplain referral.

(3) All action taken to remedy retaliation or services offered to the victims or suspected victims will be noted on the assessment-retaliation status checklist form.

f. In the event that a victim, offender reporter, or a witness is transferred during a period of monitoring, the PREA site coordinator will forward the assessment-retaliation status checklist form to the PREA site coordinator in the receiving institution.

(1) The PREA site coordinator at the receiving institution will ensure monitoring continues as outlined in this procedure.

(2) The PREA site coordinator will ensure the completed assessment-retaliation status checklist form is returned to the originating institution to be filed in the PREA incident file for future audits.

(A) If released to a community confinement facility monitoring will continue.

(B) If released to a field probation and parole office, monitoring will stop.

g. In the event the allegations are determined to be unfounded the agency will terminate monitoring.

G. COORDINATED RESPONSE

1. The CAO or designee will coordinate actions taken by first responders, medical, mental health, investigators, and administrators in response to all allegations of offender sexual abuse and harassment as outlined in the divisions' coordinated response to offender sexual abuse protocol.
2. Offender interpreters will not be utilized except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the offender’s safety, the performance of first responder duties, or the investigation.

3. All allegations of offender sexual abuse and/or harassment, including third party and anonymous reports, will immediately be forwarded to the shift supervisor to initiate the coordinated response utilizing the applicable PREA allegation notification penetration/non-penetration event checklist.

4. If the allegation is reported directly to a facility administrator, the administrator can initiate the coordinated response to ensure confidentiality utilizing the notification checklist.

   a. In the event of an allegation of a penetration act, the first responder will take the following steps.

      (1) Ensure the safety of the victim.

      (2) Request the victim not to take any actions that may destroy physical evidence including: washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, when applicable.

      (3) To the extent possible, ensure the alleged perpetrator does not take any actions that could destroy physical evidence including washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.

      (4) Notify the shift commander or shift supervisor

         (A) The shift commander or shift supervisor will make telephone notifications and respond as outlined in the division's coordinated response to offender sexual abuse protocol.

   b. In the event of a non-penetration or harassment event the shift commander or shift supervisor will make email notifications as outlined in the applicable PREA notification checklist protocol.

5. Upon receiving information that an offender has been sexually abused while assigned at another department facility, the coordinated response for offender sexual abuse will be immediately initiated as outlined in this procedure.

   a. If the alleged abuse occurred at a facility outside the department, the notification checklist will be forwarded to the department’s PREA coordinator. The PREA coordinator will ensure notification to the facility is made with 72 hours.

H. SEGREGATED HOUSING IN INSTITUTIONAL SETTING

1. Following an allegation of offender sexual abuse or if an offender is assessed as being at high risk of victimization, the shift commander will ensure the offender is housed in the least restrictive housing available to ensure safety.

   a. The assessment for least restrictive housing will occur within 24 hours of the allegation or the offender being identified as at risk.

   b. Least restrictive options to ensure safety of the offender and the security of the institution include:

      (1) return to assigned housing;

      (2) temporary reassignment of staff members;
(3) assignment to another housing unit; and

(4) temporary segregated housing for protective custody needs. Segregated housing should not be considered as the first option to ensure safety of the victim.

c. The assessment will consider the allegation or threat and the safety of the victim and institution.

2. If the assessment is due to an alleged PREA event the shift commander will note on the PREA allegation notification penetration/non-penetration event checklist form of the recommended housing option.

a. If temporary administrative segregation confinement (TASC) is recommended, the shift commander will note on the PREA notification checklist the reason no alternative means of housing separation can be arranged and the offender victim will be placed in segregated housing in accordance with institutional services procedures regarding segregation units.

(1) The shift commander will ensure the alleged victims and perpetrators are separated by sight and sound while housed in a segregation unit.

3. When an offender is believed to be in substantial risk of victimization, the shift commander will assess the offender to ensure housing in the least restrictive housing.

a. If TASC is determined to be the least restrictive housing the shift commander will note on the TASC order the offender is being placed in Segregated housing due to a PREA risk.

b. The offender will be placed in segregated housing in accordance with institutional services procedures regarding segregation units.

4. The PREA site coordinator will review all PREA notification checklists the following business day to ensure appropriate housing placement.

5. Assignment to involuntary segregation housing will not ordinarily exceed a period of 30 days.

6. Every 30 days, the offender will be afforded a review to determine whether there is a continuing need for separation from the general population in accordance with institutional services procedures regarding segregation units and protective custody.

7. Administrative and criminal investigation reports will be retained for 90 years from the completion of the investigation and in accordance with the department procedure regarding records retention.

I. HEALTH SERVICES CARE

1. Victims of sexual abuse will receive timely, unobstructed access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by health services practitioners according to their professional judgment.

2. Health Services staff member cannot collect physical evidence from a victim or perpetrator following a report of offender sexual abuse but may assist in the preservation of items related to the incident. A sexual assault forensic examiner (SAFE) or sexual assault nurse examiner (SANE) may collect evidence in conjunction with a sexual assault examination.

3. Health services staff members will screen victims for obvious physical trauma, and provide emergency medical care.
4. If the alleged perpetrator is a staff member, the victim will be transported to the community emergency room for a sexual assault examination to be performed by a SANE or SAFE.
   a. The offender will be out counted when the incident is alleged to have occurred within 120 hours.

5. If an allegation of offender sexual abuse is made within 120 hours of the alleged event and consists of penetration of the mouth, anus, buttocks, or vulva, however slight, by hand, finger, object instrument, or penis, health services staff member will:
   a. Contact the on call SANE staff member to inform them to report to the facility and determine the staff member’s estimated time of arrival.
   b. Notify the shift commander that a sexual assault examination is needed and the estimated time of arrival of the SANE staff member. The shift commander will proceed with the coordinated response as outlined in the coordinated response protocol for institutions.
      (1) The offender will be held in medical when possible until the arrival of the investigator and the victim advocate.
   c. Keep the victim separated from the perpetrator by sight and sound at all times.
   d. Obtain informed consent from the victim for completion of the sexual assault examination.
      If the victim refuses a sexual assault exam, health services staff members will educate the offender on importance of sexual assault exams.
      (1) If the offender continues to refuse a sexual assault exam, documentation of the refusal will be noted on the refusal of treatment - no show form.
   e. Document any emergency treatment provided, in subjective complaints, objective findings assessment, and treatment plan (SOAP) format, in the applicable department computer system.
   f. Interact with the alleged victim in a neutral and non-judgmental manner.
   g. Ask the alleged victim for details of the incident that are important for the provision of health and services.
   h. Related documentation of the alleged assault should be released only to the CAO or designee and the institutional investigator.

6. The SANE staff member will collect evidence according to established forensic procedures for processing and document the exam and finding in the applicable department computer system.
   a. If a SANE staff member is not available to conduct the sexual assault examination or if the victim’s injuries are such that emergency room care is required, the victim will be transported to the community emergency room with a SANE or SAFE for the sexual assault examination.
      (1) The health services staff member will notify the community emergency room.
      (2) The health services staff member will contact the shift commander to arrange transportation to the emergency room in accordance with institutional services procedures regarding offender transportation and hospital and specialized ambulatory care.
7. If the victim has showered and it has been more than 120 hours since the alleged assault, the physician will determine treatment and whether a sexual assault forensic exam is necessary.

   a. For investigative purposes, the investigator may direct that the victim receive a sexual assault medical examination by the on-call SANE staff member.

8. Alleged victims of offender sexual abuse of any kind that consists of penetration of the mouth, anus, buttocks, or vulva, however slight, by hand, finger, object instrument, or penis will be provided with prophylactic treatment and follow-up for sexually transmitted or other communicable diseases, as clinically determined by the physician. Female victims will be offered timely information and timely access to pregnancy testing and emergency contraception in accordance with professionally accepted standards of care, where medically appropriate.

9. If initial disclosure of offender sexual abuse is made to health services staff members, notification will be made to the shift commander to initiate the coordinated response to offender sexual abuse in accordance with this procedure.

10. The reported perpetrator’s health record will be reviewed by the health services administrator or designee and referred to the physician for appropriate communicable disease diagnostic testing.

11. Upon receiving a report of a substantiated case of offender sexual abuse the PREA site coordinator will submit a referral and screening note - health services form to ensure the perpetrator will be assessed by qualified mental health professional (QMHP) within 60 days of learning of such abuse.

12. If the allegation involves penetration and the offender is receiving a sexual assault exam and/or treatment, a QMHP will assess the victim within two hours of the completion of the exam.

13. If the allegation involves penetration but a sexual assault examination is not indicated due to the lapse of time since the event or the victim has showered, a QMHP will assess the offender within two hours of receiving notification from the shift commander.

14. If the allegation involves non-penetration, mental health staff members will receive a referral and screening note - health services from the shift commander and assessment will be offered within the next business day unless emergent events warrant a more immediate response by mental health staff members.

15. During the initial assessment, mental health treatment interventions will be discussed with the victim by the QMHP and will include options such as individual and/or group therapy.

   a. The QMHP will explain and offer advocacy services to the alleged victim offender. Advocacy will not be offered for allegations of sexual harassment.

   b. The QMHP will document the offender’s acceptance or refusal of advocacy services in the electronic medical record.

      (1) If the offender refuses advocacy services the QMHP will have the victim sign the refusal of treatment - no show form.

      (2) If the offender requests an advocate, the QMHP will notify the PREA site coordinator.

16. If no qualified medical or mental health practitioners are on duty at the time a report of a penetration event that occurred within 120 hours within a correctional facility, or 92 hours within a community confinement facility, custody staff first responders will take preliminary steps to protect the victim and will immediately notify the appropriate medical and mental health practitioners.
17. Victims of sexual abuse will be offered timely information and access to emergency contraception and prophylactic treatment for sexually transmitted infections in accordance with professionally accepted standards of care, where medically appropriate.

18. Treatment services will 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.

19. Each victim and abuser will be offered medical and mental health evaluations, and as appropriate, treatment to include appropriate follow-up services and treatment plans. When necessary, referrals will be completed for continued care following their transfer to, or placement in, other facilities or their release from custody.

20. Victims and abusers will be provided with medical and mental health services consistent with the community level of care in accordance with the institutional services procedures regarding medical and mental health services.

21. Victims of sexually abusive vaginal penetration while incarcerated will be offered pregnancy tests.

22. If pregnancy results, the victim will receive timely, comprehensive information, and access to all lawful pregnancy-related medical services.

J. INVESTIGATIONS

1. The department will ensure that an administrative and/or criminal investigation is completed for all allegations of sexual abuse and sexual harassment and all referrals for such allegations will be documented in accordance with the coordinated response to offender sexual abuse located on the department's intranet website.

   a. Allegations of sexual abuse and harassment that meet the criteria of category I and IV behaviors as defined in the department's procedures regarding administrative inquiries, will be investigated by the administrative inquiry officer or designee in accordance with the department procedure regarding administrative inquiries.

   b. Allegations of sexual abuse and harassment that meet the criteria of category II and III behaviors as defined in the department's procedures regarding administrative inquiries, will be investigated by the office of inspector general in accordance with the department procedure regarding investigation unit responsibilities and actions.

2. Investigators and AIOs or designee will receive specialized training in sexual abuse investigations within the first year of employment.

3. Administrative and criminal investigation will be conducted in accordance with investigations responsibilities and roles and administrative inquiry procedures.

4. Administrative investigations will include an effort to determine whether staff member actions or failure to act contributed to the abuse.

5. Administrative investigations will impose no standard higher than the preponderance of evidence in determining whether an allegation of offender sexual abuse or harassment is substantiated.

6. When outside agencies investigate sexual abuse, staff members will cooperate with outside investigators and will make effort to remain informed about the progress of the investigation.
a. The PREA coordinator will request all responsible sheriff departments follow PREA standards when conducting offender sexual abuse investigations.

7. Administrative and criminal investigation reports will be retained for 90 years from the completion of the investigation and in accordance with the department procedure regarding records retention.

K. DEBRIEFING

1. Each facility will conduct a sexual abuse incident debriefing at the conclusion of every substantiated and unsubstantiated offender sexual abuse investigation or inquiry. A sexual abuse incident debriefing is not required on offender sexual harassment investigations or inquiries or if the investigation or inquiry is unfounded.

2. Debriefings will be held within 30 days of the conclusion of a formal investigation or inquiry utilizing the PREA sexual abuse debriefing form and submitted to the department PREA coordinator, CAO, and assistant division director.

3. The review team for offender sexual abuse events will include the PREA site coordinator, and other upper level administrators, when applicable, with input from supervisors, investigators, and medical or mental health practitioners, when applicable.

4. A complete written report will be prepared by the CAO or designee outlining in detail the findings of the debriefing sessions and recommendations for improvements utilizing the PREA sexual abuse debriefing form.

   a. The facility will implement the recommendations for improvement, or will document its reasons why recommendations will not be implemented.

      (1) The completed report will be stamped confidential and be submitted to the deputy or assistant division director with a copy to department’s PREA coordinator.

      (2) The assistant division director will forward the report to the division director.

      (3) A copy of the report will be filed in the institutional PREA event file for future audits.

L. REPORTING OUTCOMES

1. Upon the completion of a PREA investigation or inquiry regarding offender sexual abuse, the department’s PREA coordinator will make written notifications to the alleged victim regarding the outcome of the investigation or inquiry utilizing the applicable alleged sexual abuse by offender notification form or the alleged sexual abuse by staff member notification form.

2. Notification will not be made to the offender following an investigation or inquiry regarding sexual harassment.

3. The initial notification will state whether the allegation was substantiated, unsubstantiated, or unfounded.

4. In the event that the investigation was conducted by an outside agency, the office of the inspector general will request relevant information from the outside agency in order to inform the offender of the outcome of the investigation.

5. All subsequent notifications will be made when:
a. Staff member on offender allegations: following the completion of an inquiry or investigation, the offender will be notified when the following occurs (unless the inquiry or investigation is unfounded):

(1) The staff member perpetrator is no longer assigned to the housing unit.

(2) The staff member perpetrator is no longer employed by the department.

(3) The staff member perpetrator has been indicted on a charge related to sexual abuse within the institution.

(4) A disposition of charges exists related to sexual abuse within the institution.

b. Offender on offender allegations: following the completion of an inquiry or investigation, the offender will be notified when the following occurs:

(1) The offender has been indicted on a charge related to sexual abuse within the institution.

(2) A disposition of charges exists related to sexual abuse within the institution.

c. The departmental PREA coordinator will forward the written notification to the offender via the PREA site coordinator.

(1) The PREA site coordinator will ensure that the written notification is provided to the offender.

(A) If the investigation or inquiry involved offender-on-offender sexual abuse that was substantiated or unsubstantiated, written notification will be delivered to the offender victim in a confidential manner.

(B) The offender will be offered the notification letter but will have the right to decline the letter.

(2) The original notification will be signed by the offender and witnessed by a staff member.

(3) The original notification will be forwarded to the department’s PREA coordinator for tracking.

(4) A copy of the signed notification will be provided to the offender.

(5) The date the notification letter is delivered to the offender will be documented in the chronological section of the offender’s classification file.

(6) In the event the offender has been released from custody and is not being housed in the community release center or the community supervision center and the duty to report ends.

M. ADVOCACY

1. Each facility will offer victims of offender sexual abuse, not including sexual harassment, a victim advocate to provide emotional support services, crisis intervention during the sexual assault exam, when applicable, and the investigative process.

a. Each facility will attempt to enter into a memorandum of understanding (MOU) with a rape crisis center to provide advocacy services in accordance with the department’s procedure regarding professional and general services contracts.
b. If a facility is unable to enter into a MOU with the advocacy center, the attempt will be documented and advocacy services will be provided by a qualified staff member who has been trained to provide advocacy services to a survivor of sexual abuse in confinement settings.

c. When the facility cannot successfully enter into a MOU with an outside community service provider for offender victim advocacy services, or when the outside community advocate is not available, a qualified staff member victim advocate will be provided.

(1) All staff members serving as a designated victim advocate for offenders will receive victim advocacy training for sexual assault advocates.

(2) All services provided by staff member victim advocates to offender victims will be afforded a level of confidentiality consistent with the safety and security of the institution.

2. The PREA site coordinator or designee will serve as the liaison between the facility and the advocacy organization.

3. The PREA site coordinator or designee will ensure the continuity of advocacy services in the event the victim is transferred while receiving services.

4. Victims of offender sexual abuse or harassment may report such abuse to the Missouri Department of Public Safety, Crime Victims Services Unit, P. O. Box 749, Jefferson City, MO 65102.

a. The Missouri Department of Public Safety will receive and immediately forward offender reports of sexual abuse and sexual harassment including third party and anonymous, to the office of the inspector general.

5. Offenders will have reasonable access upon their request to the ongoing services of a victim advocate to include:

a. Communication by mail or special visits in as confidential manner as possible to maintain safety and security of the institution.

b. Being informed prior to being given access to a victim advocate, the extent to which communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws.

c. Outside victim advocates will be allowed to arrange special visits with the offender victim in the facilities on non-visitation days. All visits will be arranged through the PREA site coordinator or designee.

6. Facilities will make available to offenders mailing addresses, telephone numbers, including toll-free hotline numbers, where available, of local, state, or national victim advocacy or rape crisis organizations.

a. The facility will enable reasonable communication between offender victims and these organizations.

b. A list of the above will be maintained in the library and/or other common areas of every facility.

N. PREA OFFENDER MANAGEMENT TEAM
1. The PREA offender management team may be utilized when an offender has displayed a pattern of behavior that includes 3 or more sexual abuse investigations with findings of unfounded within a 12 month period or 3 or more sexual harassment investigations with findings of unfounded over an unspecified period of time and it is determined that the offender has intentionally lied or there are other factors such as mental illness affecting the offender's view of reality. Areas to review should include but not limited to:

a. overview of pattern of behavior and allegations that lead to the convening of the PREA offender management team,

b. actions that have previously taken place to intervene or modify behavior,

c. identification of options to ensure the offender's safety and modification of behavior. This may include modification of how staff members supervise the offender, and

d. interventions or steps staff members will take when additional PREA allegations are made.

2. The completed PREA offender management plan will be forwarded to the assistant division director, CAO or designee, and the departmental PREA coordinator for approval.

3. The approved plan will be shared with the shift commander or shift supervisor and filed in the offender's classification file.

4. When future allegations are received the shift commander or shift supervisor will:

a. Ensure the safety of the offender as outlined in the plan.

b. Note on the plan when the allegations were made, details of the allegations, and action taken to ensure the safety of the offender.

c. Forward a copy of the offender management plan which includes documentation of the allegations and safety precautions to the site coordinator.

(1) On the next business day the PREA site coordinator will review the updated PREA offender management plan and ensure interventions are delivered.

5. The offender management team should review the PREA management plan at the minimum of every six months to determine if there is a need to continue the plan and whether behavior has been modified. All reviews will be documented.

6. If the offender is transferred, the receiving facility will review and revise the plan as needed. The revised plan should be forwarded to the assistant division director, CAO or designee and the departmental PREA Coordinator for approval.

7. Following the approval of the plan, future allegations will be handled in the manner outlined above.

O. VIOLATIONS OR DISCIPLINARY SANCTIONS FOR OFFENDERS

1. Offenders will be subject to disciplinary sanctions or violations pursuant to a formal disciplinary process following an administrative finding or a criminal finding of guilt when the offender engaged in offender on offender sexual abuse in accordance with divisional and institutional services procedures regarding conduct violations and disciplinary sanctions.
2. Sanctions will be commensurate with the nature and circumstances of the abuse committed, the offender’s disciplinary history, and the sanctions imposed for comparable offenses by other offenders with similar histories in accordance with divisional and institutional services procedures regarding conduct violations and disciplinary sanctions.

3. The disciplinary process will consider whether an offender’s mental disabilities or mental illness contributed to his behavior when determining what type of sanction, if any, will be imposed in accordance with divisional and institutional services procedures regarding conduct violations and disciplinary sanctions.

4. If found guilty of sexual abuse, the offender will be referred to appropriate treatment (therapy, counseling) by mental health staff members, as available, in accordance with divisional and institutional services procedures regarding conduct violations and disciplinary sanctions.

5. An offender who has sexual contact with a staff member may only be disciplined if the staff member did not consent to the contact in accordance with divisional and institutional services procedures regarding conduct violations and disciplinary sanctions.

6. The department prohibits all sexual activity between offenders. Consensual sexual activity between offenders will not be deemed sexual abuse and will be addressed in accordance with divisional and institutional services procedures regarding conduct violations and disciplinary sanctions.

P. EMPLOYEE DISCIPLINE

1. Staff members will be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse and sexual harassment procedures.

2. Termination from the department will be the presumptive disciplinary action for staff members who have engaged in sexual abuse.

3. All terminations for violations or the resignation of a staff member, who would have been terminated if not for their resignation, will be reported to relevant licensing or accreditation bodies and law enforcement.

4. Corrective action for contractors and volunteers:
   a. Contractors or volunteers who engage in sexual abuse will be prohibited from contact with offenders and will be reported to relevant licensing bodies and law enforcement.
   b. The CAO or designee of the department facility or contracted facility will take appropriate measures and consider whether to prohibit further contact with offenders in the case of any other violations.

Q. ANNUAL REPORTS

1. Annual Site Report: Each facility will utilize information from the offender sexual abuse debriefings to prepare an annual report to be submitted to the department’s PREA coordinator by the last working day in March.
   a. The report will include:
      (1) identified problem areas,
      (2) recommendations for improvement,
(3) corrective action taken,

(4) if recommendations for improvements were not implemented, reasons for not doing so,

(5) a comparison of the current year's data and corrective actions with those from prior years, and an assessment of the facilities' progress in addressing sexual abuse,

(6) an evaluation of the need for camera and monitoring systems,

(7) in consultation with the PREA site coordinator; assessment, determination, and documentation of whether adjustments are needed to:

   (A) the staffing plan,

   (B) the deployment of video monitors, and

   (C) the resource availability to adhere to the staffing plan.

b. The yearly report will be submitted to the division director and the department PREA coordinator no later than the last working day in March.

2. Agency Report: The PREA coordinator will prepare an annual report compiling each facility’s current year’s data and corrective actions.

   a. The report will include:

      (1) a comparison with prior year's data,

      (2) corrective actions, and

      (3) an assessment of the department's progress in addressing offender sexual abuse.

   b. The report will be forwarded to the department director for approval by the last working day in May.

   c. The CAO or designee, PREA coordinator or department director will edit specific material from the reports when publication would present clear and specific threat to the safety and security of the facility.

      (1) The CAO or designee, PREA coordinator, or department director will indicate the nature of the material edited.

   d. The department's annual PREA report will be made available to the public on the department's internet website.

IV. REFERENCES

A. Offender Rulebook
B. Offender Brochure on Sexual Abuse and Harassment
C. National Commission of Correctional Health Care Standards
D. 931-1572 Referral and Screening Note - Health Services
E. 931-1832 Refusal of Treatment/No Show
F. 931-4607 Prison Rape Elimination Act (PREA) Basic Training Acknowledgment
V. HISTORY: IS11-57 OFFENDER SEXUAL ASSAULT: This policy previously covered by IS11-55 Sexual Assault and IS11-55.1, Sexual Assault Procedure located in the Missouri Department of Corrections Institutional Services Policy and Procedures Manual; Original Rule Effective: August 15, 1994. Original Effective Date: 08/15/94. Revised Effective Dates: 10/15/99, 04/01/05, 07/21/06 and 07/22/10.

HISTORY: D1-8.6 OFFENDER ABUSE/SEXUAL CONTACT: This policy previously covered offender abuse and sexual abuse; the sexual abuse language was incorporated into this procedure upon it development in
accordance with the PREA. Original Effective Date: 05-04-01. Revised Effective Dates: 08-22-02 and 08-12-07.

COMBINED HISTORY OF IS11-57 AND D1-8.6 OFFENDER SEXUAL ABUSE AND HARASSMENT:

A. Original Effective Date: August 20, 2013
B. Revised Effective Date: December 26, 2014
C. Revised Effective Date: December 17, 2016