# PREA AUDIT: AUDITOR'S SUMMARY REPORT ADULT PRISONS & JAILS

PREA RESOURCE CENTER



Name of facility:	Southeast Correctional	Center						
Physical address:	300 East Pedro Simmons	300 East Pedro Simmons Drive Charleston, Missouri 63834						
Date report submitted:	March 25, 2016							
<b>Auditor Information</b>	Joseph Z. Martin							<u>,</u>
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Date of facility visit:	March 8 <sup>th</sup> – 10 <sup>th</sup> , 2016							
Facility Information	Southeast Correctiona	l Center						
Facility mailing address: (if different from above)	Same as above							·
Telephone number:	(573) 683-4409							
The facility is:	☐ Military		☐ County	,	Fe	deral		
-	☐ Private for profit		☐ Municip	al	⊠ Sta	ate		
	☐ Private not for profit							
Facility Type:	☐ Jail	☑ Prison					-	
Name of PREA Complia	nce Manager:			Bill Stand Deputy\	-	Title:		
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Agency Information								
Name of agency:	Missouri Department of C	Corrections						
Governing authority or parent agency: (if applicable)	Missouri Department of C	Corrections						
Physical address:	2729 Plaza Drive, P.O. Bo	x 236 Jeffe	erson City, N	10 6510	2			
Mailing address: (if different from above)	Same	,						
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Agency Chief Executive	Officer		, 18. , 18.			naga Ngalaga		194
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#### **AUDIT FINDINGS**

#### **NARRATIVE:**

The site visit for the PREA Audit of the Southeast Correctional Center was conducted on March  $8^{th}-10^{th}$  2016. The audit team consisted of the Audit Chair, Joseph Martin KDOC/DOJ Certified PREA Auditor with two support staff consisting of Shannon Butrum KDOC/DOJ Certified PREA Auditor and Stacy Dortch KDOC. During the Pre-Audit phase, the team reviewed standard documentation as well as the facilities Pre-Audit Questionnaire.

An entrance meeting was held at the beginning of the on-site visit with the following staff in attendance: MDOC PREA Coordinator Vevia Sturm, MDOC Assistant PREA Coordinator Adam Albach, Warden Ian Wallace, Deputy Warden Bill Stange, Deputy Warden Omer Clark and Acting Chief of Custody Travis Wilhite. Introductions were given and discussion was held of the teams schedule including touring the facility, following the recommended tour guide from the PREA Resource Center, and interviewing the necessary staff and inmates.

During the three day on-site portion of the audit, the team completed file review follow-up, toured the facility and conducted formal staff and inmate interviews. During the tour is was found that Housing Units 1 and 2 shower areas had insufficient coverage in providing privacy of the inmate's genitalia and buttocks areas from being viewed by female staff. The facility took immediate action to correct this problem and while on-site constructed higher privacy coverage for the inmates in these areas.

The team interviewed 35 inmates consisting of 15 random inmates from all housing units, 6 disabled and limited Engligh proficient, 4 who disclosed sexual victimization during risk screening, 6 who had reported sexual abuse and 4 gay or bi-sexual inmates. In addition, the team interviewed 41 staff which included the Warden, PREA Coordinator, PREA Compliance Manager, Ageny Contract Administrator, 2 Incident Review Team members, 1 that is charged with monitoring retaliation, 3 Human Resources, 3 Intake Staff, 4 Medical and Mental Health staff, 10 random staff from each shift, 3 that perform screening for risk of victimization and abusiveness, 2 investigative staff, 1 who supervised inmates in segregation, 2 staff that have acted as First Responders, 4 intermediate or high-level supervisory staff and 2 volunteers.

#### **DESCRIPTION OF FACILITY CHARACTERISTICS:**

The Southeast Correctional Center is located in Charleston, Missouri approximately 150 miles south of St. Louis and 150 miles north of Memphis, Tennessee. The facility occupies a 120 acre site just south of Interstate 57 on Highway 105 in Mississippi County.

SECC is a maximum security facility that houses male offenders. The institution is equipped with state of the art security equipment to provide the mose secure environment for both staff and offenders and to

ensure public safety. The facility is enclosed by a triple security fence system including a lethal electrified fence and has the capacity to house 1466 offenders within the security envelope and 192 in the minimum security unit.

#### **SUMMARY OF AUDIT FINDINGS:**

A debriefing was held on March 10<sup>th</sup> with the warden and executive staff to disclose the team's findings. The team found the facility compliant on all applicable PREA standards. The staff at SECC were well versed in PREA Standards and knew their duties and responsibilities in preventing, detecting and responding to allegations of inmate Sexual Abuse and/or Sexual Harassment. SECC provided good documentation to show consistent institutional practices along with corroborating interviews which showed compliance.

The inmates interviewed appeared to be well educated in PREA to include, knowledge of the agencies zero-tolerance policy on sexual abuse and sexual harassment which also includes retaliation for reporting such, throughout SECC PREA information is made continuously available which includes the agencies policy of zero-tolerance, how to report and victim advocacy services.

Each standard below will have justifications for compliance and recommendations for consideration.

Number of standards exceeded: 2

Number of standards met: 40

Number of standards not met: 0

Not Applicable:

1

# §115.11 - Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

П	Evcoods Standard	(cubetantially	exceeds requirement	of standard)	١
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X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

This standard directs for the agency to have a written policy mandating zero-tolerance towards all forms of sexual abuse and sexual harassment. In addition, it requires the agency to designate an agency-wide PREA coordinator with each facility designating a PREA Compliance manager.

The Missouri Department of Corrections policy SOPD1-8.13 Offender Sexual Abuse and Harassment clearly outlines the agency's zero-tolerance of sexual abuse and sexual harassment. The department has a state-wide PREA Coordinator while each facility has a designated PREA Compliance Manager.

# §115.12 - Contracting with other entities for the confinement of inmates

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

This standard directs that the Missouri Department of Corrections to include in awarded or renewed contracts the contracted entity to adopt and comply with PREA standards. In addition, the standard requires monitoring for compliance of the entity.

SECC provided examples of agency contracts which directly use the language for PREA compliance for the contracted entity. The Missouri Department of Corrections also has staff designated to ensure compliance of the contracted entity.

# §115.13 – Supervision and Monitoring

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

This standard directs that each facility shall develop, document and comply on a regular basis with a staffing plan that provides for adequate levels and where applicable, video monitoring, to protect inmates against sexual abuse. It requires the facility to document and justify when the staffing plan is deviated from. In addition, it requires annual reviews to determine if adjustments are needed. It requires the agency to have a policy and practice of having intermediate level or higher level supervisors conduct and document unannounced rounds to identify and deter staff to offender sexual abuse and sexual harassment. The policy shall also prohibit staff from alerting other staff that the supervisory rounds are being made.

SECC has a documented staffing plan that was prepared by the Missouri Department of Corrections. All required components of this standard are included. The facility has not deviated from the established staffing plan as SECC has mandatory posts that are maintained.

Agency policy SOPD1-8.13 Offender Sexual Abuse and Harassment clearly specifies that supervisors are required to conduct unannounced rounds and that staff are prohibited from alerting others these rounds are occurring. SECC provided examples of documentation to show established institutional practices of this occurring and staff interviews corroborated compliance.

# §115.14 - Youthful Inmates

☐ Exceeds Standard (substantially exceeds requirement of standard)
$\ \square$ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)
Not Applicable - Youthful offenders are not housed at the Southeastern Correctional Center.

#### §115.15 – Limits to Cross-Gender Viewing and Searches

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

This standard has six components. Part (a) directs that facilities shall not conduct cross-gender strip searches or cross-gender visual body cavity searches except in exigent circumstances or when performed by medical practitioners. Part (b) states for a facility whose capacity doesn't exceed 50 inmates, the facility shall not permit cross-gender pat-down searches of female inmates, absent exigent circumstances and that female inmates shall have access to regularly available programming or other opportunities. Part (c) states the facility shall document all cross-gender searches. Part (d) states the facility shall implement policies and procedures that enable inmates to shower, perform bodily functions and change clothing without nonmedical opposite gender staff viewing their breasts, buttocks or genitalia, except in exigent circumstances. In addition, policy shall require staff of the opposite gender to announce their presence when entering housing areas. Part (e) states the facility shall not search or physically examine transgender or intersex inmates for the sole purpose of determining genital statsus. Part (f) states the agency shall train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner.

Missouri Department of Corrections policy IS20-1.3 Searches outlines the departments protocol for searching inmates that includes cross-gender pat-down and body-cavity searches. All such searches are documented as directed by this policy.

Agency policy SOPD1-8.13 Offender Sexual Abuse and Harassment directs staff of the opposite gender of the inmate population to announce their presence when entering housing units and enables inmates to shower, perform bodily functions and change clothing without being viewed by non-medical opposite gender staff. During the on-site tour it was found that housing units 1 and 2 had insufficient privacy for inmates to shower. SECC staff took immediate action and installed additional privacy partitions to comply with this standard.

SOPD1-8.13 Offender Sexual abuse and Harassment also prohibits searching or physically examing transgender and intersex inmates for the sole purpose of determining their genital status.

Staff interviews and documentation provided showed cross-gender announcing to be in good practice and institutionalized however, there were a few staff who were unsure of the correct practice.

It is recommended to continue education of housing unit staff to ensure all understand this procedure. Frontline supervisors understood correct protocol and are key in communicating this to their staff.

SECC security staff have all been trained in the searching criteria of transgender and intersex inmates. Acknowledgment forms are kept showing completion of this training.

# §115.16 – Inmates with Disabilities and Inmates who are Limited English Proficient

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

This standard states that the agency shall take appropriate steps to ensure inmates with disabilities have an equal opportunity to participate or benefit in all aspects of the agency's efforts to prevent, detect and respond to sexual abuse and sexual harassment. Such steps include providing interpreters who can effectively communicate with inmates who are deaf or hard of hearing. In addition, the agency shall ensure written materials are provided in formats or through methods for those who are blind, mentally or intellectually disabled. This standard also prohibits the use of inmate interpreters except in limited circumstances.

Missouri Department of Corrections policy SOPD1-8.13 Offender Sexual Abuse and Harassment directs that inmates with disabilities have equal opportunities to all the departments efforts to prevent, detect and respond to sexual abuse and sexual harassment.

Southeastern Correctional Center has PREA information readily available throughout the facility in means of posters, brochures and videos that are shown at intake and at intervals on the inmate television channel for general population inmates. Interpreter Services are available and the department has contracts with them if the need arises for their services.

Documentation provided and staff and inmate interviews showed compliance of this standard as staff knew the responsibility of ensuring inmates with disabilities receive this information and inmates knew PREA information is given and is continuously available.

# §115.17 – Hiring and Promotion Decisions

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

This standard has 8 different sections. Part (a) states that agencies shall not hire or promote anyone who many have contact with inmates and shall not enlist the services of any contractor who has engaged in sexual abuse in confinement settings, has been convicted of engaging or attempted sexual acitivty in the community facilitated by force or threats of force, coercion or if the victim was unable or did not give consent, or has been civilly or administratively adjudicated to have engaged in such activity. Part (b) states the agency shall consider any incidents of sexual harassment in determing whether to hire or promote anyone or enlisting the services of a contractor who may have contact with inmates. Part (c) states before hiring new employees who have contact with inmates the agency shall perform criminal background checks and contact prior institutional employers for information on substantiated allegations of sexual abuse or pending investigations of allegations of sexual abuse. Part (d) states the background checks also apply before enlisting the services of contractors. Part (e) states the background checks shall occur at least every 5 years. Part (f) states the agency shall ask all applicants the components of section (a) on applications or interviews for hiring and promotions. Part (g) states providing false information shall be grounds for termination. Part (h) states the agency shall provide information on substantiated allegations upon request from an institutional employer.

The Missouri Department of Corrections has state applications which include the required questions concerning prior acts or attempted acts of engaging in sexual abuse or harassment in confinement or in the community. It also states providing false information would be grounds for termination.

Missouri Department of Corrections policy D2-2.2 Background Investigations directs for these checks to be completed before hiring or promoting staff. SECC provided good documentation and staff interviews corroborated annual checks are done for staff on their birth months and contarctor checks are done before enlisting their services. Agency employee handbooks direct the continuing affirmative to disclose any such behavior as described above.

# §115.18 – Upgrades to Facilities and Technology

	Exceeds	Standard	(substantially	exceeds	requirement	of standard)
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X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

□ Does Not Meet Standard (requires corrective action)

This standard directs when any new facility or any substantial expansions or modifications of existing facilities, the agency shall consider the design, acquisition, expansion or modification upon the agency's ability to protect inmates from sexual abuse. In addition, when installing or updating video monitoring systems or other monitoring, the agency shall consider how it may enhance the agency's ability to protect inmates from sexual abuse.

Southeastern Correctional Center reported having a expansion to housing unit 7 which is the minimum security unit. A classroom was recently built onto this unit. Cameras are installed inside the classroom and large windows are built in both entrance doors to allow for very good observation.

# §115.21 - Evidence Protocol and Forensic Medical Examinations

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

□ Does Not Meet Standard (requires corrective action)

This standard has 8 sections. Part (a) states the agency shall follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceddings and criminal prosections where applicable. Part (b) states the protocol shall be developmentally appropriate for youth where applicable. Part (c) states the agency shall offer all victims of sexual abuse access to forensic medical examinations without financial costs. Such forensic exams shall be performed by Sexual Assault Forensic Examiners or Sexual Assault Nurse Examiners where possible, when these examiners aren't available other qualified medical staff can perform the exam. Part (d) states the agency shall attempt to make available to the victim a victim advocate from a rape crisis center or qualified agency staff member. Part (e) states when requested by the victim, the victim advocate or staff member shall accompany and support the victim through the forensic medical exam and investigatory interviews. Part (f) states when the agency isn't responsible for investigating allegations of sexual abuse it shall request the investigating agency to follow the requirements of sections (a) though (e). Part (g) states the requirements of sections (a) through (f) shall also apply to any State entity outside of the agency and any Department of Justice component, Part (h) states for the purpose of this section, a qualified agency staff member or qualified community-based staff member shall be an individual who has been screened for appropriateness to serve in the role of victim advocate and has received education concerning sexual assault and forensic examinations.

Missouri Department of Corrections policy D1-8.8 Evidence Collection, Accountability and Disposal directs protocols for administrative and criminal investigations. Southeastern Correctional Center offers all victims of sexual abuse access to a Forensic Medical Examination at an outside hospital. SECC's Chaplain serves in the role of victim advocate and has been appropriately trained to do so.

Policy D1-8.13 Offender Sexual Abuse and Harassment directs that victims have access to a victim advocate and when requested can accompany them at the exam and investigory process.

Documentation was provided of this practice and Staff interviews corroborated knowledge of this standard.

#### §115.22 - Policies to Ensure Referrals of Allegations for Investigations

Ш	exceeds Standard (Substantially exceeds requirement of standard)	
Χ	Meets Standard (substantial compliance; complies in all material ways with the standard	rc
fo	r the relevant review period)	

☐ Does Not Meet Standard (requires corrective action)

This standard states that agencies shall ensure that an Adminsitrative or Criminal investigation is completed for all allegations of sexual abuse and sexual harassment. It directs a policy be in place to ensure that allegations of sexual abuse or sexual harassments are referred for investigation to an agency with the legal authority to conduct criminal investigations. The agency shall publish such policy on it's website. In addition, it states any state entity responsible for conducting Adminsitrative or Criminal investigations of sexual abuse or sexual harassment shall have a policy in place governing the conduct of such to include department of Justice components when applicable.

Missouri Department of Corrections policy SOPD1-8.13 Offender Sexual Abuse and Harassment ensures that all allegations of Sexual Abuse and Sexual Harassment are investigated. The Inspector Generals office is responsible for such investigations of criminal behavior and has the proper authority to do such.

Staff interviews of Investigators corroborated this practice and SECC's investigators were trained appropriately to do so in reference to standard 115.34.

# §115.31 – Employee Training

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period

☐ Does Not Meet Standard (requires corrective action)

This standard states all agencies shall train all employees who may have contact with inmates on it's zero-tolerance policy, how to fulfill their repsonsibilities, Inmates rights, rights of employees and inmates to be free from retaliation, the dynamics of sexual abuse and sexual harassment in confinement, the common reactions of victims, how to detect and respond to signs of threatened and actual sexual abuse, how to avoid inappropriate relationships with inmates, how to communicate effectively with all inmates, how to comply with relevantlaws related to mandatory reporting. In addition, it directs for the training to be tailored to the gender of the inmate population and for agencies to keep electronic verification or signature of the training received.

Missouri Department of Corrections policy SOPD1-8.13 Offender Sexual Abuse and Harassment outlines this training as a requitement for all staff. The departments lesson plan's are well-written and are different for the gender of the inmate population (male vs. female).

The Southeastern Correctional Center reported all staff have received such training and documentation was given of such. Staff interviews corroborated that the training has been completed for all. SECC provided good examples from the staff receiving this training through Acknowledgment forms.

#### §115.32 – Volunteer and Contractor Training

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

This standard directs for agencies to ensure all volunteers and contractors who have contact with inmates be trained on their responsibilities under the agency's sexual abuse and sexual harassment polices and procedures. In addition, the agency shall maintain documentation confirming that volunteers and contractors have understood the training they have received.

Missouri Department of Corrections policy SOPD1-8.13 Offender Sexual Abuse and Harassment requires specific training for volunteers and contractors. The curriculum taught is sufficient in meeting their roles and responsibilities in accordance with agency policy. The agency and each facility maintains Acknowledgment forms of this training from the staff that have received it.

#### §115.33 – Inmate Education

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

This standard directs for inmates to receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions. Inmates are to be educated within 30 days of intake and provided comprehensive education of their rights to be free from sexual abuse and sexual harassment. This information should be in formats accessible to all including inmates who are mentally, physically disabled as well as limited English proficient. Documentation of this education shall be kept and key information shall be made readily available continuously.

Missouri Department of Corrections policy SOPSS-1.2 stipulates inmates receive information explaining the agency's zero-tolerance policy. Southeastern Correctional Center provided documentation this usually occurs within a few days or sooner after arrival,

Policy SOPD1-8.13 Offender Sexual Abuse and Harassment stipulates all inmates including those diasabled and limited English proficient receive education in formats they can understand. SECC provides education by video, brochures, posters, transcripts, braille and large print as well as Spanish when applicable.

SECC provided good documentation of this standard as acknowledgment forms were provided of the inmates receiving PREA information and education given. In addition, inmate interviews corroborated this practice as being institutionalized.

#### §115.34 - Specialized Training: Investigations

X Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

This standard directs that agencies train sexual abuse investigators in techniques that include interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings and the criteria and evidence required to substantiate a case for administrative action or prosecution referral.

Missouri Department of Correction policy SOPD1-8.13 Offender Sexual Abuse and Harassment requires specialized training for assigned PREA investigators for the department. MDOC lesson plans for this specialized training exceed expectation and are very thorough covering all aspects of this standard and much more.

The Inspector's General office which is a part of the MDOC is tasked with this responsibility. SECC provided documentation of their facility based investigators completing this training.

### §115.35 - Specialized training: Medical and mental health care

☐ Exceeds Standard	(substantially	exceeds requireme	nt of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

This standard directs that agencies shall ensure all medical and mental health staff who work regularly with inmates receive training on the following; How to detect signs of sexual abuse and sexual harassment, how to preserve physical evidence, how to respond effectively and professionally to victims, how and to whom to report allegations or suspicions, when applicable, on how to conduct forensic exams. In addition, documentation shall be kept of this training of staff participation and they also receive other training requirements expected of all staff.

Missouri Department of Corrections policy SOPD1-8.13 Offender Sexual Abuse and Harassment requires this specialized training for all medical and mental health staff. Currently SECC medical staff do not perform forensic exams. If the need arises the inmate is taken to an outside hospital free of cost to the inmate.

Medical and Mental Health staff interviews corroborated that all have received this specialized training. Staff were very knowledgeable of their responsibilities involving medical and mental health treatment and counseling for sexual abuse victims and perpetrators.

#### §115.41 - Screening for Risk of Victimization and Abusiveness

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

This standard directs that all inmates be assessed during an intake screening and upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive towards other inmates. It requires that the screening ordinarily take place within 72 hours of the inmates arrival at the facility and be conducted using an objective screening instrument. It also requires that within a set period of time, not to exceed tirty (30) days from the inmates arrival at the facility, the facility will reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening. It is also required that the inmate's risk level be reassessed when warranted due to referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness. In addition, the standard directs that inmates may not be disciplined for refusing to answer, or for not disclosing complete information in response to the above screening. Lastly, the standard requires the agency to implement appropriate controls on the dissemination within the facility of responses to questions asked pursuant to the standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates.

Agency policy SOPD 1-8.13 Offender Sexual Abuse and Harrassment requires that all inmates be assessed within 72 hours of transfer and again within 30 days of the inmate's arrival and covers all of the componants required by the standard. SECC provided examples of documentation to show established institutional practices of the required assessments occurring which. Staff and inmate interviews also corroborated compliance.

# §115.42 – Use of Screening Information

X Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

This standard requires that the agency use information from the risk screening required by standard 115.41 to inform housing, bed, work, education, and program assignments with the goal of keeping separate inmates at high risk of being sexually victimized from those at high risk of being sexually abusive while making individualized determinations about how to ensure the safety of each inmate.

SECC provided a multitude of documentation that showed an established institutional practice of using risk screening information for housing, bed, work, education, and programming assignments that were all corroborated by staff interviews. The system in place at SECC was reviewed by the audit team on site and discussed with multiple work and program supervisors. It was clearly demonstrated that SECC has top notch commincation in this area and that their practice is well followed and exceeds the expectation of the standard. Agency policies IS5-2.3 Offender Internal Classification and IS 18-1.1 Required Activities clearly cover the componants of this standard.

The standard also requires that when deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, and in making other housing/programming assignments, that the agency consider on a case by case basis whether a placement would ensure the health and safety of the inmate or would present management or security problems. In addition, the placement and programming assignments nust be reassessed at least twice each year to review any threats to safety experienced by the inmate. The standard requires that a transgender or intersex inmate's own views with respect to their own safety be given serious consideration and that trangender and intersex inmates be given the opportunity to shower separately from other inmates. Lastly, this standard directs that gay, bisexual, transgender and intersex inmates not be placed in dedicated facilities, units or wings solely based on such identification or status unless such placement is established in connection with a consent decree, legal settlement, or legal judgement for the purpose of protection.

Although SECC had no examples of transgender or intersex inmates being housed at their facility during the review period it was clear that policies were in place to cover the requirements of the standard when the need arises. Agency policies IS 5-3.1 Offender Housing Assignments covers all of the components of sections c-g of this standard in detail.

#### §115.43 – Protective Custody

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

This standard directs that inmates at high risk for sexual victimization not be placed in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination made that there is no available alternative means of separation

from likely abusers. It also requires that inmates placed in involuntary segregated housing for this purpose have access to programs, priviledges, education, and work opportunities to the extent possible and that any restriction of these be documented.

Although SECC had no examples of inmates at high risk of sexual victimization being placed in involuntary segregation during the review period it was clear that policies were in place to cover the requirements of the standard if the need arises. Agency policy SOPD 1-8.13 Offender Sexual Abuse and Harrassment directs the requirements of the standard should the use of temporary involuntary segregation be utilized.

Staff interviews showed knowledge of this requirement as alternate housing would be considered before placement of an alleged victim of sexual abuse in unvoluntary segregation.

#### §115.51 - Inmate Reporting

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

This standard requires the agency to provide multiple internal ways for inmates to privately report sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting, and staff neglect that may have contributed to such incidents. In addition, it requires at least one way for inmates to report abuse or harassment to a public or private entity or office that is not part of the agency. This standard also directs that staff accept reports made verbally, in writing, anonymously, and from third parties, documenting them all promptly. Lastly, this standard directs that a nethos for staff to privately report sexual abuse or harassment of inmates be provided.

Agency policy SOPD 1-8.13 Offender Sexual Abuse and Harrassment specifies the required multiple ways for inmates to report In addition, SECC provided examples of documentation to show multiple reporting methods provided to the inmates, to include posters, brochures and flyers, and of these reporting methods being utilized. Staff and inmate interviews also corroborated compliance as staff knew their responsibilities in accepting and documenting reports and inmates knew the multiple ways of reporting.

#### §115.52 - Exhaustion of Administrative Remedies

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

This standard directs the agency, when it has administrative procedures to address inmate grievances regarding sexual abuse, that it not impose a time limit on when an inmate may submit a grievance regarding sexual abuse; that it not require an inmate to use an informal grievance process; that an inmate may submit the grievance without submitting it to a staff member that is the subject of a complaint and that the grievance is not referred to the staff member that is the subject of the complaint. The standard also requires that the agency issue a final decision on a grievance alleging sexual abuse within 90 days of the initial finding; that third patries be permitted to assist inmates in filing grievances regarding allegations of sexual abuse; and that the agency establish procedures for the filing of emergency grievances.

Agency policies SOPD 1-8.13 Offender Sexual Abuse and Harassment and D5-3.2 Offender Grievance clearly outline the grievance process and includes all of the required components of the standard. SECC provided examples of documentation to show an established grievance mechanism that corroborated compliance.

#### §115.53 – Inmate Access to Outside Confidential Support Services

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

This standard requires that the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuce by providing the inmates with mailing addresses and telephone numbers, including toll-free hotline numbers and that the facility enable reasonable communication between the inmate and these organizations in as confidential a manner as possible. It further requires that the facility inform inmates of the extent to which such communications will be monitored and to which reports of abuse will be forwarded to authorities with mandatory reporting laws. Lastly, the standard directs that the agency maintain or attempt to enter into memoranda of understanding with community service providers to provide inmates with confidential emotional support services related to sexual abuse.

Agency policy SOPD 1-8.13 Offender Sexual Abuse and Harrassment outline access of victim advocates to inmates. SECC provided examples of flyers for Just Detention International and Rape, Abuse and Incest National Network that provide the required contact information provided to inmates. This was verified visually during the audit tour as well as corroborated by inmate interviews. In addition, SECC provided documentation to show attempts to enter into memoranda of understanding for advocate services, that as of the date of the audit had been unsuccessful. Currently SECC is providing advocate services to their inmate population by having their Chaplain trained to provide this service.

It is recommended by the audit team that the information of the Chaplain serving in this role be posted throughout the facility in addition to the flyers already present.

#### §115.54 - Third-Party Reporting

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

This standard requires the agency to establish a method to receive third-party reports of sexual abuse and sexual harassment and that information on how to report on behalf of an inmate be distributed publicly.

SECC provided examples of documented third party reports that has been received and investigated. In addition, the agency website was reviewed prior to the audit and information on how to report on behalf of an inmate was easily accessed

SECC staff interviews showed knowledge possessed of accepting these reports made by third parties as well as investigators proceeding normally in their duties as other reported allegations.

# §115.61 – Staff and Agency Reporting Duties

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

This standard directs that the agency requires all staff to report immediately any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility; retaliation against inmates or staff who report such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. The standard also requires that apart from reporting to designated supervisors or officials, that staff not reveal any information related to a sexual abise report to anyone other than to the extent necessary to make treatment, investigate, or make security abd management decisions. It requires that medical and mental health prectitioners be required to report sexual abuse unlessother wise precluded by Federal, State or local law. It requires that if an alleged victim is under the age of 18 or considered a vulnerable adult, that the agency report the allegation to the designated State or local services agency. Lastly, it requires that the facility report all allegations of sexual abuse or sexual harassment, including third party and anonymous reports, to the facility's designated investigators.

Missouri Department of Corrections policy SOPD 1-8.13 Offender Sexual Abuse and Harrassment clearly requires staff reporting and outlines that failing to do so is a class A misdeamor. In addition, agency policy IS 11-32 Receiving Screening – Intake Center outline required reporting for health services staff as well ous guidelines for instance involving individuals under the age of 18.

SECC provided examples of documentation to show an established reporting practice. Staff interviews also corroborated compliance, good awareness was possessed of their duty and responsibility of reporting.

#### §115.62 - Agency Protection Duties

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

This standard requires that when the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, that it take immediate action to protect that inmate.

Although SECC had no examples during the review period, where the facility learned that an inmate was subject to substantial risk of sexual abuse, it was clear that policies were in place to cover the requirements of the standard if the need arises. Missouri Department of Corrections policy SOPD 1-8.13 Offender Sexual Abuse and Harrassment clearly outlines steps to take should the facility learn that an inmate was subject to substantial risk of sexual abuse.

SECC staff knew their duty and responsibility to protect inmates who were at risk of being sexually abused and the steps to take to help protect these individuals.

# §115.63 – Reporting to Other Confinement Facilities

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

This standard requires that when the facility receives an allegation that an inmate was sexually abused while confined at another facility, that the head of the facility receiving the allegation notifies the head of the facility or appropriate office of the agency where the alleged abuse occurred. The standard directs that such notification be provided no later than 72 hours after receiving the allegation and that the provided notification be documented. In addition, the standard requires that the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with the standards.

Agency policy SOPD 1-8.13 Offender Sexual Abuse and Harrassment outlines the steps to take should the facility receive information that an inmate has been sexually abused while assigned at another facility. SECC provided examples of documentation to show an

established institutional practice of this occurring. Staff interviews also corroborated compliance.

#### §115.64 – Staff First Responder Duties

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

This standard directs that upon learning of an allegation that an inmate was sexually abused, the first security staff member to respond to the report be required to separate the alleged victim and abuser and preserve and protect any crime scene. It also requires that if the abuse occurred in a time frame that allows for the collection of physical evidence that they request that the alleged victim not take any actions that could destroy physical evidence and ensure that the alleged abuser doesn't take any actions that could destroy physical evidence. Lastly, the standard requires that if the first responder isn't security staff, that the responder be required to request that the alleged victim not take any actions that could destroy physical evidence and then notify security staff.

Missouri Department of Corrections policy SOPD 1-8.13 Offender Sexual Abuse and Harrassment clearly defines the steps to be taken by staff first responders that covers all the required components of the standard. SECC provided examples of documentation to show an established institutional practice of this occurring.

SECC staff interviews showed good knowledge was possessed that DNA evidence would be preserved as actions to help allow the collection of such. Examples include requesting the alleged victim not to wash, brush their teeth, change clothing, urinating, defacating, eating or drinking. In addition, staff knew that the alleged abuser would not be allowed to destroy evidence as these steps would apply to them as well.

# §115.65 – Coordinated Response

Exceeds Standard (see the second control of the second control	ubstantially exceed	ls requirement of	f standard)
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X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

This standard directs that the facility develop a written institutional plan to coordinate actions taken in response to an incident of sexual abuse.

Southeastern Correctional Center has a documented institutional plan to coordinate actions among first reposnders, medical and mental health staff, investigators and facility leadership.

It is facility specific and includes steps for the forensic exam of alleged sexual abuse victims when applicable.

# §115.66 – Preservation of ability to protect inmates from contact with abusers

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

This standard directs that neither the agency nor any other governmental entity responsible for collective bargaining on the agency's behalf enter into or renew any collective barbaining 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.

Missouri Department of Corrections policy D2-11.6 Labor Organizations clearly requires that the department not enter into or renew any collective bargaining agreements or other agreements that limit their ability to remove alleged staff sexual abusers from contact with inmates as required by the standard. The current labor agreement between the agency and the Missouri Corrections Officers Association was reviewed and meets the requirements of the standard.

# §115.67 – Agency protection against retaliation

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

This standard directs the agency to establish a policy to protect all inmates and staff who report sexual abuse or sexual harassment or who cooperate with an investigation from retaliation by other inmates or staff and to designate which staff member or department are designated for monitoring retaliation.

Missouri Department of Corrections policy SOPD 1-8.13 Offender Sexual Abuse and Harrasment clearly specifies the requirements for monitoring retaliation for both inmates and staff covering all the componants of the standard. SECC has a designated staff to monitor for retaliation and provided examples of documentation to show an established practice of inmate monitoring. Staff and inmate interviews also corroborated compliance. SECC has had no instances of staff monitoring during the review period.

it is recommended that the staff in charge for monitoring receive regulat training on the guidelines required for staff monitoring.

# §115.68 - Post-Allegation Protective Custody

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

This standard requires that any use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse is subject to the requirements of standard 115.43.

Although SECC had no examples of inmates alleged to have suffered sexual abuse being placed in involuntary segregation during the review period it was clear that policies were in place to cover the requirements of the standard if the need arises. Agency policy SOPD 1-8.13 Offender Sexual Abuse and Harrassment directs the requirements of the standard should the use of temporary involuntary segregation be utilized.

### §115.71 – Criminal and Administrative Agency Investigations

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

This standard has 12 sections, with (k) and (l) noted as non-applicable. Part (a) states that an agency who conducts its own investigations shall do so promptly, thoroughly and objectively for all allegations, including third-party and anonymous reports. Part (b) mandates that all agency investigators receive specialized training in sexual abuse investigations in accordance with 115.34. Part (c) details gathering and preserving direct and circumstantial evidence. This includes physical and DNA evidence, electronic monitoring data, interviewing alleged victims, suspected perpetrators, and witnesses. Prior complaints and reports of sexual abuse involving the suspected perpetrator shall also be reviewed. Part (d) states that the agency shall conduct compelled interviews only after consulting with prosecutors as to whether the interviews may be an obstacle for criminal prosecution when the quality of evidence appears to support criminal prosecution. Part (e) addresses the credibility of an alleged victim, suspect and witness. Assessments shall be on an individual basis and shall not be determined by inmate or staff status. Further, no agency shall require an inmate who alleges sexual abuse to submit to polygraph examinations or other truth-telling devices as a condition for proceeding with an investigation of an allegation. Part (f) addresses administrative investigations, stating that they shall include an effort to determine whether staff actions or the failures to act contributed to the abuse. These investigations shall be documented in written reports that include evidence, reasoning behind credibility assessments, facts and findings. Part (g) outlines that criminal investigations shall be documented in a written report and contain a thorough description of evidence with copies of all documentary evidence attached where

feasible. Part (h) states that substantiated conduct allegations that appear criminal shall be referred for prosecution. Part (i) requires the agency to maintain written reports referenced in (f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years. Part (j) states that an investigation shall not be terminated based on the departure of the alleged abuser or victim from the employment or control of the facility or agency.

Missouri Department of Corrections policy D1-8.1 and D1-8.4 outline the requirements set forth in this standard. Policies address prompt investigations into allegations of sexual abuse and harassment. Trained investigators within the Inspector General's (IG) Office conduct all criminal PREA investigations. Investigations are very thorough, including preservation of evidence, electronic monitoring, interview/record reviews and retention as specified. Investigations are not terminated after departure of alleged victim/abuser. The IG refers to prosecutors when appropriate and reports to the Department Director. Administrative investigations include determination of staff actions (or lack thereof) and written documentation of evidence. The credibility of alleged victims, suspects or witnesses are addressed on an individual basis.

Missouri Department of Correction policies D1-8.1 and D1.8.3 address the use of polygraph/truth telling devices. It appears that both policies are silent in reference to proceeding with an investigation of an allegation. However, both inmate and staff interviews confirm that truth telling devices were not used, nor would they be used as a condition of an investigation. Documentation and interviews supported practice and understanding of this standard.

#### §115.72 – Evidentiary Standard for Administrative Investigations

	Exceeds	Standard	(substantia	ally exceeds	s requireme	ent of	f standar	d)
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X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

This standard states that the agency shall impose no standard higher than a preponderance of evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.

Missouri Department of Corrections policy D1-8.4 details this standard. Investigators were familiar with the preponderance of evidence requirement. Investigative reports were provided that noted the same.

#### §115.73 – Reporting to Inmate

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

This standard has 6 sections, with part (b) and (f) noted as non-applicable. Part (a) mandates the agency to inform the inmate of the investigative determination (substantiated, unsubstantiated, or unfounded) after alleging suffered sexual abuse in a facility. Part (c) states that following an inmate's allegation that a staff member has committed sexual abuse, the agency shall inform the inmate (unless unfounded) whenever the staff member is no longer posted within the inmate's unit; no longer employed at the facility; has been indicted or convicted on a charge related to sexual abuse within the facility. Part (d) states that following an inmate's allegation that he or she has been sexually abused by another inmate, the agency shall inform the alleged victim that the alleged abuser has been indicted or convicted on a charge related to sexual abuse within the facility. Part (e) states that all such notifications or attempted notifications are documented.

Missouri Department of Corrections policy SOPD1-8.13 addresses notification to the inmate of substantiated, unsubstantiated or unfounded allegations. Practice was verified through documented notifications, staff termination and interviews. Although SECC reported that no inmates were prosecuted in this review period, documentation utilized shows a uniformed format in place to notify the inmate should there be such an occurrence.

# §115.76 – Disciplinary sanctions for staff

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

This standard states that staff shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies. Further, termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual abuse. Disciplinary sanctions for violations of policy (other than actually engaging in sexual abuse) shall consider the nature and circumstances of the act, the staff member's disciplinary history and comparable sanctions imposed for comparable offenses by other staff with similar histories. All terminations and resignations by staff for violations of agency sexual abuse and sexual harassment policies shall be reported to law enforcement and relevant licensing bodies, unless the activity was clearly not criminal.

Missouri Department of Corrections policy SOPD1-8.13 mandates employee discipline as outlined in the standard. Documentation was provided of termination and reporting to law enforcement. Documentation also included a sanction for violation of agency policy as required. Staff interviews showed a good working knowledge of disciplinary sanctions.

#### §115.77 - Corrective action for contractors and volunteers

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

This standard states that any contractor or volunteer who engages in sexual abuse is prohibited from contact with inmates. Reporting to law enforcement and relevant licensing bodies shall occur, unless the activity was clearly not criminal. The facility will also take appropriate remedial measures when considering whether to prohibit further inmate contact in the case of any other agency violation of sexual abuse or sexual harassment.

Missouri Department of Corrections policy SOPD1-8.13 addresses this standard in conjunction with policy D2-13.1. SECC reported no instances of contractor or volunteer sexual misconduct during the review period. Interviews confirmed training on this matter. Policy and interviews addressed the remedial measures in place should there be an occurrence.

#### §115.78 – Disciplinary sanctions for inmates

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

This standard has 7 sections. Part (a) states that inmates shall be subject to disciplinary sanctions through a formal disciplinary process following administrative or criminal findings of inmate-on-inmate sexual abuse. Part (b) outlines that sanctions shall be commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories. Part (c) prescribes that an inmate's mental disabilities or mental illness shall be considered in the disciplinary process and when issuing sanctions. Part (d) states that the facility shall consider whether to require the offending inmate to participate in therapy, counseling or interventions as a condition of access to programming or other benefits. Part (e) states that the agency may discipline an inmate for sexual contact with staff only upon finding that the staff member did not consent. Part (f) addresses disciplinary actions and reports of sexual abuse in good faith. Reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if the investigation does not establish substantiation. Part (g) gives the agency discretion to prohibit all sexual activity between inmates and issue disciplinary action upon determination that the activity was not coerced.

Missouri Department of Corrections policy SPOD1-8.13 outlines disciplinary sanctions and language of the standard. Mental Health notifications are forwarded prior to disciplinary hearing, with staff input noted. An issued directive further addresses the procedure. SECC reported no instances of inmate on staff sexual abuse/contact.

Documentation of disciplinary sanctions, hearings with mental health input and staff interviews confirmed adherence to this standard.

# §115.81 – Medical and mental health screenings; history of sexual abuse

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

This standard states that prior sexual abuse victims and perpetrators (whether abuse or victimization occurred in an institutional setting or in the community) shall be offered a follow-up meeting with a mental health practitioner within 14 days of intake screening. If sexual victimization is identified at screening, a follow-up with a medial practitioner shall also occur within 14 days. Any information related to sexual abuse victimization or abusiveness that occurred in an institutional setting is strictly limited to medical and mental health practitioners and other staff as necessary for security and management decisions. The standard further directs medical and mental health practitioners to obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting.

Missouri Department of Corrections policy IS11-32 addresses the screening process for both those that have experienced prior sexual victimization and those that have perpetrated sexual abuse, whether occurring in an institutional setting or in the community. Follow-up is conducted within 14 days of intake. SECC notes 100% compliance in both areas. Policy IS11-32 also addresses the need to notify case management staff to ensure management decisions. This is further noted on the Mental Health consent form.

Practice was confirmed though assessment reports and lists, mental health notes/reports and staff interviews.

#### §115.82 – Access to emergency medical and mental health services

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

This standard states that inmate victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services. Security staff first responders shall take preliminary steps to protect the victim pursuant to 115.62 and shall immediately notify the appropriate medical and mental health practitioners of the abuse when they are not on duty at the time of the report. Inmate victims of sexual abuse shall be offered timely information about and timely access to sexually transmitted infections prophylaxis in accordance with professional standards of care and when medically appropriate. Treatment services shall be provided to the victim without cost regardless if the victim names the abuser or cooperates with the investigation.

Missouri Department of Corrections policy SOPD1-8.13 addresses timely services to emergency medical treatment and security staff first responders. The institutional Coordinated Response also addresses this protocol. Mental Health staff is on call and shall respond within 2 hours per the coordinated response. The Chaplain currently provides crisis intervention services. The institution offers 24 hour medical care with access to outside hospital SANE/SAFE exams. Treatment services are provided at no cost and consistent with the community level of care.

Documentation of mental health logs/ notes/referrals, Corizon PREA assistance/support and staff interviews support practice. SECC reported no inmate-on-inmate sexual abuse in the review period. However, documentation from December 2014 (investigation ongoing through 2015) provided proof that post-exposure prophylaxis was offered to the victim.

# §115.83 – Ongoing medical and mental health care for sexual abuse victims and abusers

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

This standard has 8 sections, with d and e being non-applicable to an all-male facility. The standard states that the facility shall offer medical and mental health evaluations and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility. Evaluations and treatment of such victims shall include follow-up services, treatment plans and referrals for continued care upon the inmate's departure from the facility. Services provided by the facility shall be consistent to the community level of care. Inmate victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections. Treatment will be provided at no cost regardless whether the victim names the abuser or cooperates with the investigation. The standard further states that all prisons attempt to conduct a mental health evaluation and offer treatment (if appropriate) to all known inmate-on-inmate abusers within 60 days of learning of abuse history.

Missouri Department of Corrections SOPD1-8.13 provides that medical and mental health evaluation/services/treatment is provided to inmates who have been sexually victimized. Additionally, the perpetrator will be assessed within 60 days. Policy further dictates that these services will be consistent with the community level of care. There is no cost for treatment. SECC had no referrals for continued care this review period, although policy outlines guidance for such. It should be noted that SECC provided services on site upon transfer from another facility. This practice shows compliance with the spirit of this standard. SECC had no instances of STD testing of offenders during the review period. However, Corizon protocol outlines procedure should the need arise.

Staff interviews and documentation of medical and mental health records provide further proof of standard practice. However, it should be noted that a perpetrator's mental health referral was completed beyond 60 days of date of incident and conclusion of report. The disciplinary process did include mental health assessment with a focus on 3/5/15 (date of incident). The investigation was concluded on 5/19/15, with a disciplinary violation delay and final conclusion on 6/23/15. The recommendation at the time of conviction included "refer to mental health for assessment/therapy". The referral was completed on 9/8/15. This auditor concludes that SECC's attempt was a good faith effort and is in compliance with the standard.

#### §115.86 – Sexual abuse incident reviews

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

This standard states that a facility shall conduct sexual abuse incident reviews at the conclusion of every sexual abuse investigation, including allegations that have not been substantiated, unless determined unfounded. The review shall ordinarily occur within 30 days of the investigation's conclusion. The review team shall include upper-level management officials, with input from line supervisors, investigators, and medical or mental health professionals. Part (d) mandates that the review team shall (1) consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse. (2) Consider whether the incident or allegation was motivated by race or ethnicity, gender identity, status or perceived status, gang affiliation, or other facility group dynamics. (3) Examine the area of the facility where the incident allegedly occurred, assessing physical barriers that may enable abuse. (4) Assess the adequacy of staffing levels. (5) Assess monitoring technology. (6) Prepare a report of its findings including, but not limited to determinations made pursuant to 1-5, and any recommendations for improvements. Reports will be submitted to the facility head and PREA compliance manager. The standard further states that the facility shall implement the recommendations for improvements, or documents it's reasoning for not doing so.

Missouri Department of Corrections policy SOPD-8.13 incorporates direct language of the standard. Documentation of debriefings notes requirements set forth in (d), with PREA AUDIT: AUDITOR'S SUMMARY REPORT 26

recommendations of corrective action. Documentation provided implementation of corrective action issued via memorandum. Staff interviews confirm further compliance

#### §115.87 - Data Collection

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

□ Does Not Meet Standard (requires corrective action)

This standard states that the agency shall collect accurate, uniform data for every allegation of sexual abuse using a standardized instrument and set of definitions. The data collected shall include, at a minimum, necessary data to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice. The agency shall aggregate the data at least annually. It shall also maintain, review and collect data as needed from all available incident-based documents. Parts (e) and (f) address private facilities and are not applicable.

Missouri Department of Corrections policy SOPD1-8.13 outlines procedure in detail. Investigations are designed to capture relevant data. All information is maintained. MDOC utilizes the COIN system to track, maintain and review relevant data.

#### §115.88 - Data Review for Corrective Action

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

This standard states that the agency shall review data collected pursuant to 115.87 in order to assess and improve effectiveness of sexual abuse prevention, detection, response policies, practices and training. In doing so, the agency shall identify problem areas, take corrective action on an ongoing basis and prepare a report of it's findings and corrective actions for each facility, as well as the agency as a whole. Such reports shall include a comparison of the current year's data and corrective actions with those from prior years and an assessment of the agency's progress in addressing sexual abuse. The agency's report shall be approved by the agency head and made readily available to the public. Specific material from the reports may be redacted when publication of such would present a threat to the safety and security of a facility. However, the agency must indicate the nature of the material redacted.

Missouri Department of Corrections policy SOPD1-8.13 outlines procedure in detail. Documentation of the annual report denotes all required language. It is approved by the Department Director per policy. The report is available on the Department's website <a href="http://doc.mo.gov/OD/PREA.php">http://doc.mo.gov/OD/PREA.php</a>. Further compliance with standard was verified through staff interviews.

It is recommended that the agency prepare the 2015 Annual Report for placement on the website.

§115.89 – Data Storage, Pi	ublication, and Destruction			
☐ Exceeds Standard (substantially exceeds	ds requirement of standard)			
X Meets Standard (substantial compliand for the relevant review period)	e; complies in all material ways with the standard			
☐ Does Not Meet Standard (requires corr	rective action)			
securely retained. The agency shall make	ensure the data collected pursuant to 115.87 is the data readily available to the public at least ed. The collected data shall be maintained for at least tion.			
maintained by the investigation unit. Police the Department's website as noted above.	y D1-8.1 requires that all investigative materials be cy SOPD1-8.13 provides for public viewing through Material is edited. A review of the website is retained per standard, as evidenced by the			
AUDITOR CERTIFICATION:				
The auditor certifies that the contents of the report a no conflict of interest exists with respect to his or her review.				
Jan Martin	March 25, 2016			
Auditor Signature Date				