PREA AUDIT: AUDITOR'S SUMMARY REPORT

ADULT PRISONS & JAILS

NATIONAL PREA RESOURCE CENTER

BJA Bureau of Justice Assistance U.S. Department of Justice

Name of facility: Columbia River Correctional Institution	
Physical Address: 2605 State Street Salem, Oregon, 97301	
Date report submitted: 1-14-15	
Auditor Information	
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Date of facility visit: August 20-22	
Facility Information	
Facility mailing address: (if different from above)	
Telephone number:	
The facility is: ☐ Military ☐ County ☐ Federal ☐ Private for profit ☐ Municipal ☒ State ☐ Private not for profit	
Facility Type: ☐ Jail ☒ Prison	
Name of PREA Compliance Manager: Elizabeth LaCarney E-Mail Address: Elizabeth.A.LaCarney@doc.state.or.us	Title: PREA Compliance Manager Phone Number: 503-280-6646 ext. 208
Agency Information	
Name of agency: Oregon Department of Corrections	
Governing authority or parent agency: (if applicable)	
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Name: Ericka Sage	Title: PREA Coordinator
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AUDIT FINDINGS

NARRATIVE:

A PREA Audit was conducted at the Columbia River Correctional Institution (CRCI) on August 20-22, 2014. The audit was conducted by lead auditor, La Cole Archuletta, assisted by Mary Ann Aldrich and Travis Brubaker who are also certified auditors.

Prior to the on-site audit at the CRCI, the pre-audit questionnaire and all documents that were provided were reviewed. Department level staff were interviewed which included Leonard Williamson, Agency Head Designee, Darryl Borello, Human Resources, and Jamie Breyman, Contract Administrator.

On August 20, 2014, CRCI was toured. PREA Compliance Manager, Elizabeth La Carney conducted the tour. The entire facility was toured which included the housing units, administration units, medical, industry areas, control center, intake and recreation area. During the tour, random inmates and staff were talked with about their understanding of the PREA standards and/or facilities PREA policies. For the audit, interviewed included sixteen inmates and twenty-two random and specialized staff. More in depth tours of certain areas of the facility were done on August 21-22, 2014. Interviews were conducted on-site with staff and inmates.

On August 21, 2014, a welcome meeting with management staff including the PREA Compliance Manager, Elizabeth La Carney and Superintendent, Rick Angelozzi was held.

Additional documents were reviewed and requested throughout the audit and a few after the audit.

At the conclusion of the on-site visit an exit meeting was held to discuss the audit findings.

The facility provides PREA education which includes a video, pamphlet and posters with information on how to report sexual abuse and sexual harassment. The information is provided in both English and Spanish. It should be noted that the video was developed by ODOC and is well done.

There were four standards that the facility received corrective actions which have now been corrected and the facility is compliant. There were also four standards where the facility exceeded the standard.

DESCRIPTION OF FACILITY CHARACTERISTICS

Columbia River Correctional Institution (CRCI) is a 595-bed minimum security facility which was constructed on a 26-acre site in Northeast Portland which opened in 1990. Located in the largest metropolitan area of the state, this facility is focused on alcohol and drug treatment, work programs, and preparing inmates for return to the community.

The facility provides a full range of correctional services and programs which directly support the Department of Corrections primary mission. These include:

(1) A 50-bed residential Alcohol and Drug Treatment Program (Turning Point), operating under a contract with a private provider.
(2) A 61-bed residential AIP Cognitive Restructuring Program (Westcare), operating under a contract

with a private provider.

(3) Basic adult education, life skills and job readiness training through work crews and cottage industries.

(4) The institution employs 120 FTE general funded staff and approximately 50 staff provided under contracted services. CRCI has strong "community oriented" programming for inmates and utilizes a large number of community volunteers in its programs.

(5) Inmates residing at Columbia River Correctional Institution are required and expected to work. Inmates work in many public agencies, organizations and private businesses throughout the greater Tri-County area.

CRCI is a two story structure designed to separately house 595 male inmates in dormitory style housing units. One 50-bed dormitory has been designated as residential treatment center where inmates are involved in an intensive Alcohol and Drug treatment program. This unit is self-contained, providing inmates in treatment with the opportunity to successfully complete the program without unnecessary distractions from the general inmate population. The facility focuses on the development of work habits and skills necessary to obtain and maintain employment.
The building was constructed to be cost effective, durable and low maintenance. The metal roofing and siding materials are long lasting and low maintenance. The flat roofs are constructed with a single ply roofing and rock ballast. The exterior wall material provides insulation for the building and a durable, low maintenance surface. The concrete wainscot provides a strong surface at ground level.

The interior was designed to be open for maximum visibility throughout the main corridor and from within the control center. Natural lighting was used to reduce the need for artificial lighting. The facility uses dormitory style housing for inmates.

In an effort to promote good health and well being, inmates are encouraged to take part in many recreational and other outdoor activities offered to them every day. Inmates are allowed access to the Recreation Yard three times per day for recreational purposes.

Number of standards exceeded: 4

Number of standards met: 39

Number of standards not met: 0

115.11	ZERO TOLERANCE OF SEXUAL ABUSE AND SEXUAL HARASSMENT; PREA COORDINATOR

☐ 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)

Auditor comments, including corrective actions needed if does not meet standard

The agency has a PREA policy, 40.1.13 which emphasis zero-tolerance. ODOC has a state-wide PREA coordinator and a compliance manager is assigned to the facility. The compliance manager coordinates the facility's efforts to comply with the PREA standards.

The facility provided an agency organization chart and a facility organization chart which illustrated the hierarchy and who the PREA Coordinator and PREA Compliance Manager report to. The job description for the PREA Compliance Manager was also provided.

115.12	CONTRACTING WITH OTHER ENTITIES FOR THE CONFINEMENT OF INMATES

☐ 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)

Auditor comments, including corrective actions needed if does not meet standard

The agency's contracts for the confinement of inmates were provided and they meet the standard.

There are two contracts that the department contracts for the confinement of inmates and the contracts contain the requirement to comply with the PREA standards.

115.13	SUPERVISION AND MONITORING

☐ 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)

Auditor comments, including corrective actions needed if does not meet standard

A staffing plan was provided and it met the components of the standard. The coordinator stated that she was able to tour and meet with the facilities during their pre-audits. She reviewed all components of the facilities physical plan, composition of their inmate population, the number and placement of supervisory staff, institutional programs and the prevalence of substantiated and unsubstantiated incidents of sexual abuse. The facility has a camera mapping plan.

115.14	YOUTHFUL INMATES

☐ 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)

Auditor comments, including corrective actions needed if does not meet standard

No youthful inmates are housed at the facility. The facility provided House Bill 4037 to support that youthful inmates are not held in any ODOC facility. HB 4037 states "When a person under 18 years of age at the time of committing the offense and under 20 years of age at the time of sentencing is committed to the Department of Corrections under ORS 127-707, the Department of Corrections shall transfer the physical custody of the person to the Oregon Youth Authority as provide in ORS 420.011."

115.15	LIMITS TO CROSS GENDER VIEWING AND SEARCHES

☐ 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)

Auditor comments, including corrective actions needed if does not meet standard

The agency does not allow cross-gender strip searches or cross-gender visual body cavity searches. Body cavity searches are only conducted by medical staff.

The facility provides inmates the ability to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing them.

Cross-gender pat search training was recently implemented and security staff were trained.

There was one toilet without a door. The facility was going to ensure the door was replaced.

The facility said there had not been any incidents of where cross gender viewing and visual body cavity searches were done.

The facility does not house female offenders, therefore standards 115.15 (b) 1 through (b) 4 and 115.15 (c) 2 are not applicable.

The facility provided PREA policy 40.1.13 and Inmate Searches Rule 291-041-0020 as documentation and a Memo that CRCI staff had received transgender and intersex pat search training.

PREA policy 40.1.13 and Basic Search Practices Lesson plan supported that staff are trained to not examine transgender and intersex inmates to determine genital status.

An audio alert was installed a few weeks before the audit. The audio alert was used to announce the presence of opposite gender staff when they entered the unit. Both staff and inmates were aware of what the audio alert meant. Inmates commented about the audio alert being used throughout the night while they were sleeping. Female staff working the graveyard shift announces their presence using the audio alert. This was discussed with the facility staff and the PREA Coordinator said that there wasn't an alternative method that could be used and still meet the requirement outlined by DOJ.

CRCI is also working on an alternative for inmates with disabilities to ensure that they have an equal opportunity to be notified that an opposite gender staff member is entering the housing unit. An additional system to supplement the verbal cross-gender announcement in units with inmates who are deaf or hard of hearing is being looked into.

115.16	INMATES WITH DISABILITIES AND INMATES WHO ARE LIMITED ENGLISH PROFICIENT

☐ 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)

Auditor comments, including corrective actions needed if does not meet standard

The facility provides a PREA informational pamphlet to inmates after their intake. The pamphlet

is available in English and Spanish. Inmates with disabilities and inmates who are limited English proficient can be provided with access to interpreters or staff who will provide the information in a language or format so that the inmate can understand the information being provided.

Staff members who speak other languages are available and inmates can also be provided access to an outside interpreter. ODOC contracts with outside agencies to provide interpretive and translation services to inmates.
- For ADA services such as sign language, inmates are provided an interpreter as well as a TTY machine being available.
- Language translation is also available for inmates who are limited English proficient. CRCI provided a list of staff interpreters who speak Spanish.

115.17	HIRING AND PROMOTION DECISIONS

☒ 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)

Auditor comments, including corrective actions needed if does not meet standard

The agency conducts background checks for new employees and on all promotions. In addition, the background checks are to be conducted at least every five years for current employees and contractors.

The facility provided policy 20.4.2 Applicants for DOC positions with prior criminal convictions and 20.4.5 Recruitment and selection process and supplemental application form that is completed by new hires and for promotions. The facility provided a list of LED clearance background checks for employees, contractors and volunteers to demonstrate that background checks were conducted. Files were reviewed that demonstrated compliance with the standard as well.

The PREA policy 40.1.13 states that ODOC shall conduct criminal background records checks at least every five years of permanent, temporary employees and contractors, volunteers and interns. Samples of applicants and employee background checks were reviewed and all complied with the PREA standard.

Random checks were made and background checks on the individuals were conducted less than nineteen months ago.

In addition, a random review of current positions on the ODOC website showed that the agency has a statement that ODOC complies with the federal PREA which prohibits ODOC from hiring, or promoting anyone who has engaged in, been convicted of, or been civilly or administratively adjudicated for engaging in sexual abuse. ODOC informs applicants that a background check will be conducted and any incident of substantiated allegations of sexual abuse or sexual harassment will be considered whether to hire or promote anyone who may have contact with inmates.

115.18	UPGRADES TO FACILITIES AND TECHNOLOGY

☐ 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)

Auditor comments, including corrective actions needed if does not meet standard

No substantial expansions or modifications were made since August 20, 2012.

115.21	EVIDENCE PROTOCOL AND FORENSIC MEDICAL EXAMINATIONS

☐ 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)

Auditor comments, including corrective actions needed if does not meet standard

Once it is determined that a sexual abuse incident occurred, the Sexual Assault Response Team (SART) Incident Unit is notified and the Oregon State Police are notified. The Oregon State Police are statutorily mandated to investigate crimes within the facility.

The facility follows the OIC PREA Checklist which is attached to the PREA policy. The checklist outlines maintaining crime scenes and chain of evidence, notifications, separation of the victim and perpetrator, time frame for transporting an inmate to a designated medical facility for treatment, examination, collection of forensic evidence, testing for sexually transmitted diseased and referral for counseling. Behavior Health Services (BHS) follow protocols for sexual abuse policy 40.1.13. Interviews with BHS staff and the PREA Coordinator verified that medical and mental health services are offered at no financial cost to the inmate.

Inmates are offered forensic medical exams off site for incidents reported that occurred in the last 96 hours. Inmates are transported to the Salem Hospital for a forensic medical exam which is conducted by a sexual assault nurse examiner (SANE). The SANE will ensure an advocate is offered to the inmate, and if the inmate requests, an advocate will be present. Inmates are provided the same protection and support as a community based patient throughout the entire exam. According to the PREA Coordinator, the investigatory interview is conducted at the hospital.

If it is over 96 hours since the incident, the inmate will work with BHS and medical for an evaluation and determination of on-site medical evaluation or if transported to a medical facility for treatment, examination and documentation. The inmate is offered testing for sexually transmitted infections and referred to BHS for counseling.

CRCI refers offenders for forensic medical exams to one of three Portland hospitals. (Portland Adventist Hospital, Emanuel Hospital or Oregon Health and Science University.) Adventist Hospital was contacted and they said they call the SANE in when needed. The SANE Coordinator at Oregon Health and Science University Hospital was contacted. She said there wasn't a written agreement with ODOC but inmates can be brought in for a forensic medical exam.

The process requires a victim advocate from the District Attorney's office to be paged to respond to provide advocacy services for victims who want to make a report with law enforcement. An advocate with the Portend Women's Crisis Line is contacted for those who do not want to make a report.

In addition, the Portland Women's Crisis Line can be called to respond in the event the District Attorney's advocate is not available.

This standard was initially determined not to be compliant. Corrective action was implemented which required the agency to provide a victim services which include an advocate that will be offered during forensic exams, investigatory interview and as follow up for emotional support.

ODOC was working on a memorandum of understanding with Lifeways, Inc. to provide services for victims of sexual abuse. However, ODOC was awarded a grant and it will allow them to hire a full-time victim advocate. A phone number where inmates can call the victim advocate will be established. Inmates will be provided contact information on how to report sexual abuse or sexual harassment incidents. The new staff person will also provide victim advocacy during sexual abuse investigations as well as crisis intervention follow-up.

A victim advocate was hired with federal PREA grant funds. The PREA Coordinator verified that all staff and inmates were notified of the victim advocate services, contact information to receive or request services and role of the advocate. The inmates were notified through the inmate news bulletin and the information will be available in the inmate handbook, pamphlet and posters. The victim advocate will also be available for emotional support or accept reports through the use of a dedicated 800 number as well as accepting written reports of sexual abuse or sexual harassment. The victim advocate will ensure community victim advocates are available to accompany and support the victim through the forensic medical examination process and investigatory interviews and shall provide emotional support, crisis intervention, information and referrals if a community victim advocates from a rape crisis center is not available.

ODOC did the following to comply: ODOC received a federal PREA grant and a PREA Advocate position was hired and will ensure there is 24/7 response capability for community victim advocates to respond to institutions or a hospital for forensic medical exams to support, investigatory interviews or follow up for emotional support to inmates victims of sexual abuse.

115.22	POLICIES TO ENSURE REFERRALS OF ALLEGATIONS FOR INVESTIGATIONS

☐ 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)

Auditor comments, including corrective actions needed if does not meet standard

The facility conducts the initial investigations to determine if the allegations are criminal or administrative. If the elements of the allegation are administrative, it is investigated by the Special Investigation Unit Inspectors.

CRCI provided a log of their PREA incidents.

If it is determined to be criminal, it is referred to the Oregon State Police for investigation. The responsibilities of both the agency and the Oregon State Police are outlined in the PREA policy which is available on the agency's website.

ODOC's investigation reporting process is described in the PREA policy 40.1.13, and investigations policy 70.1.4 and flow charts which were provided. An example of an administrative investigation was proved to demonstrate compliance with the standard. An example of a criminal investigation was not provided. There was a sexual abuse report which was still under investigation by the Oregon State Police.

115.31	EMPLOYEE TRAINING

☒ 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)

Auditor comments, including corrective actions needed if does not meet standard

PREA training is required by policy. PREA policy 40.1.13. Employees are trained in all the required elements of the standard. The training curriculum was reviewed to verify that it met all the requirements. Employees are required to demonstrate an understanding of the training they received by answering questions during the training. The training has information about male and female inmates.

There is a 2-hour on-line training that all employees need to pass. On-line PREA lesson plan was provided. Examples were provided that all employees had been trained to demonstrate that the facility complied with the standard. CRCI provided a training roster to demonstrate compliance with the standard. Additionally, employees interviewed were able to recall required topics within the training.

New employees are required to attend an in-person basic PREA training for one hour and then take the two hour on-line PREA training. All employees must answer all questions correctly to pass the training.

PREA standard 115.31 (c) requires the agency to provide each employee with refresher training every two years. ODOC requires in PREA policy 40.1.13 that employees receive training on inmate sexual abuse and sexual harassment every two years as well as provides refresher information on current sexual abuse and sexual harassment polices on years when trainings are not conducted.

115.32	VOLUNTEER AND CONTRACTOR TRAINING

☐ 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)

Auditor comments, including corrective actions needed if does not meet standard

Contractors and volunteers are trained in all the required elements. Contractors receive the same training as employees. Contractors are required to demonstrate an understanding of the on-line training they received by answering questions.

Volunteers are required to sign an acknowledgement that they have an understanding of all required

elements and that they have reviewed the PREA policy prior to entry into the facility.

Documentation was provided to confirm that contractors and volunteers received the required training. Also, in interviews, contractors and volunteers were able to recall required topics within the training.

115.33	INMATE EDUCATION

☐ **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)**

Auditor comments, including corrective actions needed if does not meet standard

Inmates go through an orientation which includes a video about the agencies zero-tolerance policy, their right to be free from retaliation and ways to report incidents of sexual abuse and sexual harassment. The video is available in Spanish. The inmates also receive a PREA pamphlet. Verification that inmates received PREA education was supported in inmate interviews as well as in reviews of inmate documentation.

Supporting documentation was provided to verify that inmates received information explaining ODOC's zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment

Posters were viewed throughout the facility which provided information on how to report to the Inspector General or Governor's office.

Inmates are provided the information through a video. It meets the requirements of the standard. The video is also available in Spanish. Inmates can be offered an interpreter or translator if needed. Contracts for services were provided. The facility has access to language translation providers and interpreter services. TTY machines are available at the facility.

115.34	SPECIALIZED TRAINING: INVESTIGATIONS

☐ 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)

Auditor comments, including corrective actions needed if does not meet standard

Investigators received specialized training. The lesson plan met all criteria required by the standard. Agency policy states that Investigators will be "offered" additional training. Recommend changing "offered" to "required".

Documentation of course rosters to support that investigators received the specialized training were provided.

PREA policy 40.1.13 requires investigators receive specialized training.

115.35	SPECIALIZED TRAINING: MEDICAL AND MENTAL HEALTH CARE

☐ 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)

Auditor comments, including corrective actions needed if does not meet standard

The facility Health Services and Behavioral Health Services staff receive training. The staff were able to demonstrate that they had been trained in each of the elements of the standard. Their specialized training offered to medical and mental health is extensive.

Documentation of course rosters were provided that all medical and mental health staff have received the required specialized PREA training.

PREA policy 40.1.13 requires that health services and behavioral health services receive specialized training.

Standard 115.35 (b) is not applicable. ODOC does not conduct forensic exam on site.

115.41	SCREENING FOR RISK OF VICTIMIZATION AND ABUSIVENESS

☐ 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)

Auditor comments, including corrective actions needed if does not meet standard

Inmates sentenced to the ODOC, receive an initial PREA assessment for sexual victimization at the agency's intake facility. When an inmate is received at the facility, a screening for risk of being sexually vulnerable is conducted using the previous PREA assessment, talking with the inmate and looking to see if there is new information.

During the screening process with Health Services, inmates are required by Health Services Section Policy and Procedure #P-E-02 to query inmates regarding abuse/abusive history. Inmates are asked to complete a form which has two PREA related questions on it. (Have you ever been sexually abused? Have you ever been sexually abusive to others?) Recommend that the process be more specific to sexual abuse/vulnerability and sexually abusive/physical abusive behavior and that the process of what to do with the information is explained in the policy.

An inmate is reassessed when warranted based upon a referral, request, and incident of sexual victimization or receipt of additional information that bears on the inmate's risk of being sexual victimized. This subsection of the standard also requires an inmate's risk level shall be reassessed when warranted due to a referral, request, incident of sexual abuse or receipt of additional information that bears on the inmate's risk of sexual abusiveness. ODOC says that anytime an inmate is convicted of an internal rule violation or investigated for being sexually abusive it is referred for investigation. They are designated based off the findings if they are sexually vulnerable (victim) or sexually abusive (predator) in their offender management system.

For sexual abusiveness, the PREA Intake Victimization Screening tool is used to ask inmates about convictions of violent crimes and if they have ever been convicted of a sex offense against an adult or child. Inmates who have conviction for a sex offense are referred to BHS for an additional evaluation. Within 30 days following the initial screening the inmate meets with an institutional intake counselor who then would review the inmates file to determine if any new information exists that would warrant a designator. The intake counselor then completes an Intake PREA Intake Victimization Screening Tool (IVST) Follow-up form that includes abusiveness screening. ODOC is in the process of a research project to determine additional factors for the potential of abusiveness and was recently awarded a PREA grant that would assist in development of an automated risk assessment tool.

Screening for risk of sexual victimization and abusiveness standard is in PREA policy 40.1.13.

Random reviews of assessments demonstrated compliance. Also, transgender/intersex assessments reviewed were completed every 6 months.

A memo was provided from the PREA Coordinator that inmates are not detained solely for civil immigration purposes.

115.42	USE OF SCREENING INFORMATION

☐ 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)

Auditor comments, including corrective actions needed if does not meet standard

The assessment information is added to an overall computerized system that considers risk, vulnerability and predatory behavior. Then a facility staff member uses the computerized system to determine housing, bed, work, education and program assignments for inmates.

Inmates who identify as transgender or intersex are reassessed at least twice a year. PREA policy 40.1.13 requires that in deciding housing and programming assignments for transgender or intersex inmates, ODOC shall consider on a case-by-case basis whether a placement would ensure the inmate's health and safety. A transgender or intersex inmate's own view with respect to his or her own safety shall be given serious consideration is also required in the policy.

Transgender or intersex inmates have the ability to shower separately from other inmates. Single showers are available.

115.43	PROTECTIVE CUSTODY

☐ 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)

Auditor comments, including corrective actions needed if does not meet standard

Policy 40.1.13 PREA Elimination Act states that inmates for high risk for victimization shall not be placed in administrative housing unless an assessment of all available alternatives determines

that there is no available alternative means of separation from likely abusers. Inmates at high risk for sexual victimization or who report sexual abuse are interviewed within 24 hours and if not comfortable with being held in protective custody can be moved to the infirmary until a scheduled move to another facility can be arranged. Through interviews with staff it was learned that policy was being followed.

115.51	INMATE REPORTING

☐ 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)

Auditor comments, including corrective actions needed if does not meet standard

The agency provides multiple ways for inmates to report sexual abuse and sexual harassment. The different ways are to write to the Governor's office, hotline to the Inspector General's Office, write an inmate communication, report to a staff member, report in writing, and ask a family member to contact ODOC.

PREA policy 40.1.13 says that staff shall accept reports made verbally, in writing, anonymously and from third parties and shall promptly document any reports. Kites can be anonymously reported internally. Anonymous reports can be made to the Governor's Office by being sent out under legal mail.

ODOC was not compliant with this standard and was required to develop a process and policy for an inmate to report sexual abuse or sexual harassment anonymously. ODOC established an agreement with the Governor's Office of Constituent Services to receive reports anonymously. Inmates can call or write to the Governor's Office of Constituent Services. If the inmate requests to remain confidential, all personal identifiable information will be redacted prior to scanning into their database or before forwarding the information to OCDOC PREA Coordinator. Once the ODOC PREA Coordinator receives the information, she will refer it for investigation. Information allowing the inmate to remain anonymous upon request was on the PREA website and distributed to by positing a notice and included in the inmate newsletters. The phone number and address of the Governor's Office of Constituent Services is already available to inmates in posters and the PREA inmate pamphlet; however the information about how to remain anonymous will be added to these materials.

115.52	EXHAUSTION OF ADMINISTRATIVE REMEDIES

☐ 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)

Auditor comments, including corrective actions needed if does not meet standard

Policy 291-109-0200 states grievances alleging sexual abuse must be submitted to the functional unit grievance coordinator. In addition the policy states the grievance coordinator may not refer a grievance alleging sexual abuse to a staff member who is the subject of the grievance.

CRCI said that there were no grievances alleging sexual abuse or sexual harassment received during the audit period. They also reported that there were also no emergency grievances.

115.53	INMATE ACCESS TO OUTSIDE CONFIDENTIAL SUPPORT SERVICES

☐ 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)

Auditor comments, including corrective actions needed if does not meet standard

ODOC provides inmates a pamphlet during orientation that lists advocacy groups they can call or write to. The pamphlet states that the phone numbers will not be monitored by ODOC but may be subject to monitoring/recording from receiving organizations.

Subsection (c) of the standard requires that the ODOC maintain or attempt to enter into a MOU or other agreement with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse. Documentation provided indicates that Lifeways, Inc. will provide these services once the draft is signed. The intent is for Lifeways Inc. to provide ODOC inmates an option for reporting sexual abuse and sexual harassment by phone or in writing, advocacy during a sexual abuse investigation and crisis intervention follow up.
This standard initially received a corrective action to allow ODOC the opportunity to finalize the MOU with Lifeways. After the audit was conducted, ODOC was awarded a PREA grant on September 3, 2014, and will not pursue the MOU with Lifeways, Inc.

As part of the federal PREA grant that was awarded, ODOC hired a victim advocate for 24-months to establish victim advocacy services and provide victim advocacy for inmates over the phone. The victim advocate will have a dedicated phone number that inmates can call. The calls will be confidential. Inmates will be able to write to the victim advocate and the victim advocate contact information will be made available on brochures and posters.

In addition, the victim advocate will work closely with the Sexual Assault Task Force and will work on developing agreements with outside victim advocate organizations.

115.54	THIRD-PARY REPORTING

☐ 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)

Auditor comments, including corrective actions needed if does not meet standard

ODOC provides several methods for third-parties to report on behalf of an inmate. ODOC provides family and friends of inmates with a visiting room pamphlet. Options to report on behalf of an inmate include calling the Inspector General's Office or Governor's Office. A recommendation was made to make the family and friends PREA pamphlet available in Spanish, which ODOC now provides.

Other documentation provided included: PREA Staff Reporting Form and PREA Web page. Reporting

information is available on the ODOC Website which includes calling the Inspector Genera's toll-free number.

115.61	STAFF AND AGENCY REPORTING DUTIES

☐ 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)

Auditor comments, including corrective actions needed if does not meet standard

PREA policy 40.1.13 meets the criteria of the standard. During interviews staff were aware of their responsibility to report. Staff understands they are not to reveal any information to anyone other than to those who have a need to know. Medical/Mental Health staff also understands their responsibilities to report to include the limitation of confidentiality. Staff interviews confirmed their knowledge to report allegations of sexual abuse and sexual harassment.

CRCI provided a blank copy of the ODOC staff reporting responsibility form to show compliance with the standard.

PREA policy 40.1.13 states that PREA information collected during investigations or intake assessments is considered sensitive and should only be shared with those with need to know. Best practice would be to add PREA reports to the policy to ensure the report is kept confidential and only shared with those with a need to know.

115.62	AGENCY PROTECTION DUTIES

☐ 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)

Auditor comments, including corrective actions needed if does not meet standard

Staff interviews revealed their knowledge to take immediate action to protect inmates upon learning an inmate is subject to risk of sexual abuse.

The facility reported on their pre-audit questionnaire that there was one time where an inmate was subject to substantial risk of imminent sexual abuse and that immediate protective measures were taken.

The standard is covered in CRCI's Operations Division Responding to Sexual Abuse and Sexual Harassment Allegations (PREA), Procedure 39.

115.63	REPORTING TO OTHER CONFINEMENT FACILITIES

☐ 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)

Auditor comments, including corrective actions needed if does not meet standard

Upon receiving an allegation that an inmate was sexually abused while confined at another facility, the PREA compliance manager that received the allegation shall notify the PREA compliance manager or appropriate official of the agency where the alleged abuse occurred within 72 hours after receiving the allegation and document the notification. An investigation is pursued upon notification of the report.

PREA policy 40.1.13 provided as documentation for this standard. Policy states that upon receiving an allegation that an inmate was sexually abused while confided at another facility, the PREA compliance manger that received the allegation shall notify the PREA compliance manger or appropriate official of the agency where the alleged abuse occurred within 72 hours after receiving the allegation and document the notification.

115.64	STAFF FIRST RESPONDER DUTIES

☐ 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)

Auditor comments, including corrective actions needed if does not meet standard

The PREA policy 40.1.13 provides an outline of the first responder duties. CRCI's Responding to Sexual Abuse and Sexual Harassment Allegations, Procedure 39 provides facility process and procedures which incorporates all the requirements of the standard. In addition, the OIC PREA Checklist obtains all the baseline facts, timeframes of who to contact as well as evidence collection procedures.

CRCI provided blank forms of their OIC checklist, PREA acknowledgement statement and Staff Reporting Responsibilities for supporting documentation.

Staff interviews conducted proved knowledge of PREA reporting and response procedures.

115.65	COORDINATED RESPONSE

☒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)

Auditor comments, including corrective actions needed if does not meet standard

CRCI has an institutional plan that directs a coordinated response to an incident of sexual abuse that includes notification to specific staff members or facility leaderships. Sexual Assault Response Team (SART) implementation proved they met the standard with their coordinated response. Additionally, sexual assault response team members are provided additional training.

CRCI provided blank copies of the OIC PREA Checklist, Reporting Flowchart and agency response and notification flowchart, and CRCI operating procedures to PREA policy 40.1.13 for respond to sexual abuse and sexual harassment allegations.

115.66	PRESERVATION OF ABILITY TO PROTECT INMATES FROM CONTACT WITH ABUSERS

☐ 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)

Auditor comments, including corrective actions needed if does not meet standard

The agency head designee said that no collective bargaining agreements limits the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending investigation outcomes.

Documentation provided was the Collective Bargaining Agreement between the 2013-2015 State of Oregon Department of Administrative Services and the American Federation of State, County and Municipal Employees. Article 41 Employee Rights refers to investigation allegations of misconduct. This standard was marked as compliant because the section does not limit the agency's ability to remove staff from contact with inmates and allows the agency to discipline and terminate staff and the agency head designee stated that the language will be recommended during labor negotiations when the agreement is renewed next year.

115.67	AGENCY PROTECTION AGAINST RETALIATION

☐ 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)

Auditor comments, including corrective actions needed if does not meet standard

The PREA policy 40.1.13 ensures that offenders and staff who report sexual abuse or sexual harassment or cooperate with these investigations are protected from retaliation by other inmates or staff. A designated staff member is charged with monitoring for retaliation. The PREA compliance manager is responsible for monitoring and acting to remedy any retaliation.

All actions taken to remedy any retaliation by the PREA compliance manager are documented and forwarded to the PREA coordinator and the sexual abuse liaison.

The PREA compliance manager or their designee monitors retaliation for at least 90 days. The monitoring includes periodic status checks.

Interviews with staff proved that they understand the policy and procedure. There was documentation to support that the policy is being followed.

ODOC provides multiple protection measures.

115.68	POST-ALLEGATION PROTECTIVE CUSTODY

☐ 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)

Auditor comments, including corrective actions needed if does not meet standard

Segregated housing only occurs involuntarily if there is a need to protect the inmate when no other alternative housing is available.

CRCI provided PREA policy 40.1.13 which states that inmates at high risk for sexual victimization will not be placed in administrative housing unless an assessment of all available alternatives determines that there is no available alternative means of separation from likely abusers. If a facility cannot conduct such an assessment immediately, the facility may hold the inmate in administrative housing for less than 24 hours while completing the assessment. Hearing Process 291-046-0030 was provided which outlines the process and timeframes if an inmate is placed in involuntarily in administrative housing.

115.71	CRIMINAL AND ADMINISTRATIVE INVESTIGATIONS

☐ 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)

Auditor comments, including corrective actions needed if does not meet standard

The facility Sexual Assault Response Team (SART) responds quickly to all allegations. The Oregon State Police conducts all investigations on cases that appear to be criminal in nature.

ODOC investigate administrative investigations. An administrative report was provided for documentation. It was detailed and included all areas required in this standard. Interviews with specialized staff indicate familiarity with policy and procedures.

Policy 70.1.4 spells out investigative responsibilities and includes a Sexual Abuse Incident Review form. The flow chart attached to policy 70-1-4 explains the process for each type of allegation and identifies who would investigate the allegation.

Different parts of this standard are in the PREA policy 40.1.13, Investigations policy 70.1.4 and Criminal and Administration Handling policy 70-1-3.

ODOC provided PREA specialized training rosters for investigator who conduct investigations at CRCI. As previously noted, the Oregon State Police investigate criminal allegations.

Interviews with specialized staff indicate familiarity with the PREA policy.

An unsubstantiated criminal and an inmate disciplinary administrative investigation were provided to demonstrate compliance with this standard.

115.72	EVIDENTIARY STANDARDS FOR ADMINISTRATIVE INVESTIGATIONS

☐ 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)

Auditor comments, including corrective actions needed if does not meet standard

Oregon Administrative Rule 291-105-0005 imposes no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.

CRCI provided a copy of rule 291-105-0028 conduct of formal hearings on major and minor violations which states that the standards of proof: rule violation(s) shall be found upon proof by a preponderance of the evidence. The term preponderance of the evidence means the greater weight of evidence (51% vs 49%). It is such evidence that when weighted with that opposed to it, has more convincing force and is more probably true and accurate. An inmate disciplinary administrative investigation was provided to demonstrate compliance with the standard.

115.73	REPORTING TO INMATES

☐ 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)

Auditor comments, including corrective actions needed if does not meet standard

Following a sexual abuse investigation, inmates are provided the information required in the standard. The PREA Compliance Manager provides information to the inmate verbally and then documents it using ODOC PREA Reporting to Inmates 115.73 form. A blank copy was provided as the facility reported that there hadn't been any criminal or administrative investigations for sexual abuse that were completed by the facility in the past 12 months.

PREA policy 40.1.13 requires that an inmate allegation of sexual abuse be referred for investigation. Following an investigation, the PREA compliance manage shall inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. Additionally, if the inmate's allegation involved a staff member committing sexual abuse against an inmate, the PREA compliance manager shall inform the inmate on substantiated and unsubstantiated determinations the following: whenever the staff member is no longer posted within the inmate's unit, the staff member is no longer employed at the facility, the agency learns that the staff member has been indicated on a charge related to sexual abuse within the facility; and/or the agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility.

Interviews with SART team members indicate cases are followed up with.

115.76	DISCIPLINARY SANCTIONS FOR STAFF

☐ 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)

Auditor comments, including corrective actions needed if does not meet standard

Policy 20.1.3 Code of Conduct states that inappropriate relationships with inmates could result in appropriate disciplinary action, up to and including dismissal.

PREA policy 40.1.13 under the investigation section states that inmate allegations that a staff member has committed sexual harassment against the inmate will be investigated by the department manager or designee at the institution or location. The Human Resources manager may be part of the interviewing process or the conclusion of the investigation as deemed necessary by the manager. The PREA policy 40.1.13 does not include sanctions for staff involvement for these types of behaviors.

115.76 (d) requires that all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies. The PREA Coordinator provided an example where a staff member had communicated inappropriately with an inmate and the appropriate licensing body was notified of the ODOC investigation.

115.77	CORRECTIVE ACTION FOR CONTRACTORS AND VOLUNTEERS

☐ 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)

Auditor comments, including corrective actions needed if does not meet standard

According to staff, all guidelines apply to contract staff and volunteers alike. PREA policy 40.1.13 requires that an inmate allegation against staff (employees, contract service providers and volunteers) that has committed sexual harassment will be investigated by the department manager or designee at that institution or location.

The Investigation policy 70.1.4 was also provided for compliance with this standard. It identifies Oregon State Police as having the primary authority in certain types of criminal investigations such as sexual assault and official misconduct and other employee misconduct constituting criminal behavior. Contractors and volunteers can be compelled to answer questions relating to matters under investigation.

ODOC provided a case example to prove that they prohibit employees, contractors and volunteers from contact with inmates, report the allegations to law enforcement and also report the information to relevant licensing bodies when applicable. ODOC will also add this standard into the PREA policy 40.1.13.

115.78	DISCIPLINARY SANCTIONS FOR INMATES

☐ 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)

Auditor comments, including corrective actions needed if does not meet standard

Oregon Administrative Rule 291.105-0005 establishes disciplinary action for inmates who violate and are found guilty for violating inmate on inmate sexual assault, sexual coercion, non assaultive sexual

activity and sexual solicitation. Inmates receive a handbook for rules of prohibited conduct.

Administrative Rule 291-105-0026 hearing officers responsibilities (7) – (9) include Behavioral health Services being notified when inmates with mental health, developmental disability issues, or inmates that have engaged in self-harm activities or suicide attempts are placed in disciplinary segregation or are scheduled for a disciplinary hearing. They determine whether an evaluation is submitted to hearing staff and if so it will determine if the inmate is able to understand the charges and the hearing process, if sanctions should be modified or if sanction for the misconduct contraindicated and if the inmate's mental health status contributed to the alleged violation.

ODOC does not offer therapy, counseling or other interventions to the offenders who demonstrate aggressive sexual behavior unless that behavior would be addressed as part of another mental health diagnosis.

Documentation was reviewed to demonstrate that inmates are not disciplined for reporting sexual abuse or sexual harassment.

The PREA policy 40.1.13 was provided as documentation. It states that inmates who allege sexual abuse by staff or other inmates, and whose allegations are proven by investigations to be false will be held accountable through all means available to the ODOC. Standard 115.78 (f) requires that "For the purpose of disciplinary action, a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation." For this reason and for clarity purposes ODOC may want to add this subsection of the standard to their policy.

115.81	MEDICAL AND MENTAL HEALTH SCREENINGS; HISTORY OF SEXUAL ABUSE

☐ 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)

Auditor comments, including corrective actions needed if does not meet standard

If an inmate discloses being sexually abused or sexually aggressive/predatory, a referral is made to Behavior Health Services (BHS). BHS conducts an initial screening at the Oregon State intake facility. Initial screening at this facility is completed within 14 days of arrival. Inmate interviews indicate this happens. The facility's Behavioral Health Services screening asks the inmate about sexual vulnerability and sexual predatory behavior in the community and in an institutional setting.

Documentation was provided to demonstrate that inmates who have experienced prior sexual victimization are offered a follow up meeting with medical or mental health practitioners within 14 days of the intake screening at the facility. Inmates who have previously perpetrated sexual abuse are offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening at the facility according to Health Service Behavioral Health Services Policy and Procedures #MH-E-02.

Behavioral Health Services asks the inmate about previously perpetrating sexual abuse in the

Victimization Screening Tool and they are referred to BHS. If the inmate is identified as having a clinical diagnosis, treatment will be offered. However, ODOC does not have sex offender treatment, but the inmate is referred to BHS for a screening to determine if there is a need for ongoing care and to get more information on the sexual aggressive/assaultive behavior.

Examples where inmates were provided informed consent were provided.

115.82	ACCESS TO EMERGENCY MEDICAL AND MENTAL HEALTH SERVICES

☒ 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)

Auditor comments, including corrective actions needed if does not meet standard

BHS staff are available and/or on call to address issues. Timely response was documented and confirmed in staff and inmate interviews.

Health Services Section Policy and Procedures as well as the PREA policy 40.1.13 meet the criteria of the standard. Under the reporting section it states that under no circumstances should access to treatment resources be denied an inmate victim solely because the inmate will not fully disclose details to investigative staff or Health Services staff. Under Medical and Mental Care it requires timely, unimpeded access to emergency medical treatment without financial cost as determined by the medical practioners' professional judgment. Necessary post event treatment including coordination with community hospitals, testing and prophylactic treatment for sexually transmitted disease, comprehensive information and timely access to all lawful pregnancy related medical services (for female inmates), referral to Behavioral Health Services and Communication with the sexual abuse liaison regarding any information deemed not confidential.
PREA policy 40.1.13 requires the following:

Health Services policy on procedure #P-B-05 (Procedure in the Event of Sexual Assault) that includes:

1. Timely, unimpeded access to emergency medical treatment without financial cost as determined by the medical practitioners' professional judgment;
2. Necessary post event treatment including coordination with community hospitals;
3. Testing and prophylactic treatment for sexually transmitted disease (STD);
4. Comprehensive information and timely access to all lawful pregnancy related medical services;
5. Referral to Behavioral Health Services; and
6. Communication with the sexual abuse liaison regarding any information deemed not confidential.

B. Behavioral Health Services: Mental health services for victims of sexual abuse will be provided in accordance with Behavioral Health Service policies and procedures which include:

1. Timely, unimpeded access to appropriate mental health evaluation services without financial cost as determined by the mental health treatment providers' professional judgment;
2. Comprehensive information of limits of confidentiality and duty to report;
3. Completion of a mental health evaluation to include a suicide risk screening interview;
4. Notification to the OIC and Medical Services regarding recommended actions that may include suicide precautions;
5. Provision of follow-up mental health services based on MH-G-01.1 Mental Health Codes and

Levels of Services;

6. Communication with the sexual abuse liaison regarding any information deemed not confidential; and

7. Consultation with the Officer in Charge (OIC) and Medical Services regarding suicide precaution measures that will be implemented if the inmate is housed at an institution where there is no mental health services on site.

CRCI provided a memo that Behavioral Health Services staff will assist in arranging transport to one of the local hospitals or appropriate health care facility for treatment, examination, documentation, collection of forensic evidence, testing for STDs, and referral for counseling. Upon return from the treating facility, health services personnel are to review the results of the evaluation by the treating facility and continue medical treatment as recommend, following consultation with ODOC provider. BHS: mental health services for victims of sexual abuse will be provided in accordance with BHS polices and procedure which include: 1. timely, unimpeded access to appropriate mental health evaluation services without financial cost as determined by the mental health treatment providers' professional judgment; 2 Comprehensive information of limits of confidentiality and duty to report; 3. Completion of a mental health evaluation to include a suicide risk screening interview. CRCI exceeded this standard with the initiation of this process and the SART team members being present on all shifts in order to be able to respond. Additionally, the response includes suicide precautions.

115.83	ONGOING MEDICAL AND MENTAL HEALTH CARE FOR SEXUAL ABUSE VICTIMS AND ABUSERS

☐ 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)

Auditor comments, including corrective actions needed if does not meet standard

CRCI offers medical and mental health treatment. Response to victims is timely and ongoing. There are no female offenders at this facility. Medical care and mental heath services are provided at no cost to the inmate. Follow up care is provided.

In accordance with PREA policy 40.1.13, Medical and mental care: Inmates are offered medical access to services if they are a victim of sexual abuse and will be handled in accordance with Health Services policy on procedure #P-B-05 (Procedure in the Event of Sexual Assault).

Upon return from the treating facility, health services personnel are to review the results of the evaluation by the treating facility and continue medical treatment as recommend, following consultation with ODOC provider. BHS: mental health services for victims of sexual abuse will be provided in accordance with BHS polices and procedure which include: 1. timely, unimpeded access to appropriate mental health evaluation services without financial cost as determined by the mental health treatment providers' professional judgment; 2 Comprehensive information of limits of confidentiality and duty to report; 3. Completion of a mental health evaluation to include a suicide risk screening interview.

ODOC Behavioral Health Services MH-B-04A refers to how BHS responds to reports of sexual abuse and sexual harassment and how to report suspicions of sexual abuse and sexual harassment.

Provision of follow up mental health services are based on MH-G-01-1 Mental Health Codes and

Levels of Services.

The standard states "All prisons shall attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners." State wide evaluations and treatment for sexual predatory behavior is not completed unless addressed in other mental health diagnoses. Unless there is another mental health diagnosis, mental health practitioners would not deem sexual abuse treatment appropriate for the inmate.

115.86	SEXUAL ABUSE INCIDENT REVIEWS

☐ 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)

Auditor comments, including corrective actions needed if does not meet standard

The pre-audit questionnaire identifies 1 investigation in the past 12 months for allegations of sexual abuse, excluding unfounded incidents. The investigation was followed and was under investigation at the time of the audit. A memo was received from the PREA compliance manager that an incident review would occur when the investigation from the Oregon State Police was closed.

According the facility, incident reviews are conducted on investigations in which allegations are found to be substantiated or unsubstantiated.

The pre-audit questionnaire states that the standard is in the PREA policy 40.1.13. Upon review of the policy, there isn't any reference to a sexual abuse incident review or a team, but it is referenced in the PREA Compliance Manager's Guidelines. The facility provided documentation that reviews were conducted to demonstrate practice.

115.87	DATA COLLECTION

☐ 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)

Auditor comments, including corrective actions needed if does not meet standard

ODOC collect the required data to complete the survey of sexual violence and submit required data to the DOJ. Documents were provided to support compliance with this standard.

Data collections and requirements to comply with this standard are in the PREA policy.

115.88	DATA REVIEW FOR CORRECTIVE ACTION

☐ 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)

Auditor comments, including corrective actions needed if does not meet standard

ODOC's annual PREA report was provided. To be compliant with the standard, it needs to be approved by the agency head and made available to the public through its website.

This standard required a corrective action period to allow the agency head to review the report and approve it. The annual report was approved by the agency heard and placed on the agency's website. Since the document is not signed by the Director, the PREA Coordinator confirmed that it was reviewed and approved by the Director.

115.89	DATA STORAGE, PUBLICATION, AND DESTRUCTION

☐ 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)

Auditor comments, including corrective actions needed if does not meet standard

ODOC ensures data collected is securely retained. The agency provides general aggregated sexual abuse information on their website.

Documentation provided was PREA policy 40.1.13 section X. Data Collection and Review 6. The incident-based data collected shall include at a minimum the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice. Upon request, the PREA administrator shall provide all such data from the previous calendar year to the Department of Justice not later than June 30.

ODOC maintains their data for at least 10 years after the date of the initial collection.

AUDITOR CERTIFICATION:

The auditor certifies that the contents of the report are accurate to the best of his/her knowledge and no conflict of interest exists with respect to his or her ability to conduct an audit of agency under review.

Auditor Signature

1-14-15

Date