

OREGON DEPARTMENT OF CORRECTIONS
Operations Division
Health Services Section Policy and Procedure #P-B-05

SUBJECT: PROCEDURE IN THE EVENT OF SEXUAL ABUSE

POLICY: Inmates who report or seek health care attention as a result of a sexual abuse during incarceration shall receive prompt attention for treatment and evidence gathering.

REFERENCE: NCCHC Standards P-B-05
Prison Rape Elimination Act, Public Law 108/79
DOC Policy 40.1.13
Rule on Prohibited Conduct 291-105

PROCEDURE:

- A. Upon receipt of information that an inmate has been recently sexually abused, Health Services personnel shall do a preliminary assessment.
- B. Upon notification by an inmate that he/she has been sexually abused or coerced into unwanted sexual contact, the staff member shall immediately notify the OIC, verbally and in writing (using attachment 2).
 1. If the occurrence of the abuse is reported as being less than 96 hours, an evidentiary examination at a local facility (the local hospital or other crisis center) may yield information depending on the circumstances, including force, site, and cleansing, therefore, arrange transport and notify the treating facility of the need for an evidentiary examination and treatment. 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 recommended.
 - a. Such examinations shall be performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible. If SAFEs or SANEs cannot be made available, the examination can be performed by other qualified medical practitioners
 2. If the occurrence of the abuse is reported as being over 96 hours, an evidentiary examination will be of little benefit; therefore, a medical examination and treatment will be completed at the institution.

3. The evaluation and treatment of such victims shall include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody
 4. Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident
- B. When an inmate reports being the victim of sexual abuse, a suicide risk assessment will be conducted by a mental health professional. If no mental health professional is on site, the assessment will be conducted by a health services nurse, who will then consult with the mental health professional on call if an inmate is at risk for suicide or self-injury so that the necessary steps can be taken for ensuring the inmate's safety.
- C. A mental health professional will follow up with the inmate at seven days and thirty days after the mental health evaluation for any victim of an alleged sexual abuse. For all confirmed victims of sexual abuse, BHS will offer a minimum of four individual and eight group sessions.
- D. At the beginning of the medical assessment, the patient will be informed that:

Some information obtained in a provider-patient relationship is not confidential and will be reported to non-Health Services staff and/or other agency personnel as needed even without written consent of the patient. According to State and Federal laws, this includes knowledge of:

- danger to self or others;
 - abuse of a child under 18 years of age, abuse of an adult 65 years of age or older, or abuse of individuals who meet the legal requirement of developmentally disabled or mentally ill, and a specified victim can be identified;
 - staff physical or sexual abuse of inmates;
 - escape plans or attempts;
 - sexual abuse of or by another inmate.
- E. The patient will be asked to read, understand and sign the HEALTH SERVICES INFORMATION DISCLOSURE (attachment 1). The patient's signature will be witnessed and signed by the Medical Services staff member involved.
- F. Prophylactic treatment for sexually transmitted diseases, including HIV disease, will be offered to all victims. A referral will be made to the

appropriate health care professional(s) for possible HIV testing and/or health counseling.

- Inmate victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests.
- If pregnancy results, from the conduct described in DOC Policy 40.1.13, such victims shall receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services
- The evaluation and treatment of such victims shall include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody
- With permission or attempted permission, the Superintendent or designee will be notified of the incident to ensure the protection of the victim. This may include input into "Special Case Factor" as needed, and/or a change in housing assignment.
- A report is made to the security designee to affect a separation of the victim from his/her assailant in their housing assignment.

Effective Date: _____

Review date: April 2014

Supersedes P&P dated: June 2013

HEALTH SERVICES INFORMATION DISCLOSURE

Information obtained within the patient/provider relationship, as well as information contained in a patient's health care record is confidential and may not be released except as provided by state and federal statute, or by order of Oregon or Federal Court. Information given to Health Services medical and mental health providers is confidential and not shared with anyone outside of Health Services without written consent with the following exceptions:

Non-Health services staff may be given the patient's name, services recommended or provided, provider's name, dates of treatment, and a brief comment about extent of participation. Treatment providers may also make recommendations to non-Health Services staff about ways to help patients with medical or mental health problems without giving details of diagnosis or medication prescribed.

Non-Health services staff may be given some health information (e.g. diagnosis, symptoms of decompensation, risk factors, etc.) if:

- they are currently acting within the official scope of their duties to develop or evaluate treatment strategies and plans;
- they are involved in developing correctional plans, medical treatment plans, risk or behavior management plans or suicide and crisis prevention plans as members (e.g. designated correctional counselors, mental health housing officers, etc.) of a multidisciplinary team, treatment team, committee, or other official;
- they are involved in release planning; or
- disclosure is necessary for the safety and security of the institution.

Some information obtained in a provider-patient relationship is not confidential and will be reported to non-Health Services staff and/or other agency personnel as needed even without written consent of the patient. According to State and Federal laws, this includes knowledge of:

- danger to self or others;
- abuse of a child under 18 years of age, abuse of an adult 65 years of age or older, or abuse of individuals who meet the legal requirement of developmentally disabled or mentally ill, and a specified victim can be identified;
- staff physical or sexual abuse of inmates;
- escape plans or attempts;
- sexual abuse of or by another inmate.

Confidentiality will not apply to information when it poses an immediate threat to the health and safety of self, other inmates, staff, or to the community. Reports will be limited to what is necessary to maintain safety and stay within legal parameters.

My signature below indicates I understand the confidentiality policy and practices used by HS treatment providers.

Inmate Comments:

Inmate Name: _____
SID #: _____
DOB: _____

Inmate Signature _____

Date _____

Staff Witness Signature _____

Date _____

Oregon Department of Corrections Staff Reporting Responsibilities

PREA Reporting & Investigation of Sexual Abuse

A. Inmates are encouraged to immediately report sexual abuse or sexual harassment to any staff member. Upon notification by an inmate that he/she has been sexually abused, harassed, or coerced into unwanted sexual contact, the staff member shall immediately:

- 1. Ensure the victim is safe and kept separated from the alleged perpetrator (if immediate need exists)**
- 2. Notify the Officer in Charge or Supervisor**
- 3. Officer in Charge will make appropriate notifications using the OIC checklist**
- 4. Document your notification and basic required information obtained by you in space below, sign and submit to the OIC for incorporation to the Unusual Incident Report.**

Reported Sexual Harassment, Sexual Abuse information:

Date: _____
Signature: _____