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: Waiawa Correctional Facility	
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Date report submitted: 2-6-15	
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Date of facility visit: August 9, and 13-14, 2014	
Facility Information	
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The facility is: ☐ Military ☐ County ☐ Federal ☐ Private for profit ☐ Municipal ☒ State ☐ Private not for profit	
Facility Type: ☐ Jail ☒ Prison	
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PREA AUDIT FINDINGS FOR
WAIAWA CORRECTIONAL FACILITY

NARRATIVE:

A PREA Audit was conducted at the Waiawa Correctional Facility (WCF) on August 9 and 13-14, 2014. The audit was conducted by La Cole Archuletta, a certified PREA Auditor and Jerri Worm, who served as Support Staff.

WCF is a minimum-security prison for male inmates.

Prior to the on-site audit, the pre-audit questionnaire and documents provided by WCF were reviewed.

WCF was toured on August 9, 2014. The tour was conducted by PREA Coordinator by Shelley Nobriga and accompanied by Chief of Security Sean Ornellas.

From August 13-14, 2014, interviews were held with the facility warden, Scott Harrington, PREA compliance manager, Teresa Mike and PREA coordinator, Shelley Nobriga.

Interviews were conducted on-site with staff and inmates on August 13-14, 2014 using the PREA interview questions. Interviews were conducted with 29 staff, contractors and volunteers and 14 inmates. Inmates who had written a letter to the auditor or reported a sexual abuse who were still at the facility were interviewed.

The entire facility was toured which included the housing units, administration units, recreational area, medical, industry areas, control center, front entry, meeting building, and walking around the grounds of the facility. The staff and inmates were knowledgeable about PREA.

An interview and examination of the facility's intake process was reviewed.

Camera systems are not available at the facility therefore video systems were not reviewed.

Additional documents were reviewed and requested throughout the audit as well as during the corrective action period.

The Honolulu Police Department investigates criminal allegations of sexual abuse or sexual assault at WCF and Internal Affairs investigates administrative allegations.

There were nine standards that the facility received corrective actions on which have now been corrected. The PREA coordinator worked diligently with the auditor to ensure all corrective actions were addressed.

PREA AUDIT FINDINGS FOR WAIAWA CORRECTIONAL FACILITY

DESCRIPTION OF FACILITY CHARACTERISTICS

The Waiawa Correctional Facility (WCF) is a 334-bed, minimum-security prison for sentenced male inmates. WCF provides an environment that helps inmates successfully re-enter the community through a sequential phasing process. All inmates participate in education or substance abuse treatment programs at WCF.

The WCF has 240 beds that are devoted to a therapeutic treatment program referenced as KASHBOX. KASHBOX is an intensive residential substance abuse treatment program for inmates with serious substance abuse problems. WCF has a program called Supporting Keiki of Incarcerated Parents, which is a unique program designed to help male inmates with substance abuse issues become better fathers. This program allows the inmate to participate in parenting groups, structured playgroups, and reading activities with their children.

WCF also provides general education programs, which allow inmates to work towards an associate of arts degree. In addition, in-facility work lines such as food service, building maintenance, heavy equipment, farm, janitorial, educational tutoring, aquaponics, hydroponics, and landscaping help inmates acquire skills and practice good work habits.

Number of standards exceeded: 0

Number of standards met: 42

Number of standards not met: 0

Non-Applicable: 1

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 Hawaii Department of Public Safety (PSD) has a zero tolerance policy, Prison Rape Elimination Act ADM 08.08. The policy mandates zero tolerance towards all forms of sexual abuse, sexual harassment and retaliation for reporting incidents and sets forth procedures that the agency must follow to prevent, detect and respond to these reports of sexual abuse and sexual harassment.

The policy was newly signed and implemented on July 18, 2014. Staff members at WCF are still learning the policy and required procedures.

PSD has an upper-level, agency-wide PREA coordinator. Memos refer to the PREA coordinator, but the agencies organization chart does not identify it. The organization chart has the position identified as the litigation coordinator. It is recommended that the position be identified on the organization chart as the PREA coordinator.

PSD has designated PREA compliance managers in all its facilities. PREA policy ADM 08.08 requires that each PREA compliance manager have sufficient time and authority to coordinate the facility's effort to comply with the standards.

The WCF PREA compliance manager was newly assigned to the position and was not aware of all of her duties. The PREA coordinator immediately developed a plan to assist with providing additional training to rectify the situation.

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 contract with Corrections Corporation of America to confine their inmates was recently renewed. The new contract included the special condition that the contract agency comply with the PREA and to demonstrate compliance through PREA audits.

PREA policy ADM 008.08 mandates that new contacts or contract renewals with private agencies or other entities for the confinement of PSD's offenders shall include language that the private entity is required to adopt and comply with PREA standards.

In addition, the private entity is subject to PSD monitoring/audit as part of its contact. PSD is working on developing language to include in interstate compact agreements.

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

WCF received a corrective action to develop a comprehensive PREA staffing plan that included the need for video monitoring, and the following:
1) Generally accepted detention and correctional practices,
2) Any judicial findings of inadequacy;
3) Any findings of inadequacy from Federal investigative agencies;
4) Any findings of inadequacy from internal or external oversight bodies;
5) All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated);
6) The composition of the inmate population;
7) The number and placement of supervisory staff;
8) Institution programs occurring on a particular shift;
9) Any applicable State or local laws, regulations, or standards;
10) The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and

11) Any other relevant factors.

The PREA staffing plan now meets the requirements in the standard and the plan was done in consultation with the PREA coordinator.

The PREA policy, ADM 08.08 requires that where the staffing plan is not complied with, the facility shall document by utilizing the PREA mandated reporting form and justify the deviation from the plan.

PSD has a policy, ADM 08.08, for intermediate-level supervisors to conduct unannounced walk-throughs on all watches and that the walk-through must be documented in the housing unit informer/log book and/or in the supervisor's watch summary. The facility conducts unannounced rounds, but they were inconsistent in how the rounds were documented. It is recommended that the facility documentation follow policy as well as develop a uniform method to identify that a round by immediate or high-level staff was made in the housing unit and/or dorm.

PSD staff are prohibited from alerting other staff members of walk-throughs by supervisors, unless such an announcement is related to the legitimate operational function of the facility.

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)
☒ Not Applicable

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

No youthful inmates are housed at the facility. The facility provided State Stature 706-667 Young Adult Defendants to support that youthful inmates are not held in any PSD adult facility.

The PREA coordinator verified that WCF does not house youthful inmates.

PREA policy, ADM 08.08 states that PSD does not manage youthful inmates as defined by PREA, therefore this standards in not applicable. However, PREA policy, ADM 08.08 states that if PSD did receive a youthful inmate as defined by PREA, then the youthful inmates would not be housed in a housing unit in which the youthful inmate had sight, sound and physical contact with any adult inmate through the use of a shared dayroom or other common space, shower area of sleeping quarters. The policy requires that the PSD document the exigent circumstances for each instance in which a youthful inmate's access to large-muscle exercise, educational services or other programs are denied in order to separate them from adult inmates by utilizing the PREA mandated reporting form.

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

WCF employees do not conduct cross gender strip searches. 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 said there had not been any incidents where cross gender viewing or visual body cavity searches were done.

PSD policy ADM 08.08 outlines the limits to cross-gender viewing and strip searches include all elements of this standard. The PREA training also supports that staff are trained that cross-gender strip and cross-gender visual body cavity searches shall not be conducted except in exigent circumstances or when performed by medical practioners.

Announcing cross gender staff in the housing units was demonstrated during the tour and confirmed in interviews with both inmates and staff. Opposite gender staff entering a housing unit is logged, but the announcement is not logged. It was recommended that when logging cross gender staff entering the unit, that housing staff also log that the announcement was made.

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

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 ADM 08.08 as documentation for compliance with 115.15 and their PREA corrections and law enforcement training.

PREA policy ADM 08.08 and PREA corrections and law enforcement training lesson plan supported that staff are trained to not examine transgender and intersex inmates to determine genital status.

Interviews with staff and inmates confirmed that opposite gender announcements are made and that inmates are allowed to shower, perform bodily functions and change clothing without opposite gender viewing except in exigent circumstances or when such viewing is incidental to routine cell checks.

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

PSD has an account with a telephone language interpretation service which is available 7 days a week, 24 hours a day. There is a Limited English Proficiency Plan in place that began in July 2013. During the audit, the facility said that they did not have any inmates who were limited English proficient. The other language that is most often spoken by inmates at WCF is Chuukese.

PREA policy, ADM 08.08 requires that disabled inmates and inmates with limited English proficiency be provided with equal opportunity to participate in or benefit from all aspects of PSD's efforts to prevent, detect and respond to sexual abuse and sexual harassment. The policy prohibits the use of inmate interpreters to circumstances where an extended delay in obtaining an effective interpreter could compromise an offender's safety.

It is recommended that the PREA coordinator ensure that employees know how to access the language interpretation services, since many employees interviewed were not aware that inmates could not be used as interpreters for other inmates. PSD has a language line that can be accessed telephonically. Staff were not familiar with it. To ensure staff, contractors and volunteers are trained on how to use the language line; senior level staff were issued a directive to discuss the process with their subordinate staff on August 19, 2014 and WCF staff received the information. There were no inmates with disabilities at the facility.

Posters were not available in other languages. The facility said on occasion they get inmates who are not English speaking, there fore, the facility may want to consider developing posters and brochures in other languages.

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

PSD PREA policy, ADM 08.08 prohibits the hiring or promoting of anyone who may have contact with inmates, and shall not enlist the services of any contractor who may have contact with inmates, who:
1) Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution;
2) Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or
3) Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (a) (2) of this section.

All employees have an affirmative duty to immediately disclose PREA related misconduct through their chain of command and material omissions or materially false information shall be grounds for termination.

New employees have a background and suitability check prior to hiring. Employees who are promoted have a background check completed prior to their promotion. Documentation provided supported compliance. Interviews with human resources staff were conducted and files of newly hired and employees who had been recently promoted were randomly reviewed.

A memo was provided that all contractors and volunteers received a background check prior to having contact with inmates. Interviews conducted with Human Resources employees determined that they are conducting background checks for new hires, promotional employees, contractors, volunteers and on Lautenberg position employees. Random names were selected and the agency

provided documentation that a background check had been conducted.

ADM 08.08 requires that PSD provide information on substantiated allegations of sexual abuse or sexual harassment involving current or former employees, upon receiving a request from an institutional employer conducting a background check on the employee.

This standard was non compliant and the corrective action plan required Human Resources to develop a plan to conduct 5-year background checks on employees who have contact with inmates.

All Lautenberg positions receive an annual background check, but the non-Lautenberg checks had not all received a 5-year background check. A plan was developed to addresses those staff that are not Lautenberg positions and to conduct a background check on those individuals and then keep track of these individuals as changes or additions occur to ensure all employees receive a background check every 5 years. The remaining employees received a background check and PSD is now compliant with this standard.

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

WCF has not designed or acquired a new facility, or substantially expanded or modified any of their existing facilities.

Installing mirrors and/or cameras are highly recommended at WCF. Currently, there are no cameras. In areas where the counselors are located, and staff are isolated, recommend adding windows to the doors and installing large windows in the wall on the opposite side of the door for safety and security purposes.

Sometimes there is limited staff and even with staff making frequent rounds, monitoring technology and video monitoring system would be useful for both preventing and deterring PREA related incidents as well as assisting with investigations.

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

PSD is responsible for conducting administrative sexual abuse investigations. All criminal sexual abuse investigations are referred to county law enforcement agency. For WCF it is Honolulu Police Department (HPD). In cases where the HPD declines to investigate a criminal report, a referral is made to the State of Hawaii, Department of the Attorney General to investigate criminal allegations.

PSD PREA policy, ADM 08.08 requires PSD to utilize departmental evidence protocols to maximize the potential for obtaining useable physical evidence for administrative proceedings and preserves the crime scene for criminal investigations and prosecution. The Health Care Division staff determines whether a victim of sexual abuse is transported for a forensic medical exam at the Sex Abuse Treatment Center (SATC) or to a hospital emergency unit.

Victims of sexual abuse/assault have access to forensic medical examinations through a local hospital, and access to a victim advocate at the SATC. The SATC provides forensic medical examinations and crisis counseling. The forensic medical exams are conducted by SATC staff, which consists of physicians and nurses trained as sexual assault nurse examiners. SATC is the only hospital for forensic medical exams available on Oahu. The SATC provides crisis counseling and therapy which is performed by an SATC crisis counselor. At the request of the victim, a victim advocate from SATC shall be provided to support the victim through the forensic medical examination process and the investigatory interview. There is no cost to the inmates for these services.

During the audit, an appointment with SATC was made for an inmate who reported being sexual harassed. Follow up appointments were offered through SATC demonstrating their availability and ongoing relationship with PSD.

This standard received a corrective action to allow PSD an opportunity to pursue a draft Memorandum of Understanding (MOU) with HPD that had been developed. The PREA coordinator faxed a cover letter and draft MOU asking them to comply with the requirements of PREA standard 115.21 (f). The PREA coordinator did not receive a response from HPD.

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

Agency PREA policy ADM 08.08 requires that allegations of sexual abuse and sexual harassment are referred for an administrative and/or criminal investigation. An allegation of sexual harassment is only referred for a criminal investigation if it meets a criminal standard. Otherwise, it is referred to the facility investigator.

When a sexual abuse or sexual harassment (that meets criminal elements) incident is reported both Internal Affairs (IA) and the Honolulu Police Department (HPD) are notified. The administrative investigations are completed by the Internal Affairs and criminal investigations are completed by the HPD.

For sexual assault incidents, the facility first responders are responsible to preserve physical evidence. The victim is taken to the facility's medical unit and then to the local hospital, SATC. Forensic medical exams are conducted by the SATC and not the facility. The attorney general's office (AG) can also investigate crimes within PSD, if notified of allegations by PSD employees.

Inmates can contact HPD to report sexual abuse or sexual harassment incidents. Examples of criminal

and administrative investigations were reviewed.

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, PSD ADM 08.08. Employees are trained in all the required elements; detailed information for items #3 and #10 was recommended and PSD immediately made the change. The training did not have standards #3 (Inmate right to be free from sexual abuse and sexual harassment) and #10 (How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities). These two elements have now been added to the training.

The PREA general training is 3.5 hours and is tailored to address all genders and only had one lesson plan. The policy does not require additional training when a staff member transfers to a different gender facility.

The policy, ADM 08.08, requires employees to attend training every two years which meets the PREA standard requirement. However, not all employees easily demonstrated an understanding of the training. It is recommended that employees attend training during the next audit cycle to ensure all employees have an understanding of the training elements before starting the training every two years.

A roster of WCF employees was provided that documents all the employees received the training except those out on leave. Upon their return, they will be required to receive training.

The roster has language that the employees understand the training they received and is given to them to sign after the training has concluded. The PREA coordinator or training supervisors conduct the classes.

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

PREA policy, ADM 08.08 requires that all volunteers and contractors who have contact with inmates be trained on PREA, PSD's policy, and their responsibilities regarding the prevention, detection, and how to respond to a report of inmate sexual abuse and sexual harassment.

Volunteers and contractors receive training based on their amount of contact with inmates. Volunteers and contractors who have regular contact with inmates receive the same PREA training as all PSD staff and document that they understood the training they receive. Those that do not have

regular contact with inmates receive information on mandatory reporting, PREA, Hawaii law, and PSD's zero-tolerance policy.

Interviews revealed that not all the contractors and volunteers had received training. The facility PREA compliance manager was requested to ensure that these contractors and volunteers had received the required training.

Training records were provided for contractors and volunteers to verify they received 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

PSD requires that inmates receive verbal and written information during intake by the Intake Service Center. The information includes information on PSD's zero-tolerance policy and how to report an incident, or suspected incident, of sexual abuse or sexual harassment.

PREA policy ADM 08.08 requires that inmates are provided comprehensive PREA education within 30 days of intake by video or classroom instruction. WCF started showing the National PREA Resource Center/Just Detention International (JDI) inmate education video in June 2014. Prior to that a brochure with information on sexual abuse and sexual harassment had been available.
The video includes prevention and intervention, self-protection and reporting incidents of sexual abuse, sexual harassment and protection from retaliation and information inmates that the facility has a zero-tolerance policy. Inmates are provided a brochure entitled "Offenders Sexual Abuse and Sexual Harassment By Offenders, Staff, Volunteers and Contractors". Posters are also available to inform the inmate how to report and who to contact for emotional services.

WCF staff provided an orientation sign-in sheet as verification that the inmate had received the education. Random checks of signed inmate orientation forms were reviewed.

Inmate interviews confirmed that they had received education and understood how to report incidents of sexual abuse, sexual harassment and retaliation for reporting these incidents.

Posters were viewed within the facility which provided information on how to report sexual assault or sexual harassment.

Inmates with disabilities or who are limited English proficient would have access to interpreters through Pacific Interpreters.

Additionally, during inmate interviews it was not clear that inmates knew how to access SATC for emotional support. The PREA coordinator updated the PREA brochure and poster to include information on emotional services and how to access the services.

PREA AUDIT FINDINGS FOR
WAIAWA CORRECTIONAL 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

PREA policy ADM 08.08 requires Internal Affairs investigators and facility investigators to receive general PREA training and specialized PREA training. The specialized training requires information on how to conduct sexual abuse investigations in confinement settings, interview techniques, proper use of Miranda and Garrity warnings, evidence collections and criteria and evidence required to substantiate a case for administrative action or prosecution referral.

Since the PREA specialized training is conducted by HPD, Miranda and Garrity warnings are not included. The training does cover sexual abuse investigations, interviewing, and evidence collection. There is a training for IA administrative investigations which covers interview techniques, use of Miranda and Garrity warnings, and evidence required to substantiate a case for administered action.

WCF staff members who conduct investigations receive training. In interviews with investigations, it was clear that they understanding interviewing sexual abuse victims and are trained in Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings and understand evidentiary collection of physical evidence and interviews needed to substantiate a case for administrative action or prosecution referral. There is documentation to verify investigators received the 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

PREA policy ADM 08.08 requires all full-time and part-time medical and mental health practioners who work regularly in PSD facilities to receive specialized training for medical and mental health care practitioners.

Medical and mental health staff attended the general PREA training as well as a specialized training provided by the Sex Abuse Treatment Center (SATC) and HPD. A review of staff training records and interviews were conducted with medical and mental health staff.

Documentation was provided that all medical and mental health staff have received the required specialized PREA training.

Standard 115. 35 (b) is not applicable. WCF does not conduct forensic medical exams on site; inmates are taken to the SATC.

PREA AUDIT FINDINGS FOR
WAIAWA CORRECTIONAL FACILITY

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

Intake Service Center is required to screen inmates during the intake screening process which occurs upon admission to a facility by using the PREA Screening Tool. The intake screening by the Intake Screening Center occurs within 72 hours of arrival.

Upon arrival at the facility, a reassessment of the inmate's risk of sexual abuse victimization or sexual abusiveness towards other inmates is done within 30 days of transfer to the facility.

PREA policy, ADM 08.08, requires that intake screenings are conducted within 72 hours of the inmate's arrival at intake and upon transfer to WCF a reassessment will be conducted within 30 days.

Documents confirmed that 30 day reassessments are being done using an objective screening tool. Social workers complete the 30 day reassessments after intake. Intake does the initial screening and watch commander signs off on inmates with positive scoring. The intake packet, including the PREA risk screening form, goes to offender services and they go over the assessment tool. Classification has to be done within 30 days. If new information is found, they will submit a new form with this information and will review it to determine if a different housing assignment is needed.

After the initial screening, transgender and intersex inmates are re-assessed every 6 months.

PSD's PREA risk screening form did not have all the required criteria in the formal scoring. The missing criteria were added to the PREA risk screening form and the updated form was implemented at intake, facility screening and the reassessment process.

Only a few people have access to the PREA risk screening information. This process is currently a paper form, but the PREA coordinator is working on developing an automated format.

A memo was provided to document that inmates are screened within 72 hours of arrival to WCF and that all inmates have been assessed. Examples of random inmates completed screening tools were provided and reviewed.

In May 2014, the PREA risk screening tool was formally implemented. Inmates are currently being screened during reclassification reviews at WCF. The PREA Screening Tool did not include all the required elements in the standard. The PREA Screening Tool was updated to include:
6) Whether the inmate has prior conviction for sex offenses against an adult or child
9) The inmate's own perception of vulnerability.

PSD is compliant with the criteria in d 1- 10 and e, institutional violence and sexual abuse history, after the PREA Screening Tool was amended at the request of the Auditor.

PREA AUDIT FINDINGS FOR WAIAWA CORRECTIONAL FACILITY

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 use of screening information is required in PREA policy ADM 08.08. PSD uses the information from the PREA Screening Tool for housing designations, work line, program assignment and scheduling to keep separated those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive. PSD uses the risk screening tool information to make an individual assessment about how to ensure the safety of each individual inmate.

Housing assignments consider the PREA risk screening. If there is some type of risk or concern, the information is referred to medical and the watch commander to determine where to house the inmate. The PREA risk screening tool identifies potential or known sexual vulnerability or predation factors and efforts are made to house inmates appropriately.

Housing decisions for transgender and intersex inmates are reviewed on a case-by-case basis. Interviews confirmed that transgender and intersex inmates were able to shower separately and safety issues were considered for housing.

The PREA compliance manager gets a copy of the PREA risk screening and can make changes or talk with the inmate to see if there are any issues or concerns then determine if changes are necessary or whether the current housing is deemed appropriate.

The PREA policy, ADM 08.08, allows for inmates to shower separately. In WCF, shower stalls are separate and offenders can shower individually. Alternative times to shower alone can be arranged for inmates, if requested.

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

PREA policy, ADM 08.08 discourages the placement of inmates in involuntary administrative segregated housing solely because of their high risk of sexual victimization status, unless an assessment of all available alternatives has been made it is concluded that there is no available alternative for separating the victim from a likely abuser. This shall be documented by utilizing the PREA Mandated Reporting Form.

If the PSD facility is unable to conduct the above assessment immediately, the facility may hold the inmate in involuntary administrative segregated housing for a period of less than twenty-four hours pending the completion of the mandated assessment.

Inmates placed in segregated housing for this purpose are to have access to programs, privileges, education and work opportunities to the extent possible as dictated by the facility's schedule and operational needs. If the facility restricts access to program, privileges, education or work opportunities, the facility shall document it.

No inmates were involuntary segregated due to risk of sexual victimization during the audit period.

The PREA policy includes the standard requirements. Staff interviews confirmed that inmates can be temporarily placed in their medical unit until alternative housing is arranged.

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

WCF inmates have multiple ways to report sexual abuse and/or sexual harassment. Inmates can report any of the following ways:

Tell a staff member that they trust, report directly to Internal Affairs, tell or write to the warden, call HPD or the State Ombudsman's Office, write to the PREA coordinator or file a grievance.

If an inmate wants to place a call to an outside agency such as the state ombudsman office, they need to sign up for an official call and identify who they want to call. Staff can facilitate the call and transfer it to a different phone.

Interviews with inmates reflected compliance with the standard. Inmates were aware of different methods available for reporting incidents of sexual abuse, sexual harassment or retaliation.

The outside agency that inmates can report to is the State Ombudsman's office or SATC. The address to the state ombudsman office is in the PREA policy, ADM 08.08. In policy there is a statement that staff can accept reports verbally, in writing, anonymously and from third parties. This is also reiterated in the staff training. Staff conveyed during interviews that they would accept reports from inmates and then log them in their log book.

Based upon interviews, staff were not able to articulate a method for them to report incidents of sexual abuse or sexual harassment other than through their chain of command. PREA policy, ADM 08.08 allows a staff member to privately report incidents of inmate sexual abuse, inmate sexual harassment or retaliation by contacting the Ombudsman, a legislative or political representative or the attorney general.

A recommendation that the agency provide a way with the State Ombudsman's Office that allows inmates to remain anonymous, upon request, and provide clear direction to the inmates on how they can remain anonymous. In addition, it was not clear how family members know how they can or how they can make reports on behalf of inmates.

A recommendation about adding this information to a PREA page on the PSD website and putting posters and brochures in the visiting areas was made. Another recommendation was to add a PREA page on the PSD website to provide information for staff on how to privately report. These changes were made by the PREA coordinator.

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

PREA policy, ADM 08.08 refers to policy COR 12-03, Inmate Grievance Program which outlines the administrative procedures available to inmates for reporting incidents of sexual abuse, sexual harassment or retaliation. However, COR 12-03 does not site information on PREA related grievances. It is recommended that this policy be updated to reflect ADM 08.08 that there are no time limits or deadlines for filing a grievance that is reporting an alleged incident of sexual abuse.

There is a process in policy COR 12.03 Inmate Grievance Program and ADM 08.08 Prison Rape Elimination Act to file grievances and emergency grievances. The time frames are different and COR 12.03 does not mention grievances for sexual abuse. It is recommended that the information be updated in COR 12.03 and this is in the process of being updated. The PSD PREA Coordinator indicated that there is a process in place for the Grievance Officer to notify the PREA Coordinator of all PREA related grievances. The information to file an emergency grievance is noted on posters in the facility. The requirements of the standard are met in the PREA policy. Inmates can ask for a grievance without identifying why they want the form. Sexual abuse and sexual harassment related grievances are forwarded to the PREA coordinator.

WCF did not have any grievances for sexual abuse or sexual harassment during the audit period.

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

PSD has a contract with Health and Human Services: Sex Abuse Treatment Center (SATC) for statewide sexual assault services. SATC provides sexual abuse crisis phone intakes, secondary phone contacts, crisis stabilization/counseling, and therapy

Inmates can call the Sex Abuse Treatment Center (SATC) for victim support services. Information is available on the Information Guide for Offenders – Offender Sexual Abuse and Sexual Harassment brochure.

The PREA policy ADM 08.08 has the PREA standard in policy, but doesn't state how the facilities are to

comply. For example: PSD shall provide offenders with access to outside victim advocates for emotional support services by: providing offenders with mailing address and telephone numbers for local, state, or national victim advocacy or rape crisis organization. Specific information would be helpful for the inmate and staff.

In interviews with inmates they were not aware of how to access services for emotional support. Some were aware of the information on the reporting poster, but didn't equate it with calling the sex abuse treatment center for emotional support services. Inmates are provided a brochure during intake that provides information on how to report sexual abuse but emotional support was not mentioned. The PREA coordinator responded to the auditor's concerns and added that emotional support was available to the posters. The posters now provide information how inmates can report incidents of sexual abuse as well as how to obtain emotional support services.

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

PSD allows for third party reporting in their policy and in the PREA brochure. A family member can report to staff by calling or writing a letter. However, it was not clear on how family members or inmates are informed of how their family members can report on their behalf.

PSD received a corrective action for this standard. The corrective action for PSD was to outline in the PREA policy, PREA brochures, PREA posters and any PREA handouts to family members, how family members and/or friends can report sexual abuse or sexual harassment on behalf of an inmate, then disseminate information. In addition, create a PREA webpage on the PSD website to include all the reporting information.

The PSD website now has a PREA page. The page contains information with links to "An Informational Guide for Offenders on Offender Sexual Abuse and Sexual Harassment" and the PREA poster that includes information on how to make a report. There is also information on the multiple ways available for third parties to report incidents of sexual abuse or sexual harassment on behalf of an inmate.

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

PSD has a policy, PREA policy ADM 08.08, regarding staff reporting duties. The staffs reporting duties are also reiterated in the general PREA training. All staff interviewed were aware of their reporting responsibilities.

PSD staff are required to report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports through their chain of command. PREA policy, ADM 08.08 requires that all staff immediately report any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurred in a facility, or a non-PSD facility. All staff are to immediately report any knowledge, suspicion, or information they receive regarding retaliation against an offender or staff who reported an incident.
Staff are also prohibited from revealing any information related to a sexual abuse report to anyone other than and to the extent necessary to manage treatment, investigation, and other security decisions, inclusive of reporting to the designated supervisors or officials and designated state or local service agencies.

There is no limitation for medical or mental health practitioners to report an incident of sexual abuse that occurred in a facility.

In addition, staff are required to report all allegations of sexual abuse and sexual harassment of vulnerable adults through their chain of command and send a copy to the PREA coordinator. The PREA coordinator submits the report to the Department of Human Services in accordance with Hawaii Revised Statutes –Government Title 20 Social Services 346 – 224.

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

PREA policy, ADM 08.08 requires immediate action to protect inmates from sexual abuse. When PSD staff lean than an inmate is subject to a substantial risk of imminent sexual abuse the staff member is required to take immediate action to protect the inmate. Staff interviewed were aware that immediate action was required to protect inmates.

WCF did not have any incidents where the facility determined that an inmate was subject to a substantial risk of imminent sexual abuse.

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

WCF did not receive any allegation of sexual abuse from another facility. For non-PSD facilities, the procedure is covered in the PREA policy. The PREA coordinator is responsible for providing notification as soon as possible but no later than 72 hours after receiving the allegation to the appropriate facility or agency. There have not been any reports from an inmate about a non-PSD facility.

It is not clear in policy if an incident is reported at a PSD facility what happens. The PREA Coordinator updated the PREA policy, ADM 08.08, so that it is now clear on what procedures the facilities need to follow if a report is received about any PSD facility.

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

Most staff said they would report the incident to a higher level staff member. Staff members interviewed were aware of their responsibilities.

PREA policy, ADM 08.08, outlines the facilities coordinated response for incidents of sexual abuse and the first responder response. The policy requires staff who respond to an incident of sexual abuse to separate the alleged victim and abuser, preserve and protect the crime scene, and if it within a time period that allows for the collection of physical evidence, request that the alleged victim not take any actions that could destroy physical evidence and if an abuser is identified, staff shall ensure the abuser does not destroy physical evidence. In the past 12 months there were two reports of sexual abuse but the incidents did not require physical evidence collection.

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

The agency has a PREA incident checklist in their PREA policy but a facility response plan was not included. The corrective action was to develop a facility response plan. The facility response plan was provided which includes actions taken by first responders and the watch commander in response to an incident of sexual abuse.

PREA policy, ADM 08.08, requires that each PSD facility develop a written institutional plan to coordinate actions taken in response to an incident of sexual abuse, among staff first responders, medical and mental health practioners, investigators, and facility leadership. The standard requires that a facility develop a written institutional plan to coordinate actions taken in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators, and facility leadership.

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

There is a collective bargaining agreement for provisions of Units 3, 4, 9, 10, and 13. The agreement does not prohibit the agency's ability to remove alleged staff sexual abusers from contact with any inmate pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted.

The PREA policy ADM 08.08 requires the removal of alleged staff sexual abusers from contact with any inmate pending the outcome of an investigation and does not prohibit discipline, if warranted. PSD, or any other governmental entity responsible for collective bargaining on PSD's behalf, shall not enter into or new any collective bargaining agreement or other agreement that limits PSD's ability to: remove alleged staff sexual abusers from contact with any offender pending the outcome of an investigation; or in a determination of whether and to what extent discipline is warranted.

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 ADM 08.08 states that it protects all offenders and staff, who report sexual abuse or sexual harassment, or those who cooperate with an investigation from any form of retaliation. The PREA compliance manager, in conjunction with the warden, is charged with monitoring retaliation. The agency provides multiple protection measures in policy and monitors for at least 90 days.

During the 90 day period following a report of sexual abuse, the facility PREA compliance manger in conjunction with the warden shall monitor inmates who were reported to have suffered sexual abuse to see if there are any changes that may suggest possible retaliation by other inmates or staff.

Interviews were conducted with the agency head, warden, PREA coordinator and PREA compliance manager regarding the agencies process to protect inmate and staff from retaliation. Examples of completed retaliation monitoring reports were reviewed.

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

PSD has a policy prohibiting the placement of inmates who alleged to have suffered sexual abuse in involuntary segregated housing. PSD discourages the placement of offenders in involuntary administrative segregated housing solely because of their high risk of sexual victimization status, unless an assessment of all available alternatives has been made and there are no other available

alternatives for separating the victim from the abuser. Offenders shall have access to programs, privileges, education and work opportunities.

WCF has not had any inmate who reported being sexually abused who was held in involuntary segregated 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

PSD has a policy related to investigations for allegations of sexual abuse and/or sexual harassment. All standard requirements are met in the PREA policy, ADM 08.08.

HPD has jurisdiction on criminal investigations and Internal Affairs (IA) will conduct administrative investigations. IA investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data.

Administrative investigative written reports are to include a description of the physical and testimonial evidence, the reasoning behind credibility assessments and investigative findings of facts. The agency retains these written repots for as long as the alleged abuser is incarcerated or employed by PSD plus an additional five years.

Investigative reports provided by IA were thorough and well-written. Interviews with investigative staff conveyed that IA had a good understanding of the process and conducts investigations thoroughly and objectively.

Allegations that appear to be criminal are referred for criminal investigation. Criminal investigations were not available at the time of the due to the case still being investigated. An example of an administrative investigation was provided.

The agency provided documentation that investigators for administered investigations attended required specialized PREA training.

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

The PREA policy, ADM 08.08, states that there will not be a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. This was confirmed in interviews with the PREA coordinator and IA.

PREA AUDIT FINDINGS FOR
WAIAWA CORRECTIONAL FACILITY

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

PREA policy, ADM 08.08, meets the standard requirements. The policy requires upon completion of an administrative or criminal investigation for sexual abuse, facility staff shall inform the inmate the outcome of the investigation. Additionally, for staff on inmate allegations, PSD shall inform the inmate information if the staff member is no longer posted within the inmate's unit, or employed at the facility, indicted on a charge related to sexual abuse within the facility or if the staff member has been convicted on a charge related to sexual abuse within the facility. If PSD did not conduct the investigation, the facility or PSD shall request the relevant information from the external investigative agency.

This facility has an open investigation and the alleged victim was updated on the status of the investigation during the audit. There has been no other sexual harassment or sexual abuse allegations in the past 12 months.

During the corrective action period one of the investigations was closed and documentation of victim notification was provided.

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

PREA policy, ADM 08.08, meets the standard requirements. It outlines the disciplinary sanctions up to and including termination for sexual abuse or sexual harassment policy violations. PSD shall also report the incident to any relevant licensing body applicable to the staff member.

There were no reports that were required to be reported to a licensing body during the previous 12 months. Documentation of a list of employees who received disciplinary sanctions was reviewed.

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

The PREA policy requires allegations determined to be criminal to be referred to HPD and contractors

and volunteers will be terminated if found to have committed sexual abuse or sexual harassment. PSD is required to report incidents to any relevant licensing body applicable to the contractor or volunteer.

WCF reported that there were no cases involving contractors or volunteers within past 12 months reported to law enforcement for engaging in sexual abuse of inmates.

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

Inmates are subject to disciplinary sanctions if they violate and are adjudicated as guilty of a misconduct violation.

Sanctions are commensurate with the nature and circumstances of the abuse committed.

Inmates are disciplined for sexual contact with staff only upon a finding that the staff member did not consent to such contact and inmates are not subject to discipline for a report of sexual abuse made in good faith. A memo was received that is to document that WCF does not and has not disciplined any inmates for reporting a PREA incident in good faith.

Inmates can be required to go to sex offender treatment, if medical, mental heath and facility staff recommend the inmate abuser participate in treatment. Interviews with medical said that services designed to correct the underlying reasons or motivations for sexual abuse the inmates are sent to Halawa Correctional Facility.

WCF reported that in the past 12 months there were no administrative or criminal findings of inmate on inmate sexual abuse.

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

PREA policy, ADM 08.08, states that any inmate who discloses prior sexual victimization will be offered a follow-up meeting with medical or mental health practitioners within 14 days and that an inmate who discloses previous perpetration of sexual abuse will be offered a follow-up meeting with a mental health practitioner within 14 days. Inmates are informed of any limits on confidentiality.

The standard received a corrective action and required WCF to provide documentation that referrals are made within 14 days of the intake screening pursuant to standard 115.41. A memo was received

that states that normally an assessment has been conducted prior to the inmates transfer to WCF. If an incident occurs at WCF related to sexual victimization or perpetrated sexual abuse, then WCF health care unit would make the required referral to mental health staff at Halawa Correctional Facility.

In the past 12 months, no inmates disclosed a prior victimization during screening. In the past 12 months no inmates have reported previous perpetrating sexual abuse during the screening.

WCF has an inmate informed consent form. It authorizes the release of medical or mental health information.

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

Inmates are transported to the local hospital or SATC for medical care and forensic evidence collection. The SATC offers sexually transmitted infections prophylaxis. Mental health treatment is offered at the facility. Treatment is provided at no cost to the inmate.
This standard received a corrective action and WCF was required to provide documentation that if a report of sexual abuse/assault is received outside of the 72 hours that allows for evidence collection, the inmate is still provided sexually transmitted infections prophylaxis, if warranted, to be compliant.

A memo was provided that states is an inmate alleges sexual abuse within 72 hours, then they are transported to the SATC for the forensic medical exam, STD testing, and victim advocate services in male facilities. If a sexual abuse is outside the above time frame, then WCF Health Unit would make the referral to HCF Mental Health and conduct any STD testing. All services provided to the alleged sexual abuse victim are based on the community standard of care and is at no cost to the alleged victim.

PREA policy, ADM 08.08 requires that offender victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services. If qualified medical or mental health staff are not on duty at the time of the report, the security staff or first responder shall take preliminary steps to protect the victim. Victims of sexual abuse shall also be offered access to sexually transmitted infections prophylaxis in accordance with accepted community standard of care and the victim may receive these services without financial cost.

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

Ongoing medical and mental health care for victims is provided at the facility. SATC offers victims counseling and is available by phone or inmates can be taken to the treatment center for counseling services.

The PREA policy, ADM 08.08 complies with the requirements in the standard. It requires medical and mental health evaluations, and treatment of inmates who have been victimized by sexual abuse. The evaluation and treatment of such victims includes follow-up services, treatment plans and when necessary referrals for continued care following their transfer to or placement in other facilities or release from custody. PSD provides inmate victims of sexual abuse with medical and mental health services. Mental health staff 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.

Standards 115.83 (d) and (e) were not applicable since WCF is a male facility.

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 standard is required in the PREA policy and there is a review form for staff to use. WCF did not have any sexual abuse incidents that required a review during the past 12 months.

WCF currently has one PREA incident under investigation. During the corrective action period one investigation was completed and the incident review was done by the facility even though it was unfounded. Documentation of the review was received.

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

Uniform data is collected which tracks allegations of sexual abuse. PSD aggregates the incidents annually for each facility for the U.S. Department of Justice Bureau of Justice Statistics Survey of Sexual Violence. They collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions. The standardized format includes data necessary to answer all questions from the most recent version of the survey of sexual violence conducted by the Department of Justice.
Interviews and review of the SSVs determined that PSD collects uniform data for allegations of sexual abuse.

Aggregate data is contained in the Annual Report. It includes PSD data on sexual abuse and sexual

harassment incidents in state run facilities as well as private prisons under contract with the state.

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

An annual report is prepared for the legislature, but it is not the same report required by the PREA standard. This standard was not compliant and received a corrective action to prepare a report which includes a review of data collected and aggregated pursuant to standard 115.87 in order to assess and improve the effectiveness of the agency's sexual abuse prevention, detection, and response policies, practices and training including by:

-Identifying problem areas,
-Taking corrective action on an ongoing basis and
-Preparing an annual report of its findings and corrective actions for each facility, as well as the agency, as a whole.

Said report shall include a comparison of the current year's data and corrective actions with those from prior years and shall provide an assessment of the agency's process in addressing sexual abuse. The agency's report shall be approved by the agency head and made readily available to the public through its website.

Additionally, PSD may redact specific material when publication would present a clear and specific threat to the safety and security of a facility.

The agency received a corrective action to develop annual report and then have it available on its website. The Annual Report is now posted on the website. It includes statistical information for each facility and private prison. There is a section that provides information on the department's progress and summary of their advancement towards PREA compliance. PSD plans to include corrective action information of incidents in their next Annual Report.

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

The PREA coordinator maintains the data and it is kept for at least ten years.

The PREA coordinator is responsible to make all aggregated sexual abuse data from facilities under its direct control and private facilities with which it contracts readily available to the public at least annually on its department website. The information was not made publicly available on the website. The agency received a corrective action which required the agency to develop a PREA

webpage on its website. Once the website is established, the PREA Annual Report, statistics, policy, and reporting information are on the website, this standard requirement will be fulfilled.

PSD received a corrective action for this standard to allow them time to get aggregated data on their web page. Each facility and private prisons aggregated sexual abuse data is now available on the website in the Annual Report.

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.

LaCole Archulette — 2-6-15

LaCole Archulette, Certified DOJ PREA Auditor — Date