

PREA AUDIT: AUDITOR'S SUMMARY REPORT

ADULT PRISONS & JAILS

NATIONAL
PREA
RESOURCE
CENTER



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Bureau of Justice Assistance
U.S. Department of Justice

[Following information to be populated automatically from pre-audit questionnaire]		
Name of facility: Oregon State Penitentiary		
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Date report submitted: 1-7- 15		
Auditor Information		
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Date of facility visit: August 18-20, 2014		
Facility Information		
Facility mailing address: (if different from above)		
Telephone number: 503-373-1140		
The facility is:		
<input type="checkbox"/> Military	<input type="checkbox"/> County	<input type="checkbox"/> Federal
<input type="checkbox"/> Private for profit	<input type="checkbox"/> Municipal	<input checked="" type="checkbox"/> State
<input type="checkbox"/> Private not for profit		
Facility Type: <input type="checkbox"/> Jail <input checked="" type="checkbox"/> Prison		
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Governing authority or parent agency: (if applicable)		
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AUDIT FINDINGS

NARRATIVE:

A PREA Audit was conducted at the Oregon State Penitentiary (OSP) on August 18-20, 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 OSP, 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 18, 2014, an entrance meeting was held where introductions were made. Several staff members were present at the meeting which included OSP executive team members Superintendent Jeff Premo, PREA Compliance Manager Thomas Wright, Lt. Shamroque D. Alvis, Sgt. Richard Wallace and CDOC PREA Coordinator Ericka Sage.

On August 18, 2014, OSP was toured. Additional tours of specific areas of the facility were toured on August 19 and 20. The tour was conducted primarily by Lt. Alvis and Sgt. Wallace. During the tour, random inmates and staff were talked with about their understanding of the PREA standards and/or facilities PREA policies. Interviews were conducted on-site with staff and inmates using the PREA interview questions. For the audit, interviews included thirty inmates and thirty-one random and specialized staff members. The entire facility was toured which included the housing units, administration units, recreational area, medical, industry areas, control center, tower, and intake.

All letters that were received prior to the audit that wrote with relevant PREA concerns within the audit period were interviewed. A letter from an inmate with a PREA concern was received after the on-site audit and a telephone interview was arranged.

Additional documents were reviewed and requested throughout the audit as well as after the audit.

After the audit, several letters were received, most being from inmates who had previously written. Those letters were referred to the ODOC PREA Coordinator for review or investigation as the PREA Coordinator stated that some had previously been investigated.

During the audit, inmates expressed concerns that a female staff member was in the same area while they were showering in the clothing room showers. This was brought to the attention of facility PREA compliance manager and immediate changes were made. Due to the concerns of the inmates, OSP immediately changed the time when opposite-gender staff would be in the area so that no female staff will be in view of the inmate shower areas during shower times.

Another area of concern was the outside toilets which had a direct view from Tower 5. Facility staff immediately took measures to block the area from view of the tower or anyone passing by the area. Temporary screens were placed until permanent ones could be installed.

A few inmates said they noticed an improvement in the facility's culture in the past few years since implementation of the PREA standards. The inmates are seeing noticeable changes regarding how PREA related issues are addressed. Inmates have noticed that there are fewer jokes about being gay and bi-sexual. In the past, some inmate views were that investigations were not kept confidential and that inmates might be retaliated against by being moved for reporting a sexual abuse or sexual harassment incident. These inmates have seen improvements in the reporting, investigations process and the facility's culture.

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

The Oregon State Penitentiary (OSP) is Oregon's first prison. It was built on 26-acre site in Salem in 1866. The facility is enclosed by a reinforced concrete wall averaging 25 feet in height. OSP is the state's only maximum security prison.

OSP has a special housing unit for maximum custody inmates; disciplinary segregation; offenders with psychiatric problems; and inmates sentenced to death.

Most housing in the penitentiary is in large cell blocks with most inmates housed in double cells. The penitentiary also has a full service infirmary.

The mission of the Oregon State Penitentiary is to assure public safety by providing:

A safe and secure environment for all persons;

Program and rehabilitative opportunities to enhance inmate ability to reintegrate into the community;

Work and leisure time activities to reduce inmate idleness;

Habilitative services for special needs inmates within the Oregon Department of Corrections (ODOC).

OSP makes numerous programs available to inmates. These programs include education and work force development. The educational programs include Adult Basic Education, GED, English as a Second Language, and an automotive repair vocational training program. Inmates who meet requirements can also participate in college level correspondence courses (at their own expense). Jobs within OSP are available in maintenance, food service, the furniture factory, metal shop and the laundry.

Programs available to inmates at OSP are mental health, religious, and cognitive programs.

The facility offers many unique opportunities for the inmates from a variety of jobs to access to MP3 players and video phones.

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
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- 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 emphasizes 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. In addition, the facility has a lieutenant assigned to assist with compliance 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
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- 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
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- 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 PREA 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.

Additional cameras and/or video monitoring are recommended. A few areas identified in the facilities PREA staffing plan should be given top priority and added as budget funding permits.

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 employees were trained.

The facility said there had not been any incidents 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.

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.

During the audit, inmates expressed concerns that a female staff member was in the same area while they were showering in the clothing room showers. This was brought to the attention of facility PREA compliance manager and immediate changes were made. OSP changed the time when opposite gender staff would be in the area so that no female staff will be in view of the inmate shower areas when inmates are showering.

In addition, there were a couple toilets and shower areas or camera views of toilet and shower areas where modifications were made during the audit. OSP staff were responsive to auditor concerns or recommendations.

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 enter the unit. Both staff and inmates were aware of what the audio alert meant. Both staff and inmates acknowledged that the audio alert was being used when opposite gender staff entered an inmate housing unit as well as this was observed during the audit.

115.16	INMATES WITH DISABILITIES AND INMATES WHO ARE LIMITED ENGLISH PROFICIENT
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- 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. A copy of the Spanish version was provided. 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.

115.17	HIRING AND PROMOTION DECISIONS
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- 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.

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
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- 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
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- 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 diseases 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.

The SANE Coordinator at Salem 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 is that a victim advocate from the District Attorney's office is paged to respond to provide advocacy services.

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.

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, Investigations policy 70.1.4 and flow charts which were provided. Examples of an administrative and a criminal investigation were provided to demonstrate compliance with the standard.

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. 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 policies 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.

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 within 30 days of intake which includes a video about the agency's 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 random reviews of inmate education documentation.

Information about the ODOC zero-tolerance policy including how to report abuse is included in the inmate handbook. The information is also available in Spanish.

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

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 to support that investigators received the specialized training was 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 (HS) and Behavioral Health Services (BHS) staff receive training. BHS and HS staff were able to demonstrate that they had been trained in each of the elements of the standard.

Documentation was 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 medical exams 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 within seventy-two hours at the agency's intake facility. When an inmate is received at OSP, 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, staff 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.

The PREA Coordinator provided a memo that inmates are not detained solely for civil immigration purposes.

115.42	USE OF SCREENING INFORMATION
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- 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. A facility staff member then 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 and intersex inmates have the ability to shower separately from other inmates. Single showers are available.

Inmates are also allowed to shower in the infirmary upon request.

115.43	PROTECTIVE CUSTODY
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- 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 states that inmates that are 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. At OSP, 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 would be followed. Documentation provided by OSP stated there were no inmates placed into involuntary segregation during the audit period.

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, call the 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 ODCOC 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 posing 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.

Examples provided by OSP of grievances alleging sexual abuse/harassment responses were replied

to within the required timeframes.

OSP said that there were no emergency grievances during this 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

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 General'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. The policy requires that staff accept reports made verbally, in writing, anonymously and from third parties and shall promptly document and reports. Upon notification by an inmate that he/she has been sexually abused or coerced into unwanted sexual contact the staff member shall immediately complete the staff reporting responsibilities form (CD 1620). During interviews staff were aware of their responsibility to report. Staff understand they are not to reveal any information to anyone other than to those who have a need to know. Medical/Mental Health staff also understand their responsibilities to report to include the limitation of confidentiality. Staff interviews confirmed their knowledge to report all allegations of sexual abuse and sexual harassment.

OSP 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 that there were no incidents where an inmate was subject to substantial risk of imminent sexual abuse.

The standard is also covered in OSP'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 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.

115.64	STAFF FIRST RESPONDER DUTIES
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- 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. OSP'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.

OSP provided blank forms of their OIC checklist, PREA acknowledgement statement, Staff Reporting Responsibilities and the front and back of a PREA card for supporting documentation.

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

115.65	COORDINATED RESPONSE
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- 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

OSP has an institutional plan that directs a coordinated response to an incident of sexual abuse that includes notification to specific staff members or facility leadership. Sexual Assault Response Team (SART) implementation proved they exceed the standard with their coordinated

response. Additionally, sexual assault response team members are provided additional training.

OSP provided blank copies of their OIC PREA Checklist, Reporting Flowchart and agency Response and Notification Flowchart.

OSP follows Procedure 39 – Responding to Sexual Abuse and Sexual Harassment Allegations which outlines the process for investigating, responding to and review of allegations of sexual abuse and sexual harassment at OSP.

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 state of Oregon and Association of Oregon Corrections 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 stating 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.

OSP has a process in place to keep reports confidential. All reports that are received go through the PREA Coordinator and to the Superintendent and are then referred for investigation. Limited staff have access to the information.

All actions taken to monitor retaliation are done by the PREA compliance manager and documented and then 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.

OSP 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 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. The flow chart attached to policy 70-1-4 explains the process for each type of allegation and identifies who would investigate the allegation.

Reports provided for documentation were detailed and includes all criteria required in this standard. Interviews with specialized staff indicate familiarity with the PREA policy.

The Investigations Policy 70.1.4 describes the investigative responsibilities.

Different parts of this standard are in the PREA policy 40.1.13, Investigations policy 70.1.4 and Criminal Evidence Handling policy 70.1.3.

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

A criminal and an administrative investigation were provided to demonstrate compliance with 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.

OSP 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.

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.

PREA policy 40.1.13 requires that an inmate allegation of sexual abuse be referred for investigation. Following an investigation, the PREA compliance manager 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.

The facility provided documentation which indicates follow up with inmates who reported sexual abuse. Interviews with SART team members indicate cases are followed up with on a regular basis. Completed ODOC PREA reporting to inmate forms reviewed demonstrate compliance with this standard.

115.76	DISCIPLINARY SANCTIONS FOR STAFF
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
Auditor comments, including corrective actions needed if does not meet standard	
<p>Policy 20.1.3 Code of Conduct states that inappropriate relationships with inmates could result in appropriate disciplinary action, up to and including dismissal.</p> <p>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.</p> <p>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.</p>	

115.77	CORRECTIVE ACTION FOR CONTRACTORS AND VOLUNTEERS
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
Auditor comments, including corrective actions needed if does not meet standard	
<p>According to staff, all guidelines apply to contract staff and volunteers alike. The 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.</p> <p>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.</p> <p>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.</p>	

115.78	DISCIPLINARY SANCTIONS FOR INMATES
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
Auditor comments, including corrective actions needed if does not meet standard	
<p>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.</p> <p>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.</p> <p>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.</p> <p>Documentation was reviewed to demonstrate that inmates are not disciplined for reporting sexual abuse or sexual harassment.</p> <p>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.</p>	

115.81	MEDICAL AND MENTAL HEALTH SCREENINGS; HISTORY OF SEXUAL ABUSE
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
Auditor comments, including corrective actions needed if does not meet standard	
<p>If an inmate discloses being sexually abused or sexually aggressive/predatory, a referral it 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.</p>	

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

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

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

Health Services Policy on Procedures #P-B-05 (Procedure in the Event of Sexual Assault) and 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.

OSP provided a memo that Behavioral Health Services staff will assist in arranging transport to the local hospital which would be Salem Hospital or other 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. OSP 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
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- 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

OSP 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 policies 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
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- 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 14 investigations in the past 12 months for allegations of sexual abuse, excluding unfounded incidents. All were followed by a sexual abuse incident review within 30 days, excluding unfounded incidents.

According to the facility, incident reviews are conducted on investigations in which allegations are found to be substantiated or unsubstantiated. An incident review was provided to show compliance with the standard.

The document that ODOC uses for incident reviews contains all the required standard elements that the review team shall consider. After the review a report is generated and the findings are provided to the superintendent and PREA Coordinator. The PREA Coordinator provided documentation that shows she had a meeting with the PREA Compliance Managers and SART Liaisons in which she explained the required process.

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
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- 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 collects 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 collection and requirements to comply with this standard are in the PREA policy 40.1.13.

115.88	DATA REVIEW FOR CORRECTIVE ACTION
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- 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 nothing is put on the ODOC's website without the Director's approval.

115.89	DATA STORAGE, PUBLICATION, AND DESTRUCTION
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- 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.

La Cole Archuleta
Auditor Signature

1-7-15
Date