

# PREA Facility Audit Report: Final

**Name of Facility:** Bayside State Prison

**Facility Type:** Prison / Jail

**Date Interim Report Submitted:** NA

**Date Final Report Submitted:** 07/27/2025

## Auditor Certification

The contents of this report are accurate to the best of my knowledge.



No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.



I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.



**Auditor Full Name as Signed:** Darren L. Bryant

**Date of Signature:** 07/27/2025

## AUDITOR INFORMATION

**Auditor name:** Bryant, Darren

**Email:** dbryant357@msn.com

**Start Date of On-Site Audit:** 06/09/2025

**End Date of On-Site Audit:** 06/11/2025

## FACILITY INFORMATION

**Facility name:** Bayside State Prison

**Facility physical address:** 4293 Route 47, Maurice River, New Jersey - 08327

**Facility mailing address:** Same as physical address,

## Primary Contact

|                          |                          |
|--------------------------|--------------------------|
| <b>Name:</b>             | Rebecca Smith            |
| <b>Email Address:</b>    | Rebecca.Smith@doc.nj.gov |
| <b>Telephone Number:</b> | 856-785-0040 x 5101      |

| <b>Warden/Jail Administrator/Sheriff/Director</b> |                       |
|---|-----------------------|
| <b>Name:</b>                                      | Alycia Lewis          |
| <b>Email Address:</b>                             | ycia.Lewis@doc.nj.gov |
| <b>Telephone Number:</b>                          | 856-785-0040 x 5107   |

| <b>Facility PREA Compliance Manager</b> |  |
|---|--|
| <b>Name:</b>                            |  |
| <b>Email Address:</b>                   |  |
| <b>Telephone Number:</b>                |  |

| <b>Facility Health Service Administrator On-site</b> |                         |
|--|-------------------------|
| <b>Name:</b>   | Amanda Mihaich          |
| <b>Email Address:</b>                                | am3768@ubhc.rutgers.edu |
| <b>Telephone Number:</b>                             | 856-785-0040 x 5314     |

| <b>Facility Characteristics</b>  |          |
|--|----------|
| <b>Designed facility capacity:</b>   | 1377     |
| <b>Current population of facility:</b>   | 1276     |
| <b>Average daily population for the past 12 months:</b>                        | 1272     |
| <b>Has the facility been over capacity at any point in the past 12 months?</b> | No       |
| <b>What is the facility's population designation?</b>                          | Men/boys |

|   |  |
|---|--|
| <b>In the past 12 months, which population(s) has the facility held? Select all that apply (Nonbinary describes a person who does not identify exclusively as a boy/man or a girl/woman. Some people also use this term to describe their gender expression. For definitions of “intersex” and “transgender,” please see <a href="https://www.prearesourcecenter.org/standard/115-5">https://www.prearesourcecenter.org/standard/115-5</a>)</b> |  |
| <b>Age range of population:</b>   | 20-72  |
| <b>Facility security levels/inmate custody levels:</b>  | Closed custody, Max, Medium, Gang Min and Full Min |
| <b>Does the facility hold youthful inmates?</b>   | No   |
| <b>Number of staff currently employed at the facility who may have contact with inmates:</b>  | 514  |
| <b>Number of individual contractors who have contact with inmates, currently authorized to enter the facility:</b>  | 25   |
| <b>Number of volunteers who have contact with inmates, currently authorized to enter the facility:</b>  | 14   |

| <b>AGENCY INFORMATION</b>                                    |   |
|--|---|
| <b>Name of agency:</b>                                       | New Jersey Department of Corrections                |
| <b>Governing authority or parent agency (if applicable):</b> |   |
| <b>Physical Address:</b>                                     | 1300 Stuyvesant Avenue, Trenton, New Jersey - 08618 |
| <b>Mailing Address:</b>                                      |   |
| <b>Telephone number:</b>                                     | 6092924036  |

|  |
|--|
| <b>Agency Chief Executive Officer Information:</b> |
|--|

|                          |                              |
|--------------------------|------------------------------|
| <b>Name:</b>             | Comm. Victoria L. Kuhn, Esq. |
| <b>Email Address:</b>    | Victoria.Kuhn@doc.nj.gov     |
| <b>Telephone Number:</b> | 609-292-4036-5656            |

| Agency-Wide PREA Coordinator Information |              |                       |                           |
|--|--------------|-----------------------|---------------------------|
| <b>Name:</b>                             | Sandra Capra | <b>Email Address:</b> | Sandra.a.capra@doc.nj.gov |

| Facility AUDIT FINDINGS  |  |
|--|--|
| Summary of Audit Findings  |  |
| <p>The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.</p> <p>Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.</p> |  |
| <b>Number of standards exceeded:</b>   |  |
| 0  |  |
| <b>Number of standards met:</b>  |  |
| 45   |  |
| <b>Number of standards not met:</b>  |  |
| 0  |  |

## POST-AUDIT REPORTING INFORMATION

Please note: Question numbers may not appear sequentially as some questions are omitted from the report and used solely for internal reporting purposes.

### GENERAL AUDIT INFORMATION

#### On-site Audit Dates

|   |            |
|---|------------|
| 1. Start date of the onsite portion of the audit: | 2025-06-09 |
| 2. End date of the onsite portion of the audit:   | 2025-06-11 |

#### Outreach

|   |  |
|---|--|
| 10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility? | <input checked="" type="radio"/> Yes<br><input type="radio"/> No |
| a. Identify the community-based organization(s) or victim advocates with whom you communicated:   | Inspira Medical Center Vineland                                  |

### AUDITED FACILITY INFORMATION

|  |  |
|--|--|
| 14. Designated facility capacity:  | 1377   |
| 15. Average daily population for the past 12 months:                             | 1272   |
| 16. Number of inmate/resident/detainee housing units:                            | 12   |
| 17. Does the facility ever hold youthful inmates or youthful/juvenile detainees? | <input type="radio"/> Yes<br><input checked="" type="radio"/> No<br><input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility) |

## **Audited Facility Population Characteristics on Day One of the Onsite Portion of the Audit**

### **Inmates/Residents/Detainees Population Characteristics on Day One of the Onsite Portion of the Audit**

|  |      |
|--|------|
| <b>23. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:</b>   | 1277 |
| <b>25. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:</b>  | 6    |
| <b>26. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:</b> | 229  |
| <b>27. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:</b>  | 1    |
| <b>28. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:</b>   | 1    |
| <b>29. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:</b>  | 53   |
| <b>30. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:</b>   | 4    |

|  |                   |
|--|-------------------|
| <b>31. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:</b>   | 1                 |
| <b>32. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:</b>   | 9                 |
| <b>33. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:</b>  | 7                 |
| <b>34. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:</b>                                     | 0                 |
| <b>35. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):</b> | No text provided. |
| <b>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</b>   |                   |
| <b>36. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:</b>   | 514               |
| <b>37. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</b>   | 14                |

|   |   |
|---|---|
| 38. Enter the total number of <b>CONTRACTORS</b> assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:                 | 25  |
| 39. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit: | No text provided.   |
| <b>INTERVIEWS</b>   |   |
| <b>Inmate/Resident/Detainee Interviews</b>  |   |
| <b>Random Inmate/Resident/Detainee Interviews</b>   |   |
| 40. Enter the total number of <b>RANDOM INMATES/RESIDENTS/DETAINEES</b> who were interviewed:   | 26  |
| 41. Select which characteristics you considered when you selected <b>RANDOM INMATE/RESIDENT/DETAINEE</b> interviewees: (select all that apply)  | <input checked="" type="checkbox"/> Age<br><input checked="" type="checkbox"/> Race<br><input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic)<br><input checked="" type="checkbox"/> Length of time in the facility<br><input checked="" type="checkbox"/> Housing assignment<br><input type="checkbox"/> Gender<br><input type="checkbox"/> Other<br><input type="checkbox"/> None |
| 42. How did you ensure your sample of <b>RANDOM INMATE/RESIDENT/DETAINEE</b> interviewees was geographically diverse?   | Auditor selected inmates from each housing unit.  |
| 43. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?  | <input checked="" type="radio"/> Yes<br><input type="radio"/> No  |



|   |                   |
|---|-------------------|
| <b>44. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</b>  | No text provided. |
| <b>Targeted Inmate/Resident/Detainee Interviews</b>   |                   |
| <b>45. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</b>   | 23                |
| <p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p> |                   |
| <b>47. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:</b>   | 2                 |
| <b>48. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:</b>  | 2                 |
| <b>49. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:</b>   | 4                 |

|   |   |
|---|---|
| <b>50. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</b>  | 3   |
| <b>51. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</b>   | 3   |
| <b>52. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</b>                                     | 4   |
| <b>53. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</b>                                       | 0   |
| <b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b>  | <p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p> |
| <b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b> | Auditor questioned staff, Institutional PREA Compliance Manager, Medical, and Inmates. All interviewed parties informed auditor that two Transgender inmates put in transfers to other facilities. Those Transgender inmates transferred to other facilities last year.   |

|  |   |
|--|---|
| <b>54. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</b>  | 2   |
| <b>55. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</b>   | 3   |
| <b>56. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:</b> | 0   |
| <b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b>   | <p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p> |
| <b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b>  | Bayside State Prison did not house any inmates in segregated housing for risk of victimization. This was learned during the audit from staff, and inmate interviews. Auditor reviewed the Segregation Housing Log. Auditor conducted further interviews with the Facility Administrator, and Institutional PREA Compliance Manager. |
| <b>57. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</b>  | No text provided.   |

## Staff, Volunteer, and Contractor Interviews

### Random Staff Interviews

**58. Enter the total number of RANDOM STAFF who were interviewed:**

23

**59. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)**

- ☒ Length of tenure in the facility
- ☒ Shift assignment
- ☒ Work assignment
- ☒ Rank (or equivalent)
- ☐ Other (e.g., gender, race, ethnicity, languages spoken)
- ☐ None

**60. Were you able to conduct the minimum number of RANDOM STAFF interviews?**

- ☒ Yes
- ☐ No

**61. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):**

No text provided.

### Specialized Staff, Volunteers, and Contractor Interviews

Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.

**62. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):**

22

**63. Were you able to interview the Agency Head?**

- ☒ Yes
- ☐ No

|  |  |
|--|--|
| <b>64. Were you able to interview the Warden/Facility Director/Superintendent or their designee?</b> | <input checked="" type="radio"/> Yes<br><input type="radio"/> No   |
| <b>65. Were you able to interview the PREA Coordinator?</b>  | <input checked="" type="radio"/> Yes<br><input type="radio"/> No   |
| <b>66. Were you able to interview the PREA Compliance Manager?</b>                                   | <input checked="" type="radio"/> Yes<br><input type="radio"/> No<br><br><input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards) |

**67. Select which SPECIALIZED STAFF roles were interviewed as part of this audit from the list below: (select all that apply)**

- ☒ Agency contract administrator
- ☒ Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment
- ☐ Line staff who supervise youthful inmates (if applicable)
- ☐ Education and program staff who work with youthful inmates (if applicable)
- ☒ Medical staff
- ☒ Mental health staff
- ☐ Non-medical staff involved in cross-gender strip or visual searches
- ☒ Administrative (human resources) staff
- ☒ Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff
- ☒ Investigative staff responsible for conducting administrative investigations
- ☒ Investigative staff responsible for conducting criminal investigations
- ☒ Staff who perform screening for risk of victimization and abusiveness
- ☒ Staff who supervise inmates in segregated housing/residents in isolation
- ☒ Staff on the sexual abuse incident review team
- ☒ Designated staff member charged with monitoring retaliation
- ☒ First responders, both security and non-security staff
- ☒ Intake staff

|   |   |
|---|---|
|   | <input type="checkbox"/> Other  |
| <b>68. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?</b>                           | <input checked="" type="radio"/> Yes<br><input type="radio"/> No  |
| <b>a. Enter the total number of VOLUNTEERS who were interviewed:</b>  | 3   |
| <b>b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)</b>  | <input checked="" type="checkbox"/> Education/programming<br><input checked="" type="checkbox"/> Medical/dental<br><input type="checkbox"/> Mental health/counseling<br><input checked="" type="checkbox"/> Religious<br><input type="checkbox"/> Other                             |
| <b>69. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?</b>                          | <input checked="" type="radio"/> Yes<br><input type="radio"/> No  |
| <b>a. Enter the total number of CONTRACTORS who were interviewed:</b>   | 2   |
| <b>b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)</b> | <input type="checkbox"/> Security/detention<br><input type="checkbox"/> Education/programming<br><input checked="" type="checkbox"/> Medical/dental<br><input type="checkbox"/> Food service<br><input type="checkbox"/> Maintenance/construction<br><input type="checkbox"/> Other |
| <b>70. Provide any additional comments regarding selecting or interviewing specialized staff.</b>   | No text provided.   |

## SITE REVIEW AND DOCUMENTATION SAMPLING

### Site Review

PREA Standard 115.401 (h) states, "The auditor shall have access to, and shall observe, all areas of the audited facilities." In order to meet the requirements in this Standard, the site review portion of the onsite audit must include a thorough examination of the entire facility. The site review is not a casual tour of the facility. It is an active, inquiring process that includes talking with staff and inmates to determine whether, and the extent to which, the audited facility's practices demonstrate compliance with the Standards. Note: As you are conducting the site review, you must document your tests of critical functions, important information gathered through observations, and any issues identified with facility practices. The information you collect through the site review is a crucial part of the evidence you will analyze as part of your compliance determinations and will be needed to complete your audit report, including the Post-Audit Reporting Information.

**71. Did you have access to all areas of the facility?**

☒ Yes

☐ No

**Was the site review an active, inquiring process that included the following:**

**72. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?**

☒ Yes

☐ No

**73. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?**

☒ Yes

☐ No

**74. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?**

☒ Yes

☐ No

**75. Informal conversations with staff during the site review (encouraged, not required)?**

☒ Yes

☐ No



|  |   |
|--|---|
| <b>76. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).</b>  | No text provided.   |
| <b>Documentation Sampling</b>  |   |
| Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.   |   |
| <b>77. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?</b>  | <input checked="checked" type="radio"/> Yes<br><br><input type="radio"/> No |
| <b>78. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).</b>   | No text provided.   |
| <b>SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY</b>  |   |
| <b>Sexual Abuse and Sexual Harassment Allegations and Investigations Overview</b>  |   |
| Remember the number of allegations should be based on a review of all sources of allegations (e.g., hotline, third-party, grievances) and should not be based solely on the number of investigations conducted. Note: For question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, or detainee sexual abuse allegations and investigations, as applicable to the facility type being audited. |   |

**79. Total number of SEXUAL ABUSE allegations and investigations overview during the 12 months preceding the audit, by incident type:**

|                                      | # of sexual abuse allegations | # of criminal investigations | # of administrative investigations | # of allegations that had both criminal and administrative investigations |
|--------------------------------------|-------------------------------|------------------------------|------------------------------------|---|
| <b>Inmate-on-inmate sexual abuse</b> | 7                             | 0                            | 7                                  | 0   |
| <b>Staff-on-inmate sexual abuse</b>  | 2                             | 0                            | 2                                  | 0   |
| <b>Total</b>                         | 9                             | 0                            | 9                                  | 0   |

**80. Total number of SEXUAL HARASSMENT allegations and investigations overview during the 12 months preceding the audit, by incident type:**

|   | # of sexual harassment allegations | # of criminal investigations | # of administrative investigations | # of allegations that had both criminal and administrative investigations |
|---|------------------------------------|------------------------------|------------------------------------|---|
| <b>Inmate-on-inmate sexual harassment</b> | 1                                  | 0                            | 1                                  | 0   |
| <b>Staff-on-inmate sexual harassment</b>  | 1                                  | 0                            | 1                                  | 0   |
| <b>Total</b>                              | 2                                  | 0                            | 2                                  | 0   |

## Sexual Abuse and Sexual Harassment Investigation Outcomes

### Sexual Abuse Investigation Outcomes

Note: these counts should reflect where the investigation is currently (i.e., if a criminal investigation was referred for prosecution and resulted in a conviction, that investigation outcome should only appear in the count for “convicted.”) Do not double count. Additionally, for question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, and detainee sexual abuse investigation files, as applicable to the facility type being audited.

#### 81. Criminal SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:

|                               | Ongoing | Referred for Prosecution | Indicted/ Court Case Filed | Convicted/ Adjudicated | Acquitted |
|-------------------------------|---------|--------------------------|----------------------------|------------------------|-----------|
| Inmate-on-inmate sexual abuse | 0       | 0                        | 0                          | 0                      | 0         |
| Staff-on-inmate sexual abuse  | 0       | 0                        | 0                          | 0                      | 0         |
| Total                         | 0       | 0                        | 0                          | 0                      | 0         |

#### 82. Administrative SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:

|                               | Ongoing | Unfounded | Unsubstantiated | Substantiated |
|-------------------------------|---------|-----------|-----------------|---------------|
| Inmate-on-inmate sexual abuse | 0       | 2         | 5               | 0             |
| Staff-on-inmate sexual abuse  | 0       | 0         | 2               | 0             |
| Total                         | 0       | 2         | 7               | 0             |

### Sexual Harassment Investigation Outcomes

Note: these counts should reflect where the investigation is currently. Do not double count. Additionally, for question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, and detainee sexual harassment investigation files, as applicable to the facility type being audited.

**83. Criminal SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:**

|   | Ongoing | Referred for Prosecution | Indicted/ Court Case Filed | Convicted/ Adjudicated | Acquitted |
|---|---------|--------------------------|----------------------------|------------------------|-----------|
| <b>Inmate-on-inmate sexual harassment</b> | 0       | 0                        | 0                          | 0                      | 0         |
| <b>Staff-on-inmate sexual harassment</b>  | 0       | 0                        | 0                          | 0                      | 0         |
| <b>Total</b>                              | 0       | 0                        | 0                          | 0                      | 0         |

**84. Administrative SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:**

|   | Ongoing | Unfounded | Unsubstantiated | Substantiated |
|---|---------|-----------|-----------------|---------------|
| <b>Inmate-on-inmate sexual harassment</b> | 0       | 0         | 1               | 0             |
| <b>Staff-on-inmate sexual harassment</b>  | 0       | 0         | 1               | 0             |
| <b>Total</b>                              | 0       | 0         | 2               | 0             |

**Sexual Abuse and Sexual Harassment Investigation Files Selected for Review**

**Sexual Abuse Investigation Files Selected for Review**

**85. Enter the total number of SEXUAL ABUSE investigation files reviewed/ sampled:**

9

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| <b>86. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</b> | <input checked="" type="radio"/> Yes<br><input type="radio"/> No<br><input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)                  |
| <b>Inmate-on-inmate sexual abuse investigation files</b>   |  |
| <b>87. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b>   | 6  |
| <b>88. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</b>   | <input checked="" type="radio"/> Yes<br><input type="radio"/> No<br><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files) |
| <b>89. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</b>   | <input checked="" type="radio"/> Yes<br><input type="radio"/> No<br><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files) |
| <b>Staff-on-inmate sexual abuse investigation files</b>  |  |
| <b>90. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b>  | 2  |
| <b>91. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</b>  | <input checked="" type="radio"/> Yes<br><input type="radio"/> No<br><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)  |

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| <b>92. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</b>   | <input checked="" type="radio"/> Yes<br><input type="radio"/> No<br><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)       |
| <b>Sexual Harassment Investigation Files Selected for Review</b>  |   |
| <b>93. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</b>  | 1   |
| <b>94. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</b> | <input checked="" type="radio"/> Yes<br><input type="radio"/> No<br><input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)                  |
| <b>Inmate-on-inmate sexual harassment investigation files</b>   |   |
| <b>95. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</b>   | 0   |
| <b>96. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</b>   | <input type="radio"/> Yes<br><input type="radio"/> No<br><input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files) |
| <b>97. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</b>   | <input type="radio"/> Yes<br><input type="radio"/> No<br><input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files) |

**Staff-on-inmate sexual harassment investigation files**

**98. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:**

1

**99. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?**

☒ Yes

☐ No

☐ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)

**100. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?**

☒ Yes

☐ No

☐ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)

**101. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.**

No text provided.

**SUPPORT STAFF INFORMATION****DOJ-certified PREA Auditors Support Staff**

**102. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.**

☐ Yes

☒ No

## Non-certified Support Staff

**103. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.**

☐ Yes

☒ No

## AUDITING ARRANGEMENTS AND COMPENSATION

**108. Who paid you to conduct this audit?**

☐ The audited facility or its parent agency

☐ My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)

☒ A third-party auditing entity (e.g., accreditation body, consulting firm)

☐ Other

**Identify the name of the third-party auditing entity**

Corrections Management Communication Group



| <b>Standards</b>   |  |
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| <b>Auditor Overall Determination Definitions</b>   |  |
| <ul style="list-style-type: none"> <li>Exceeds Standard<br/>(Substantially exceeds requirement of standard)</li> <li>Meets Standard<br/>(substantial compliance; complies in all material ways with the stand for the relevant review period)</li> <li>Does Not Meet Standard<br/>(requires corrective actions)</li> </ul>   |  |
| <b>Auditor Discussion Instructions</b>   |  |
| <p>Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.</p> |  |

| <b>115.11</b> | <b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>   |
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|               | <b>Auditor Overall Determination:</b> Meets Standard  |
|               | <b>Auditor Discussion</b>   |
|               | <p>The auditor reviewed the following documentation to determine compliance:</p> <ul style="list-style-type: none"> <li>Bayside State Prison PAQ</li> <li>New Jersey Department of Corrections contracts with private contractors</li> </ul> <p>The agency meets the requirements of Standard 115.12(A), and (B). A review of the documentation submitted confirmed that the agency requires other entities contracted with for the confinement of inmates such as Residential Community Release Programs contractors and bidders to be PREA compliant or become PREA compliant within a specified timeframe. The contractor is expected to adopt and comply with the PREA standards. Contractors who do not make every effort to become PREA compliant and maintain compliance are prohibited from future opportunities to contract with NJDOC. All agency contractual agreements have been modified to incorporate the language requiring all contractors to adopt and comply with the PREA standards. BSP does not independently contract for the confinement of</p> |

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|  | <p>inmates.</p> <p>The auditor interviewed the following staff members:</p> <ul style="list-style-type: none"> <li>• NJDOC PREA Coordinator</li> <li>• Regional PREA Compliance Managers</li> </ul> <p>NJDOC reported having contracts thirteen (13) for the confinement of inmates that the agency entered into or renewed with private entities or other government agencies on or after August 20, 2012, or since the last PREA audit. NJDOC monitoring requires the contractor to provide PREA audit results to them Annually, the contractor must meet NJDOC monitoring requirements for PREA compliance. Contractors are required to maintain PREA compliance for the term of the Contract.</p> |
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| 115.12 | Contracting with other entities for the confinement of inmates   |
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|        | <p><b>Auditor Overall Determination:</b> Meets Standard</p>  |
|        | <p><b>Auditor Discussion</b></p> <p>The auditor reviewed the following documentation to determine compliance:</p> <ul style="list-style-type: none"> <li>• Bayside PAQ</li> <li>• New Jersey Department of Corrections contracts with private contractors</li> <li>• 13 contracts with private Community Residential Centers</li> </ul> <p>The agency meets the requirements of Standard 115.12(A), and (B). A review of the documentation submitted confirmed that the agency requires other entities contracted with for the confinement of inmates such as Residential Community Release Programs contractors and bidders to be PREA compliant or become PREA compliant within a specified timeframe. The contractor is expected to adopt and comply with the PREA standards. Contractors who do not make every effort to become PREA compliant and maintain compliance are prohibited from future opportunities to contract with NJDOC. All agency contractual agreements have been modified to incorporate the language requiring all contractors to adopt and comply with the PREA standards. BSP does not independently contract for the confinement of inmates.</p> <p>The auditor interviewed the following staff members:</p> <ul style="list-style-type: none"> <li>• NJDOC PREA Coordinator</li> <li>• Regional PREA Compliance Managers</li> </ul> <p>BSP does not independently contract for the confinement of inmates.</p> <p>The auditor interviewed the following staff members:</p> |

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|  | <ul style="list-style-type: none"> <li>• NJDOC PREA Coordinator</li> <li>• Regional PREA Compliance Managers</li> </ul> <p>Bayside State Prison meets compliance with this standard.</p> |
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| <b>115.13</b> | <b>Supervision and monitoring</b>   |
|               | <b>Auditor Overall Determination:</b> Meets Standard  |
|               | <b>Auditor Discussion</b>   |
|               | <p>The auditor reviewed the following documentation to determine compliance:</p> <ul style="list-style-type: none"> <li>• BSP PREA Audit Questionnaire (PAQ)</li> <li>• PCS.001.008 Prevention, Detection, and Response of Sexual Abuse and Harassment</li> <li>• CUS.001.011 Searches of Incarcerated Persons and Correctional Facilities</li> <li>• Internal Management Procedure / Camera Review Procedures CUS.001.CRP.01</li> <li>• Bayside State Prison Camera List</li> <li>• Bayside Staffing Plan</li> <li>• BSP Facility Schematics</li> <li>• Logbooks</li> </ul> <p>115.13 (a), (b): NJDOC policy PCS.001.008 (pages 11- 13) stipulates that the agency shall ensure that each facility it operates shall develop, document, and make its best efforts to comply regularly with a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse. In calculating adequate staffing levels and determining the need for video monitoring, facilities shall take into consideration: (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 auditor has not been informed of any judicial findings of inadequacy, findings of inadequacy from federal investigative agencies or findings of inadequacy from internal or external oversight bodies relative to this standard.</p> <p>An interview with the Facility Administrator, Institutional PREA Compliance Manager, and Major confirmed, when the staffing plan is not complied with, Bayside State Prison will document and justify all deviations from the plan. A review of the PAQ shows this facility never deviated against the staffing Plan. There have not been any</p> |

unexplained deviations from the staffing plan. An interview with the Facility Administrator confirms, the facility Security Supervisors meets daily and review the schedule for the following day. They will use overtime to cover any shift vacancies.

115.13 (c): NJDOC policy PCS.001.008 (page 12), Whenever necessary, but no less frequently than once each year, for each facility the agency operates, in consultation with the PREA Coordinator required by § 115.11, the agency shall assess, determine, and document whether adjustments are needed to: (1) The staffing plan established under paragraph (a) of this section; (2) The facility's deployment of video monitoring systems and other monitoring technologies; and (3) The resources the facility has available to commit to ensure adherence to the staffing plan. BSP augments staff supervision where needed with video cameras strategically placed within the facilities. Video monitoring is evaluated during the internal audit process and documented on the internal audit report. There were no reports of any systemic vacancy or staff retention issues. There were no substantiated sexual abuse or harassment allegations at BSP over the period referenced in the PAQ. An interview with the Facility Administrator and IPCM confirms the purchase of 36 new video cameras during this audit period. The facility received approval to purchase additional video monitoring equipment.

115.13 (d): NJDOC Policy PCS.001.008 (page 13), Each NJDOC has implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment. Such policies and practices were implemented for night and day shifts. Each NJDOC facility follows an agency policy that prohibits staff from alerting other staff members that these supervisory rounds are occurring unless such an announcement is related to the legitimate operational functions of the facility. NJDOC Policy PCS.001.008 (page 13), prohibits staff members from alerting other employees regarding unannounced rounds.

The auditor conducted an interview with several supervisors, all indicated that irregular, frequent unannounced rounds are made in all areas of the facility and were able to articulate their methods and indicators for which they are observing to maintain a safe environment for all. Each person interviewed explained that they have no set tour pattern which prevents staff from alerting others of the rounds. Interviews with line staff and inmates indicate regular rounds are made during the workday, evenings, holidays, and weekends. Auditor requested, was provided, and reviewed logbook entries. Multiple rounds were documented by various intermediate and/or higher-level supervisors on these dates. Inmates stated they see higher level staff frequently and have access to speak with them should they need. The auditor reviewed logbook entries while onsite in the areas visited within the facility and found regular and frequent documentation of PREA rounds.

The auditor interviewed the following staff members to determine compliance:

- Institutional PREA Compliance Manager / Assistant Superintendent
- Facility Administrator

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|  | <ul style="list-style-type: none"> <li>• Random Inmates</li> <li>• Targeted Inmates</li> <li>• Random Staff</li> <li>• Supervisors</li> <li>• Major</li> </ul> <p>Based on the review of policies, documents, facility walkthrough, and interviews, the facility has demonstrated compliance with all the provisions of this standard.</p> |
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| <b>115.14</b> | <b>Youthful inmates</b>  |
|               | <b>Auditor Overall Determination:</b> Meets Standard   |
|               | <b>Auditor Discussion</b>  |
|               | <p>Bayside State Prison does not house youthful inmates.</p> <p>115.14 (a) (b) (c): According to the PREA Compliance Manager and agency PREA Coordinator and a review of the Pre-Audit Questionnaire (PAQ), BSP does not house inmates identified as "youthful inmates."</p> |

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| <b>115.15</b> | <b>Limits to cross-gender viewing and searches</b>  |
|               | <b>Auditor Overall Determination:</b> Meets Standard  |
|               | <b>Auditor Discussion</b>   |
|               | <p>The auditor reviewed the following policies and documentation to determine compliance:</p> <ul style="list-style-type: none"> <li>• Bayside State Prison (PAQ)</li> <li>• Training Files</li> <li>• PCS. 001. 008. Prevention, Detection and Response of Sexual Abuse and Harassment</li> <li>• CUS. 001. 011 Searches of Incarcerated Persons and Correctional Facilities</li> <li>• CUS. 001. SEA. 001 Searches of Incarcerated Persons and Correctional Facilities</li> <li>• Knock and Announce Memo / Commissioner to all staff</li> <li>• PCS. 001. TGI.01 Incarcerated Persons Gender Identity Policy</li> <li>• New Jersey Administrative Code (NJAC) 10A: 3-5.6</li> </ul> <p>CUS.001.011 (page 6), CUS. 001.SEA.001 pages (7-14), address the requirements of Standard 115.15. The facility's overall rated capacity exceeds 50 inmates. The institution does not permit cross-gender strip searches or cross-gender visual body</p> |

cavity searches, except in exigent circumstances or when performed by medical practitioners. Officers are required to document all cross-gender strip searches and cross-gender visual body cavity searches. Policy prohibits employees from searching or physically examining a transgender or intersex inmate for the sole purpose of determining the inmate's genital status.

115.15(b): is not applicable because Bayside State Prison is a male facility.

115.15(c): There have not been any cross-gender visual body cavity or strip searches conducted at BSP during the audit period. Interviews with staff confirmed that they were aware of the prohibition of visual body cavity or strip searches of the inmates of the opposite sex, except in exigent circumstances. A review of training records reveals that security staff members have received formal training in pat searches. Staff interviews also confirmed that female officers have been trained to conduct cross-gender pat searches. The auditor observed, during the tour of all applicable housing units, that inmates are permitted to shower, perform bodily functions and change clothing privately. Toilets and shower facilities are either located in cells and showers with curtains or generally separated by a wall with privacy doors or curtains.

115.15(d): Bayside State Prison has implemented policies and procedures such as NJDOC Policy CUS.001.SEA.001, Searches of Inmates and Correctional Facilities, N.J.A.C. 10A:3-5.6 through 10A:3-5.8 and PCS.001.006 (page 11) Transgender/Intersex Inmates that enable inmates to shower, perform bodily functions, and change clothing without a non-medical staff of the opposite gender viewing breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks.

The policies and procedures also require a staff of the opposite gender to announce their presence when entering an inmate housing unit. All staff sampled during this PREA audit confirmed that opposite-gender staff must announce their presence when entering an inmate housing unit. Interviews with random and targeted inmates confirmed that they had been pat searched by officers of the same gender properly and professionally. The practice was observed during the facility tour.

115.15(e): NJDOC Policy CUS.001.SEA.001, (page10) directs that no inmate shall be searched solely for the purpose of determining gender status or condition, such as intersex, transgender. All certified staff receive training in Personal Searches, which includes instruction on prohibiting searches for purposes of determining an inmate's genital status.

115.15(f): New Jersey Department of Corrections Policy PCS. 001. 008 (page 17) establishes the requirement for security staff to be trained on how to conduct cross gender frisk searches and searches of transgender and intersex inmates, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs. Auditor reviewed training on Personal Searches and discussed how to conduct cross-gender pat down searches, searches of transgender and intersex inmates, all in a professional and respectful manner, and in the least intrusive manner possible. The lesson plan reminds staff through the lesson plan stress the importance of preserving the dignity of inmates through the search

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|  | <p>process.</p> <p>Searches are taught in basic training for all security staff. Refreshers are conducted each year at in-service. In addition, training records were reviewed by the auditor for 25 security staff. Staff interviews confirmed training was conducted as stated and were able to demonstrate proper search protocols for the auditor. Staff interviews also confirmed that female officers have been trained to conduct cross-gender pat searches. Inmate interviews indicated staff are respectful and professional when conducting different searches.</p> <ul style="list-style-type: none"> <li>• Targeted Inmates</li> <li>• Random Staff</li> <li>• Specialized Staff</li> <li>• Training Manager</li> <li>• Institutional PREA Compliance Manager (IPCM)</li> <li>• Facility Administrator</li> </ul> <p>Based on the review of policies, documents, facility walkthrough, and interviews, the facility has demonstrated compliance with all the provisions of this standard.</p> |
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| <b>115.16</b> | <b>Inmates with disabilities and inmates who are limited English proficient</b>  |
|               | <p><b>Auditor Overall Determination:</b> Meets Standard</p>  |
|               | <p><b>Auditor Discussion</b></p> <p>The auditor reviewed the following policies and documentation to determine compliance:</p> <ul style="list-style-type: none"> <li>• Bayside State Prison PAQ</li> <li>• New Jersey Department of Corrections Deaf and Hard of Hearing Waiver for The Universal Symbol of Hearing Loss Placement on Cell Door Form</li> <li>• NJDOC Deaf and Hard of Hearing Waiver for the Hearing Loss Identification</li> <li>• NJDOC SUP.004.00 Limited English Proficient (LEP) Language Assistance: Bilingual Staff and Use of the Language Line</li> <li>• NJDOC PCS.001.008 Prevention, Detection, and Response of Sexual Abuse and Harassment</li> <li>• MSCF.SOCDHH.003.013 Deaf / Hard of Hearing Inmates</li> <li>• Preferred Method of Communication Form While In Custody</li> <li>• NJDOC Deaf / Hard of Hearing Telecommunication Form</li> <li>• PREA Posters / English &amp; Spanish</li> </ul> |

115.16(a) New Jersey Department of Corrections (NJDOC) policy PCS.001.008 (pages 17- 19), indicates that the Bayside State Prison takes appropriate steps to ensure inmates with disabilities (including, for example, inmates who are deaf or hard of hearing, have an equal opportunity to participate in or benefit from all aspects of its efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including steps to provide interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary. PREA handouts, PREA postings, PREA education video, and the inmate handbook are provided in both English and Spanish. The facility has one TDD phone; it was tested for functionality by the auditor. There were two inmates with disabilities that were interviewed. The inmates and staff also confirmed that interpretive services are available when needed. The agency utilizes Language Line Services. The auditor interviewed 24 out of 24 random staff who were aware of the Language Line Services. The BSP has utilized the Language Line and staff interpreters. At the time of the on-site visit, the auditor utilized the Language Line to interview limited English proficient inmate, and a staff interpreter. Policy prohibits the use of inmate interpreters, inmate readers or other types of inmate assistants in the performance of first responder duties or during the investigation of an inmate's allegations. BSP employs staff members who are proficient in languages other than English.

115.16 (b) NJDOC takes reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient, including steps to provide interpreters who can interpret effectively accurately and impartially. Upon initial intake, NJ DOC staff document whether an inmate displays a language barrier or other disability which would prevent the understanding of basic PREA provisions or sexual abuse/prevention/intervention information. As applicable, a follow-up plan is developed to foster communication. Two inmates interviewed, who were identified as disabled/limited English proficient, verified that they were instructed about PREA compliance and felt safe from sexual abuse. Language Line Services and/or staff interpreters are used to translate at this facility. Policy SUP.004.001 Limited English Proficient (LEP) Language Assistance Bilingual Staff and Use of the Language Line (pages 2- 4) provides facilities with guidelines to help with limited English proficient (LEP) inmates within the NJDOC correctional facilities, programs, and activities.

115.16 (c) New Jersey Department of Corrections policy SUP.004.001(pages 2-4), illustrates the agency does not rely on inmate interpreters, inmate readers, or other types of inmate assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety. Bayside State Prison (BSP) has utilized the Language Line Services, or staff interpreters. The Language Line Services and/or staff interpreters are used to translate at this facility. This practice was corroborated by the Institutional PREA Compliance Manager, State PREA Coordinator, Assistant Superintendent, Random Staff and Targeted inmates. The auditor utilized the Language Line Services to interview two LEP inmates. The agency provides PREA related videos with closed captions for hearing impaired inmates assigned to the facility. The Assistant Facility Administrator confirmed that the facility does not use inmate interpreters, inmate readers or other types of inmate



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|  | <p>assistants in the performance of first responder duties or during the investigation of an inmate's allegations. Interviews with first responders, investigators, medical and mental health staff, and the Assistant Superintendent / IPCM confirmed their awareness of the prohibition of using inmate interpreters for any PREA investigative purpose.</p> <p>The auditor interviewed the following individuals to determine compliance:</p> <ul style="list-style-type: none"> <li>• State PREA Coordinator</li> <li>• IPCM / Assistant Superintendent</li> <li>• Targeted Inmates</li> <li>• Random Staff</li> <li>• Investigators</li> </ul> <p>Interviews with 24 random staff and an examination of supporting documentation, designated declaration forms for the disabled, admission and orientation materials provided in English and Spanish, and verified language line services confirm the facility's substantial compliance with Standard 115.16.</p> |
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| 115.17 Hiring and promotion decisions |  |
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|                                       | <b>Auditor Overall Determination:</b> Meets Standard   |
|                                       | <b>Auditor Discussion</b>  |
|                                       | <p>The auditor reviewed the following policies and documentation to determine compliance:</p> <ul style="list-style-type: none"> <li>• Bayside PAQ</li> <li>• NJDOC PSM.001.001 The reporting of Summons, Arrests, Incarcerations: The Confiscation of Firearms and / or Suspension of Firearms Privileges of NJDOC Employees</li> <li>• NJDOC PCS.001.008 Prevention, Detection, and Response of Sexual Abuse and Harassment</li> <li>• NJDOC ADM.006.007 Pre- Employment and ID Card Renewal Background Checks</li> <li>• NJDOC PSM.001.011 Staff Selections and Promotions</li> <li>• Executive Order Number 11</li> <li>• Employment Applications</li> </ul> <p>115.17 (a) According to policies NJDOC PCS.001.008 (pages 18 - 20), and PSM.001.011 (page 2) Bayside State Prison does not hire or promote anyone who may have contact with inmates, and does not enlist the services of any contractor or volunteer who may have contact with inmates, who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution, has been</p> |

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 has been civilly or administratively adjudicated to have engaged in the activity described above.

NJDOC PSM.001.011 Staff Selection and Promotion mandates that extensive, computerized criminal background checks be conducted on all individuals being considered for employment, whether permanent, temporary, or contract positions or to be volunteers within the Department. All prospective employees and volunteers must complete an Application for Clearance and Issuance of an Identification Card. This form is utilized to conduct background checks. The Special Investigations Division conducts background checks, and the background check results determine if an applicant is suitable for employment and/or performing volunteer services for the Department.

NJDOC requires a criminal background records check be completed before hiring any new employee. 30 out of 30 Human Resource files that were reviewed showed compliance. All 30 files contained comprehensive background investigations. Interview with Human Resource Staff corroborates compliance.

115.17 (b) New Jersey Department of Corrections policy NJDOC PSM.001.011(page 2), considers any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor or volunteer, who may have contact with inmates. Based on files sampled, all BSP employees hired during the applicable audit period and who have contact with inmates have had a background investigation, in addition to fingerprinting and inquiry into the FBI's National Crime Information Center (NCIC). Those promoted, during the audit period, received background checks and were asked to respond to questions regarding sexual misconduct.

115.17 (c): Before hiring new employees, who may have contact with inmates, the agency shall (1) Perform a criminal background record check and (2), Consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse. Both policies address the above criteria NJDOC ADM.006.007 (page 2) and PSM.001.011 (page 2).

115.17 (d): The agency shall also perform a criminal background record check before enlisting the services of any contractor who may have contact with inmates. The above is referenced in NJDOC Policy ADM.006.007(page 2).

15.17 (e): New Jersey Department of Corrections policies ADM.006.007 (page 2) and PSM.001.011 (page 2) Per the above policies, re-investigations of employee backgrounds take place every five years and are tracked by the SID in conjunction with ID card renewals. Contractors and volunteers who have regular contact with inmates also have criminal background checks completed prior to having contact with inmates. Volunteer and contractor background checks are repeated yearly and every three years respectively in conjunction with ID card renewals.

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|  | <p>115.17 (f): The agency shall ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions and in any interviews or written self-evaluations conducted as part of reviews of current employees. The agency shall also impose a continuing affirmative duty to disclose any such misconduct upon employees. The following policies meet the above criteria of this standard, NJDOC Policy ADM.006.007 (page 2) Pre-Employment and ID Card Renewal Background Checks: Issuance of Employee / Volunteer ID Cards and PSM.001.011 Staff Selection and Promotion (page 2).</p> <p>The Human Resource Manager confirmed that the agency attempts to contact prior employers for information on substantiated allegations of sexual abuse or resignations which occurred during a pending investigation of sexual abuse. The Human Resource Manager also confirmed that the agency provides information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work. The NJ DOC notifies appropriate licensing/certifying agencies, when professional personnel are terminated for substantiated allegations of sexual abuse or sexual harassment.</p> <p>115.17 (g): Material omissions regarding such misconduct or the provision of materially false information are grounds for termination. Policy ADM.006.007 Pre-Employment and ID Card Renewal Background Checks: Issuance of Employee/Volunteer ID Cards, and PSM.001.011 Staff Selection and Promotion, satisfy this part of the standard.</p> <p>115.17 (h): Unless prohibited by law, the agency shall provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work. Policies ADM.006.007 Pre-Employment and ID Card Renewal Background Checks: Issuance of Employee/Volunteer ID Cards, and PSM.001.011 Staff Selection and Promotion satisfy the requirement of this standard.</p> <p>The auditor interviewed the following staff members to determine compliance:</p> <ul style="list-style-type: none"> <li>• Institution PREA Compliance Manager</li> <li>• Human Resources</li> <li>• Investigator</li> </ul> <p>The facility meets compliance with this standard, based on reviewed documentation and staff interviews.</p> |
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| <b>115.18</b> | <b>Upgrades to facilities and technologies</b>       |
|               | <b>Auditor Overall Determination:</b> Meets Standard |
|               | <b>Auditor Discussion</b>                            |

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|  | <p>The auditor reviewed the following documentation to determine compliance:</p> <ul style="list-style-type: none"> <li>• SUP.001.000 Capital Planning and Construction: Mission, Goals, and Objectives</li> <li>• Bayside State Prison PREA Audit Questionnaire (PAQ)</li> </ul> <p>BSP has not had any substantial facility expansions or modifications since August 20, 2012, or since the last PREA audit. However, based on the consideration of enhancing the ability to protect inmates from sexual abuse, the facility reported on the PAQ that video monitoring systems, or electronic surveillance systems have been installed or upgraded since the last PREA audit.</p> <p>An interview with the Facility Administrator confirmed the purchase and installation of 34 new cameras. She further explained that additional cameras are budgeted for this year. The auditor conducted a walkthrough of the facility noticed new cameras.</p> <p>The auditor interviewed the following staff members to determine compliance:</p> <ul style="list-style-type: none"> <li>• Facility Administrator</li> <li>• Institution PREA Compliance Manager</li> </ul> <p>BSP meets compliance, based on interviews and facility walk through.</p> |
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| 115.21 | Evidence protocol and forensic medical examinations  |
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|        | <p><b>Auditor Overall Determination:</b> Meets Standard</p>  |
|        | <p><b>Auditor Discussion</b></p> <p>The auditor reviewed the following policies and documentation to determine compliance:</p> <ul style="list-style-type: none"> <li>• NJDOC #014 Procedures for Sexual Abuse, PREA Retaliation and Sexual Harassment</li> <li>• Attorney General Standards for Providing Services to Victims of Sexual Assault</li> <li>• NJDOC #035 Special Investigations Division (SID) Investigation Procedures</li> <li>• NJDOC CUS.001.CSM.01 Division of Management: Crime Scene Management</li> <li>• NJDOC MED.MHS.002.010 Counseling Services for Victims of Sexual Assault</li> <li>• New Jersey State Attorney General Office Victims Witness Advocacy</li> <li>• 4B: Section: 52:4B-50: Findings, declarations relative to Sexual Assault</li> <li>• NJDOC MED.MLI.007 Sexual Assault, Internal Management Procedure</li> <li>• NJDOC MED.MHS.002.001 Emergency Mental Health Services</li> <li>• NJDOC MED.MLI.005 Forensic Specimen Collection</li> <li>• Sexual Assault Victims Bill of Rights</li> </ul> <p>115.21 (a) and (b) New Jersey Department of Corrections comply with all elements of</p> |

this standard. According to policy NJDOC #035 Special Investigations Division (SID) Investigation Procedures (page 2) and NJDOC #014 Procedures for Sexual Abuse, PREA Retaliation and Sexual Harassment (page 6) According to the above policies, the agency follows a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative and criminal proceedings. The above policy also state it is the policy of the NJDOC to investigate all PREA sexual abuse and sexual harassment allegations in a timely, efficient, and confidential manner in accordance with federal guidelines. The Agency investigators has received special training in conducting sexual abuse investigations in confinement settings. The SID Investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence. NJ DOC SID follows a similar and equivalent uniform evidence protocol as described in the U.S. Department of Justice's Office on Violence Against Women Publication, "A National Protocol for Sexual Assault Medical Forensic Examinations. An SID Investigator is assigned to conduct criminal and administrative investigations at all NJDOC facilities. An Interview with the SID Investigator confirms this practice. Training file shows the investigator has received specialized training in "sexual abuse in a confinement setting".

115.21 (c) New Jersey Department of Corrections offers all victims of sexual abuse access to forensic medical examinations at the Inspira Medical Center Vineland without financial cost, where evidentiary or medically appropriate. Bayside State Prison has a Memorandum of Understanding with Inspira Medical Center to provide these services. Such examinations are to be performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) as required. The ER physician or SANE will perform an examination utilizing a sexual assault evidence kit. This kit will be retained by the ER staff until received by an Investigator. The responding Agent shall process the alleged crime scene if feasible, receive the evidence from the attending medical staff, conduct an interview with the alleged victim and suspect at the earliest convenience, and determine the appropriate action to best facilitate the investigation. Upon evaluation of all information and evidence obtained, Investigators shall deliver evidence obtained from the investigation to the Crime Laboratory for evaluation as possible evidence. The investigators will present all evidence in the case to the County Attorney's Office for review, adoption, and prosecution of any suspects. During the past 12 months, there has not been any incident where this service was needed. This was confirmed by the Institutional PREA Compliance Manager, Mental Health Administrator, Health Services Administrator, and SID Investigator. The New Jersey Department of Correction complies with all elements of this standard. NJDOC policies MED.MHS.002.001 Emergency Mental Health Services (pages 3 and 4), and MED.MLI.007 Sexual Assault, Internal Management Procedure (pages 2 and 3), both address elements of this standard.

115.21 (d) New Jersey Department of Corrections policy MED.MHS.002.010 Counseling Services for Victims of Sexual Assault pages (2 and 3) the Bayside State Prison has entered a Memorandum of Understanding with Inspira Medical Center which agrees to provide outside victim advocacies services to the inmates. The services of these victim advocates have not been requested or used by the inmates during this audit cycle. Review of the MOU confirms this agreement.

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|  | <p>The agency has a Mutual of Understanding with Inspira Medical Center Vineland to provide victim advocate services to inmates of sexual abuse. All inmates of sexual abuse will receive free medical and mental health. The auditor confirmed this by interviewing the Mental Health Manager.</p> <p>115.21 (e, f, h) NJDOC PCS.001.008 Prevention, Detection and Response of Sexual Abuse and Harassment (pages 23, 24, and 25), a PREA victim advocate shall be made available to the alleged victim, when requested, to accompany and support the victim through the forensic medical examination and the investigation process. In addition to the review of the MOU between Bayside State Prison and the Inspira Medical Center interviews with the facility victim, and the Advocate. The facility will provide Mental Health counseling to any inmate that experienced sexual abuse. The inmate can see Mental Health anytime free of charge as a secondary support system within the facility. New Jersey Sexual Assault Victims Rights guarantees any victim of sexual abuse will be provided free support services provided under the law. The bill included inmates.</p> <p>The auditor interviewed the following individuals to determine compliance:</p> <ul style="list-style-type: none"> <li>• SID Investigator</li> <li>• Mental Health Administrator</li> <li>• Medical Administrator</li> <li>• Assistant Superintendent / IPCM</li> <li>• Institutional PREA Compliance Manager</li> <li>• Targeted Inmate (Victim)</li> <li>• Victim Advocate</li> </ul> <p>Based on the review of policies, documents, facility walkthrough, and interviews, the facility has demonstrated compliance with all the provisions of this standard.</p> |
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| 115.22 | Policies to ensure referrals of allegations for investigations  |
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|        | <p><b>Auditor Overall Determination:</b> Meets Standard</p>   |
|        | <p><b>Auditor Discussion</b></p> <p>The auditor reviewed the following policies and documentation to determine compliance:</p> <ul style="list-style-type: none"> <li>• PCS.001.008 Prevention, Detection and Response of Sexual Abuse and Harassment</li> <li>• MED.MLI.007 Health Care Compliance Unit Internal Management Procedures Sexual Assault</li> <li>• SID Internal Management Procedure #035 Investigation Procedures</li> <li>• CUS.001.CSM.01 Crime Scene Management</li> </ul> |

- SID Internal Management Procedure #014 Procedures for Sexual Abuse, PREA Retaliation, and Sexual Harassment
- SID Internal Management Procedure #10 Investigative Reports
- IMM.014 Zero Tolerance Policy

115.22 (a) According to NDOC Sexual Abuse and Sexual Harassment policy SID #035 Investigative Procedures, page 2 states: The New Jersey Department of Corrections (NJDOC) assigns the Special Investigations Division (SID) the responsibility of investigating violations of the laws of the State of New Jersey, as well as violations of the New Jersey Administrative Code (10A) and NJDOC facilities. All SID Investigators will be required to complete the New Jersey Division of Criminal Justice Basic Course for Investigators as a condition of their promotion to SID. The specialized training received by members of SID ensures that such investigations are done thoroughly, competently, in an unbiased, objective manner and using the most modern techniques and equipment possible. Any lawful technique to perform an investigation may be used. SID shall attend continuous and ongoing training in areas relevant to its work, to include continued training in gender- responsive principles.

The NJDOC agency PREA Coordinator and SID Investigator confirmed that the agency ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment. There were nine (9) reports of sexual abuse and (one) 1 sexual harassment during the past 12 months; all were unfounded, substantiated, or unsubstantiated.

115.22 (b) On page 2 of policy Special Investigative Division (SID) Internal Management Procedure #10, all PREA allegations are investigated by the New Jersey Department of Corrections for potential criminal activity. Per an interview with the Facility Administrator an administrative or criminal investigation is completed for all allegations of sexual abuse or sexual harassment. If it is determined that the allegation involves potential criminal activity, it will be submitted to the Chief Investigator or designee and/or the appropriate County Prosecuting agency within 5 days of the completion of the Special Investigations Division Investigative report.

During the past 12 months, the facility has had ten (10) total PREA incidents; all were deemed to be unfounded, substantiated, or unsubstantiated. This policy is posted on the facility's website as required. Interview with the SID Investigator confirmed this practice.

All investigators receive specialized training specific to sexual assault in correctional institutions. The reviewed New Jersey Department of Corrections website included a section discussing sexual assaults and sexual misconduct. The website also states that all perpetrators of sexual abuse will be prosecuted and zero tolerance.

115.22(c), (d) NJDOC is responsible for conducting all sexual abuse and sexual harassment investigations. Therefore, the above provisions are not applicable.

115.22 (e): Any Department of Justice component responsible for conducting administrative or criminal investigations of sexual abuse or sexual harassment in prisons or jails shall have in place a policy governing the conduct of such

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|  | <p>investigations. The following NJDOC policies PCS.001.008 Prevention, Detection and Response of Sexual Abuse and Harassment, SID Internal Management Procedure #035 Investigation Procedures, CUS.001.CSM.01 Crime Scene Management, SID Internal Management Procedure #014 Procedures for Sexual Abuse, PREA Retaliation, and Sexual Harassment, SID Internal Management Procedure #10 Investigative Reports, and IMM.014 Zero Tolerance Policy govern all investigations by SID.</p> <p>The auditor interviewed the following staff to determine compliance:</p> <ul style="list-style-type: none"> <li>• SID Investigator</li> <li>• Institutional PREA Compliance Manager</li> <li>• NJDOC State PREA Coordinator</li> <li>• Associate Facility Administrator</li> <li>• Facility Administrator</li> </ul> <p>The facility meets compliance with this standard, based on reviewed documentation, and staff interviews.</p> |
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| 115.31 | Employee training   |
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|        | <p><b>Auditor Overall Determination:</b> Meets Standard</p>   |
|        | <p><b>Auditor Discussion</b></p> <p>The auditor reviewed the following policies and documentation:</p> <ul style="list-style-type: none"> <li>• Prevention, Detection, and Response of Sexual Abuse and Harassment PCS.001.008I</li> <li>• Zero Tolerance Policy: Prison Sexual Abuse and Sexual Harassment IMM.001.004</li> <li>• PREA Script Staff Training and Lesson</li> <li>• Completed and Signed Staff Online Training</li> <li>• NJ PREA Staff Reporting</li> </ul> <p>115.31 (a) NJDOC policy PCS.001.008 pages (25, 26, and 27) agency will train all their employees who have contact with inmates on: (1) Its zero-tolerance policy for sexual abuse and sexual harassment; (2) How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures; (3) Inmates' right to be free from sexual abuse and sexual harassment; (4) The right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment; (5) The dynamics of sexual abuse and sexual harassment in confinement; (6) The common reactions of sexual abuse and sexual harassment victims; (7) How to detect and respond to signs of threatened and actual sexual abuse; (8) How to avoid inappropriate relationships with inmates; (9) How to communicate effectively and professionally with inmates, including lesbian,</p> |



gay, bisexual, transgender, intersex, or gender nonconforming inmates; and (10) How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.

An excerpt from NJDOC's Policy PCS.001.008 states, "PREA education for all custody staff trainees begins in the NJDOC Training Academy. New non-uniformed personnel receive PREA training as part of their Orientation at their respective facilities. In addition, all NJDOC employees, volunteers and contractors receive at least bi-annual training on their duties and responsibilities under the Department's zero tolerance policy. This training includes all ten topics listed in §115.31 employee training standard including the requirement to immediately report any incident or allegation of sexual abuse/sexual harassment to the nearest custody staff member, or an on-duty custody supervisor if more appropriate. The curriculum is regulated and updated by Correctional Staff Training Academy staff with external training assistance provided by resources offered through the National PREA Resource Center."

This auditor reviewed "NJDOC's Policy PCS.001.008" and has concluded that it has the necessary language to align with PREA Standard 115.31.

115.31 (b)(c)(d) NJDOC Policy PCS.001.008(page 26), Such training shall be tailored to the gender of the inmates at the employee's facility. The employee shall receive additional training if the employee is reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa.

All employees receive ongoing staff education to reinforce and enhance existing policies regarding trauma- informed and gender responsive practices in the management of women incarcerated persons annually.

All current employees who have not received such training shall be trained within one year of the effective date of the PREA standards, and the agency shall provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures. In years in which an employee does not receive refresher training, the agency shall provide refresher information on current sexual abuse and sexual harassment policies.

The agency shall document, through employee signature or electronic verification, that employees understand the training they have received.

A review of the training curriculum and training material corroborates this practice. Bayside State Prison houses male inmates.

All NJDOC employees (custody staff, non-uniformed staff and civilian staff), contractors and volunteers receive PREA- specific training on an annual basis. This training is to ensure that they know the current sexual abuse and sexual harassment policies and procedures. The training also focuses on key issues regarding staff sexual misconduct and the prevention of sexual abuse including the reporting of incidents, as well as first responder responsibilities. Participation in requisite PREA training shall be documented through employee signature or electronic verification,

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|  | <p>noting that staff demonstrate proficient knowledge of the policies and procedures to complete the training requirements. Training records will be retained at the Correctional Staff Training Academy.</p> <p>While onsite, this PREA interviewed 24 randomly selected security staff, specialized, support, volunteer, and contractors. Each acknowledged receiving PREA New Hire and/or PREA refresher training. Each knew their responsibilities as first responders and coordinated duties in the event of a sexual abuse allegation. This auditor also requested, received, and viewed the training files of the 26 randomly selected interviewed staff, to verify up-to-date annual PREA training. Bayside Institutional PREA Compliance Manager/Assistant Superintendent printed showed Bayside electronic training tracking spreadsheet, which entailed the staff's name, name of the training course, training type, and the date of training completion. The training tracking spreadsheet showed each staff's training verification of attending. This auditor also reviewed the classroom in-person video training curriculum, PREA Staff Training Lesson Plan, and basic course and annual refresher training curriculum used to train employees, contractors, and volunteers. The curriculum and lesson plans for training covered the components identified in PREA Standard 115.31.</p> <p>100% of random staff and specialized staff interviewed confirmed the completion of the NJDOC PREA training during pre-service and/or annually during in-service containing all information required by this provision. PREA education is posted on bulletin boards throughout the institution.</p> <p>The auditor interviewed the following staff members to determine compliance:</p> <ul style="list-style-type: none"> <li>• Institutional PREA Compliance Manager</li> <li>• Training Manager</li> <li>• Specialized Staff</li> <li>• Random Staff</li> </ul> <p>The facility has demonstrated compliance with this standard, based on staff interviews, and documentation reviews.</p> |
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| 115.32 | Volunteer and contractor training   |
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|        | <p><b>Auditor Overall Determination:</b> Meets Standard</p>   |
|        | <p><b>Auditor Discussion</b></p>  |
|        | <p>The auditor reviewed the following policies and documentation:</p> <ul style="list-style-type: none"> <li>• Bayside PREA Audit Questionnaire (PAQ)</li> <li>• PCS.001.008 Volunteer Services</li> <li>• Final NJ PREA Staff Reporting Quadfold</li> <li>• Prison Rape Elimination Act Quick Reference Guide</li> </ul> |

- BSP External Staff Training Records

115.32 (a) NJDOC Policy PCS.001.008 (page 27), Each Facility ensures all volunteers and contractors who have contact with inmates have been trained on their responsibilities under Tennessee Department of Corrections zero tolerance, sexual abuse and sexual harassment prevention, detection, and response policies and procedures. Interview with 2 volunteers and 2 contractors confirmed they received and understood PREA training. The Facility Chaplain conducts both initial and annual training for all volunteers. Volunteers shall receive their PREA training in accordance with policy. Training acknowledgement for volunteers and contractors shall be documented by signature, notating that they understand the training received. In-service training is scheduled to be completed annually. Upon signing the training certification, each volunteer acknowledged they agreed to abide by these policies and all other NJDOC policies during their tenure as a volunteer for the NJDOC. Volunteers also documented their completion and understanding of the PREA training received. A copy of the NJDOC Volunteer Services Lesson power point presentation was provided to the auditor for review.

The NJ DOC also authorizes the use of volunteer services offered by professionals, students and members of the community in areas such as, but not limited to, chaplaincy services, educational services and social services.

115.32 (b) (c) The level and type of training provided to volunteers and contractors is based on the services they provide and level of contact they have with inmates, but all volunteers and contractors who have contact with inmates are notified of New Jersey Department of Corrections zero-tolerance policy regarding sexual abuse and sexual harassment and their requirements to report such incidents. Volunteers and contractors were well versed in Zero Tolerance policy and First Responder duties.

During the past 12 months, there were no volunteers or contractors who acted as First Responders to a sexual abuse incident.

Interviews were conducted with two contractors (medical) who provide services at Bayside State Prison (BSP). Both acknowledged receipt of PREA training by staff and were extremely knowledgeable of their responsibility upon becoming aware and/or informed of a PREA allegation by an inmate and/or through observation. Each reported they were trained on their responsibility under NJDOC's sexual abuse and sexual harassment prevention, detection and response policies and procedures. Both received specialized training due to them working in health services. A scenario was given to both contractors. They continued stating; they would immediately notify the nearest security staff member and/or shift commander and maintain a visual on the alleged victim. The auditor reviewed the lesson plan and training files of contractors.

The auditor's review of a sample of volunteer and contractor PREA training acknowledgement forms and other documents confirmed that all facility contractors and volunteers have received training related to their responsibilities concerning the PREA (zero tolerance, detection, prevention, response and reporting requirements), during the previous twelve months, or biennial refresher training as applicable. A

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|  | <p>review of training acknowledgement forms revealed that contractors and volunteers understood the agency's zero tolerance policy toward sexual abuse/sexual harassment and their responsibilities under the PREA.</p> <p>The following individuals interviewed to determine compliance:</p> <ul style="list-style-type: none"> <li>• Volunteers</li> <li>• Contractors</li> <li>• Training Staff</li> <li>• Chaplain</li> </ul> <p>The facility has demonstrated compliance with this standard, based on staff interviews, and documentation reviews.</p> |
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| 115.33 | Inmate education   |
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|        | <p><b>Auditor Overall Determination:</b> Meets Standard</p>  |
|        | <p><b>Auditor Discussion</b></p> <p>The auditor reviewed the following policies and documentation:</p> <ul style="list-style-type: none"> <li>• Bayside PREA Audit Questionnaire (PAQ)</li> <li>• IMM.002.003 Americans with Disabilities Act and New Jersey Law Against Discrimination- Reasonable Accommodations for Inmates</li> <li>• SUP.004.001 Limited English Proficient (LEP) Language Assistance: Bilingual Staff and Use of The Language Line</li> <li>• PCS.001.DFH.01 FORM- Preferred Method of Communication While in NJDOC Custody</li> <li>• PCS.001.008 Prevention, Detection, and Response of Sexual Abuse &amp; Harassment</li> <li>• IMM.001.004 Zero Tolerance Policy: Prison Sexual Abuse and Sexual Harassment</li> <li>• MSCF.SOCDHH.003.013 Deaf / Hard of Hearing Inmates</li> </ul> <p>115.33 (a) (b) (c) New Jersey Department of Corrections policies PCS.001.008 (pages 27- 29) and IMM.001.004 (page 7) states that during the intake process, inmates receive information explaining NJDOC zero tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment. Inmates receive Zero Tolerance Brochure; this brochure is printed in both English and Spanish. An Inmate Handbook with information about sexual abuse and is part of their intake packet. Each facility shall take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the facility's efforts to prevent, detect, and respond to sexual abuse and sexual harassment.</p> |

While onsite, this auditor interviewed an Intake Correctional Officer who shared the intake process once inmates arrive at the facility. He shared that they go through the Bayside State Prison "Inmate Intake Property Form," provide inmates with a zero-tolerance pamphlet as well as the handbook. When this auditor asked to review the "Inmate Intake Property Form," this auditor observed that the form indicated and verified that PREA Information was provided at the time of intake. This information is presented to all new admissions to include those inmates transferring from other NJDOC facilities.

The auditor conducted random and targeted inmate interviews. All interviewed inmates indicated they received educational PREA information via the pamphlet, or handbook upon their arrival at the facility during intake and/or orientation. The inmates also mentioned the PREA information that is posted on the bulletin boards and signage on the walls, and on every telephone providing them with PREA information and how to report PREA allegations. A tour of BSP confirmed that PREA educational posters were prominently displayed in all housing units and common/program areas.

115.33 (d) (e) New Jersey Department of Corrections policies SUP.004001(pages 2- 3) and PCS.001.008(pages 29) provides inmate education in formats accessible to all inmates, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to inmates who have limited reading skills. The facility has an agreement with Language Line Services as well as a TDD phones to assist inmates with these disabilities. A functionality test was successfully performed on the TDD phone by the auditor. The facility will assign staff as needed to ensure comprehension is achieved by inmates with disabilities. The auditor interviewed five (5) inmates with disabilities were interviewed, all demonstrated how to report sexual abuse and were familiar with victim advocacy services available from Inspira Medical Center. All 5 inmates with disabilities stated they had received in-depth PREA training.

The facility Inmate Rules and Regulations Handbook is available in both English and Spanish in addition to all other PREA resources that includes posters, information to report PREA allegations via telephone and mail, and the issued PREA pamphlets. The Institutional PREA Compliance Manager and NJDOC PREA Coordinator also provides translation services for LEP inmates in the Spanish language. The auditor interviewed a two LEP inmate by utilizing the Language Line.

115.33 (e) There was documentation provided of inmate's participation in PREA educational sessions as required by this part of the standard. All interviews with random inmates and review of intake files confirmed this practice. Bayside State Prison has each inmate sign the Form". This form signifies they have received PREA training, know all the ways to report sexual abuse and sexual harassment and have been given the telephone number and address to the Inspira Medical Center.

115.33 (f) Bayside State Prison does provide the inmates with posters in inmate accessible areas, pamphlets received upon intake, and an inmate handbook in English and Spanish outlining the zero-tolerance policy regarding sexual abuse and sexual

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|  | <p>harassment and how to report incidents or suspicions of sexual abuse or sexual harassment. Items were observed by the auditor during the on-site visit. Spanish information is also available on posters located in each housing unit. Deaf and Hearing Wavier for the Universal Symbol of Hearing Loss Placement on Cell Door.</p> <p>The auditor interviewed the following individuals to determine compliance:</p> <ul style="list-style-type: none"> <li>• Random Inmates</li> <li>• Targeted Inmates</li> <li>• Intake Staff / Screeners</li> <li>• Assistant Superintendent / Institutional PREA Compliance Manager (IPCM)</li> </ul> <p>The facility meets compliance with this standard, based on reviewed documentation, observation during walkthrough of the facility, inmate and staff interviews.</p> |
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| 115.34 | Specialized training: Investigations  |
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|        | <p><b>Auditor Overall Determination:</b> Meets Standard</p>   |
|        | <p><b>Auditor Discussion</b></p> <p>The auditor reviewed the following policies and documentation to determine compliance:</p> <ul style="list-style-type: none"> <li>• BSP Completed Pre-Audit Questionnaire (PAQ)</li> <li>• PREA Investigative Files</li> <li>• SID Investigators Training Files</li> <li>• CUS.001.CSM.01 Crime Scene Management</li> <li>• Organizational Chart Showing Special Investigation Division</li> <li>• Investigations Lesson Plans (Reporting and Handling of Sexual Assaults)</li> <li>• ADM.006.000 Special Investigations Division Mission, Goals, and Objectives, and Organizational Structure</li> </ul> <p>115.34(a)(b) The NJDOC employs Special Investigative Divisions (SID) investigative staff responsible for conducting both administrative and criminal investigations. The investigative staff are assigned to each facility to conduct criminal and administrative investigations.</p> <p>According to NDOC Sexual Abuse and Sexual Harassment policy SID #035 Investigative Procedures, page 2 states: The New Jersey Department of Corrections (NJDOC) assigns the Special Investigations Division (SID) the responsibility of investigating violations of the laws of the State of New Jersey, as well as violations of the New Jersey Administrative Code (10A) and NJDOC facilities. All SID Investigators will be required to complete the New Jersey Division of Criminal Justice Basic Course for Investigators as a condition of their promotion to SID. The specialized training received by members of SID ensures that such investigations are done thoroughly,</p> |

competently, using the most modern techniques and equipment possible. Any lawful technique to perform an investigation may be used. SID shall attend continuous and ongoing training in areas relevant to its work, to include continued training in gender-responsive principles.

Investigative staff receive specialized training courses in: PREA Protocol, knowledge of the application of Miranda and Garrity in confinement settings, sexual abuse evidence collection in confinement settings, crime scene preservation, reporting and handling of sexual assault incidents/PREA, and the criteria and evidence required to substantiate a case for administrative action or referral for criminal prosecution. NJDOC Division of Training, Recruitment and Professional Development shall maintain documentation that SID investigators have completed the required specialized training in conducting sexual abuse investigations.”

Interviews with the Senior Investigators confirmed the training received included the initial response to reports of sexual abuse, general investigative protocols interview and interrogation techniques for both victim, aggressors, non-witness interviews, evidence collection and preservation, proper use of Miranda and Garrity warnings, during administrative and criminal investigations, review of past reports and records and the determination of investigative findings.

115.34(c) The Department shall maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations. The auditor reviewed training certificates of completion for the SID Investigators, specialized training titled “10:19 Prison Rape Elimination Act.” And “Reporting and Handling of Sexual Assault Incidents.”

By examination of training records, this Auditor determined that NJDOC maintains documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations.

115.34(d) The NJDOC is responsible for conducting all administrative and criminal investigations to include sexual abuse. Therefore, zero allegations are referred to other State or Department of Justice entities for an investigation.

NJDOC investigates sexual abuse in confinement settings and provides training for their investigators.

The auditor interviewed the following investigators to determine compliance:

- SID Investigators
- Institutional PREA Compliance Manager
- NJDOC State PREA Coordinator

Based on the review of agency policies, PREA Investigative files, documentation of investigators’ training per standard, and interviews, the facility has demonstrated compliance with all the provisions of the standard.

| 115.35 | Specialized training: Medical and mental health care  |
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|        | <p data-bbox="256 185 959 219"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="256 264 544 297"><b>Auditor Discussion</b></p> <p data-bbox="256 342 1342 421">The auditor reviewed the following policies and documentation to determine compliance:</p> <ul data-bbox="331 488 1398 768" style="list-style-type: none"> <li>• Bayside PREA Audit Questionnaire (PAQ)</li> <li>• Med.002.004 Mental Health Services Staff</li> <li>• Medical &amp; Mental Health Certificates</li> <li>• PREA Rape Elimination Act Lesson Plan 2018</li> <li>• On- Line Volunteer Completed Training E-Mail</li> <li>• PCS.OO1.008 PREA Compliance / Prevention, Detection, and Response of Sexual Abuse and Harassment</li> </ul> <p data-bbox="256 813 1477 1395">115.35 (a) NJDOC Policy PCS.001.008 (page 31) states all full and part-time medical and mental health care practitioners who work regularly in the facility shall be trained in: how to prevent, detect, and respond to acts of sexual abuse or sexual harassment. Medical and mental health staff are contract employees who must complete the agency's PREA training and medical and mental health specialized training received from designated supervisory instructor contract staff within the department. The policy states all full and part-time medical and mental health care practitioner who work regularly in the facility shall be trained in: (a) How to detect and assess signs of sexual abuse and sexual harassment; (b) How to preserve physical evidence of sexual abuse; (c) How to respond effectively and professionally to victims of sexual abuse and sexual harassment; (d) How and to who report allegations or suspicions of sexual abuse and sexual harassment; (e ) This training shall be documented on the NJDOC training Roster and maintained by the agency. The Medical and Mental Health providers are contracted by Rutgers University.</p> <p data-bbox="256 1429 1477 1843">An interview with the Mental Health Administrator (MHA), and Health Services Administrator (HSA) confirmed all medical and mental health staff are required to complete Specialized Training. The Specialized Training is completed upon new hire and annually. Each staff identified the training they received regarding effective and professional responding to sexual abuse victims, evidence preservation, reporting procedures, and forensic examination protocols. All knew their coordinated response responsibilities if an inmate is sexually abused at BSP. This auditor also reviewed medical staff training transcripts. These training transcripts verified that medical and mental health contracted providers received annual PREA training received by BSP employees.</p> <p data-bbox="256 1877 1477 2078">The PAQ noted 38 medical and mental health care practitioners who work regularly at this facility received the training required by agency policy, and 100 % completed the specialized training pursuant to the standard. The number was later identified as 38 medical and mental health care practitioners were employed throughout the 12-month review period.</p> |



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|  | <p>115.35(b) NJDOC Policy PCS.001.008 (page 31) If medical staff employed by the agency conduct forensic examinations, such medical staff shall receive the appropriate training to conduct such examinations.</p> <p>An interview conducted with the Medical Administrator and Senior Investigator stated upon receiving a report of an alleged sexual abuse within the 72-hour time frame if a SAFE/SANE response is needed they will transport to an outside medical facility. All forensic examinations are performed off-site at the Inspira Medical Center.</p> <p>115.35(c) NJDOC Policy PCS.001.008 (page 31) states all full and part-time medical and mental health care practitioners who work regularly in the facility shall be trained in: how to prevent, detect, and respond to acts of sexual abuse or sexual harassment. This training shall be documented on the NJDOC Training Roster and maintained by the facility. The auditor reviewed files for confirmation of completed Specialized PREA training for Medical and Mental Health training for 38 medical and mental health staff.</p> <p>115.35 (d) in addition to PREA training pursuant to standard 115.32. Interviews with both the Mental Health Administrator and the Medical Services Administrator indicated departmental staff are required to complete standard PREA training upon reporting to the facility during new employee orientation and annually. The PREA training is completed through classroom sessions and an on-line NJDOC PREA training course in which all staff including medical and mental health staff are required to complete. Confirmation of PREA training pursuant to standard 115.32 for medical and mental health staff were documented electronically. The auditor reviewed 10 training files and confirmed they met the requirements of this standard.</p> <p>The auditor spoke with the following Health Services staff to determine compliance:</p> <ul style="list-style-type: none"> <li>• Health Services Administrator</li> <li>• Mental Health Administrator</li> <li>• Institutional PREA Compliance Manager</li> </ul> <p>The facility meets compliance with this standard, based on review of lesson plans, training rosters, and staff interviews.</p> |
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| 115.41 | Screening for risk of victimization and abusiveness   |
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|        | <p><b>Auditor Overall Determination:</b> Meets Standard</p>   |
|        | <p><b>Auditor Discussion</b></p>  |
|        | <p>The auditor reviewed the following policies and documentation to determine compliance:</p> <ul style="list-style-type: none"> <li>• Bayside PREA Audit Questionnaire (PAQ)</li> <li>• PREA Risk Screening Forms</li> </ul> |

- IMM.002.JPG.001 Inmate Electronic Communication / Information / Visitation System
- PCS.001.008 Prevention, Detection and Response of Sexual Abuse and Harassment
- CLS.005.001 Review of Inmates by Classification and Review Committees
- IMM.001.004 Zero Tolerance Policy: Prison Sexual Abuse and Harassment
- PCS.001.TGI.01 Incarcerated Persons Gender Identity Policy
- CLS.002.INT.001 Classification Intake Procedures
- MED.001.012 Inmate Medical Healthcare Services
- CLS.002.INT.001 Classification Intake Procedures
- MED.IMA.001 Health Appraisals at Reception
- CLS.002.001 Classification Intake Process
- PREA Assessment Risk Screening Forms
- IMM.002.001 Inmate Remedy System

115.41(a) NJDOC PCS.001.008 (pages 31- 33) establishes policy and assigns responsibilities for screening individuals housed in a correctional facility under the authority of the NJDOC staff. Staff are to assess the risk of the individual being sexually abused or being sexually abusive towards other inmates.

An excerpt from the above policy states “All incarcerated persons committed to the custody of the NJDOC are screened for PREA risk with the goal of keeping separate those incarcerated persons at high risk of being sexually victimized from those at high risk of being sexually abusive. This screening is initially done during the reception process, and as incarcerated persons are transferred between facilities. PREA Risk information is not to be used to set an incarcerated person’s custody level.

“Incarcerated persons are assessed by the healthcare provider during an in-person intake risk screening for their risk of being sexually abused by other incarcerated persons or sexually abusive toward other incarcerated persons within 72 hours of arrival at each facility.”

Random and targeted inmate interviews corroborate this practice. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.41(b) NJDOC PCS.001.008 (pages 31- 33) directs that healthcare provider will interview and evaluate all inmates for sexually aggressive/victim tendencies utilizing the PREA Objective Screening Process within 72 hours of arrival at a facility. The PAQ indicated there were 2037 inmates admitted to the facility during the 12-month review period longer than 30 days. The Bayside State Prison provided documentation proving compliance with the standard that all inmates are screened for their risk of being sexually abused by other inmates or being sexually abusive toward other inmates normally upon intake but no later than 72 hours of arrival at the facility. All screening reviewed appeared to properly be completed and within the prior time frame. 36 out of 36 records reviewed showed 100% compliance.

While on site, this auditor interviewed the Regional PREA Compliance Manager and BSP Institutional PREA Compliance Manager. Both explained the process of obtaining

the inmate's risk of victimization and abusive history information.

During the interview the IPCM shared that they conduct all PREA Initial Screenings upon arrival. This screening process entails screener observations, inmate self-report and a "receiving chart" review which aligns with 115.41. Upon completion of their initial screening, they receive a PREA risk score and status. Once the assessment period is over at BSP, the inmate is then housed within the facility where they will serve their sentence.

115.41(c)(d) NJDOC PCS.001.008 (page 32) Such assessments shall be conducted using an objective screening instrument.

The NJDOC PREA Screening instrument assigns a numerical point value to questions regarding their risk and/or history of victimization and/or abusiveness categories based on the responses provided by the inmate and information obtained from the inmate records. Inmates are asked to provide a response to the questions during the interview/risk screening procedures.

The risk screening form is identified as the NJDOC PREA Risk Assessment Screening form. The risk screening instrument includes an excess of the 10 factors identified in the standard provision. Sexual Victim Factors include 1) Whether the inmate is a former victim or institutional (prison or jail) sexual abuse; 2) The inmate's own perception of vulnerability; 3) Whether the inmate is detained solely for civil immigration purposes; 4) Whether the inmate has a mental, physical, or developmental disability; 5) The age of the inmate (24 or younger or elderly, 60 or older); The physical build of the inmate (5'6 and/or less than 120 pounds; 7) Whether the inmate has previously been incarcerated; 8). Whether the inmate's criminal history is exclusively non-violent; 9) Whether the inmate has prior convictions for sex offenses against an adult or child; 10) Whether the inmate is or perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming; 11) Whether the inmate has previously experience sexual victimization.

Additional Sexual Aggressor Factors included in the risk screening process include: 1) History of prior institution (jail or prison sexual abuse; 2) Prior acts of sexual abuse; 3) Prior acts of violent offenses; and 4) History of prior institution violence.

This PREA Risk Screening tool considers, at a minimum, the criteria identified in this PREA 115.41 standard to assess inmates for risk of sexual victimization and abusiveness. Additionally, the PREA Risk Screening Tool has a scoring mechanism with a 3-point calibrated threshold to assess inmate risk of sexual victimization and a 2-point calibrated threshold to assess inmate risk of sexual abusiveness. Finally, this PREA Risk Screening Tool contains a designation/risk section, as well as a referral section for follow-up with mental health within 14-days of the intake screening.

115.41(e) NJDOC PCS.001.008 (page 32) states: The initial screening shall consider prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known to the agency, in assessing inmates for risk of being sexually abusive.

It further reads; Medical/Mental Health staff use a multidimensional risk assessment checklist upon intake that takes into account all factors listed in section (d) of this subsection. The multidimensional risk assessment checklist encompasses information available to staff at the time of intake, and with the purpose of referring the incarcerated person for further assessment if needed. Information on how the Medical/Mental Health provider conducts PREA Risk screening is located in the Internal Management Procedures MED.IMA.001 Health Appraisals at Reception and MHS.001.002 Mental Health Services Reception & Evaluation.

Based on the inmate's response, of yes or no, the inmate is scored at risk for abusiveness and or as an aggressor. Confirmation of the standard provision compliance was based on the review of risk assessment questionnaire and observation of the risk screening process during the site visit.

115.41(f) NJDOC PCS.001.008 (page 33) notes: (f) Within a set time period, not to exceed 30 days from the inmate's arrival at the facility, the facility will reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening.

The PAQ noted the number of inmates entering the facility (either through intake or transfer) within the past 12 months whose length of stay in the facility was for 30 days or more and who were reassessed for their risk of sexual victimization or of being sexually abusive within 30 days after their arrival at the facility based upon any additional, relevant information received since intake was noted as 2037.

The auditing team randomly selected the PREA Screening forms from each month during the 12-month review period for confirmation of timely risk screening within 72 hours and rescreening within 30 days for 36 inmates' arriving at BSP. The review confirmed that all inmates received their initial risk screening on the day of arrival, and the reassessments were completed between 20 - 27 days of the inmates' arrival. Therefore, 100% of the inmates were re-screened for their risk of sexual victimization or of being sexually abusive within 30 days of the inmate's arrival and their initial assessment.

Interviews were conducted with inmates that included those arriving during the 12-month review period. The inmates acknowledged they were asked questions related to the PREA Screening Application forms within a private area/office and being asked twice within 30 days of their arrival.

115.41(g) NJDOC PCS.001.008 policy reads: 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 victimization or abusiveness.

During the initial classification review, which occurs within 21 days of arrival to a facility, an updated risk assessment is completed on every incarcerated person. The PREA reassessment includes any new information that has come in from various sources; a file review, interview with the incarcerated person to review things that can change over time such as the incarcerated person's perception of their own

vulnerability, LGBTI status, and whether they have been approached/victimized/perpetrated sexual abuse since intake. Information that is static is not updated.

The PREA Risk Screening assessment will be updated when there is a staff referral, an incident or disciplinary charge of sexual abuse/sexual harassment, or receipt of additional information that affects their risk of sexual victimization or abusiveness. Incarcerated persons may also request to update this information at any time.

This service may be requested in non-emergent situations by completion of the New Jersey Department of Correctional Health Services Request Form (MR-007), Incarcerated person Remedy System Form or through a JPAY Kiosk. In emergent situations, incarcerated persons are advised to immediately contact a staff member.

Interviews with the Institutional PREA Compliance Manager indicated an additional assessment is conducted upon receiving any additional information that could result in changes of custody level scoring, and/or other classification changes to include upon an inmate being identified as a victim of sexual abuse and/or as an aggressor in a substantiated sexual abuse investigation. The PREA Screening Application is utilized to conduct all reassessments. Upon an inmate's status change, the Classification Staff is notified of the inmate's status change to ensure the proper labelling for housing assignments.

This process gives the inmate face-to-face contact with the PCM to discuss any changes to the initial assessment completed by the facility 30 days prior or to disclose when warranted new information.

115.41(h) NJDOC PCS.001.008 policy read inmates will not be disciplined for refusing to answer or disclosing complete information in response to screening questions.

During interviews with various staff who conduct risk screening, inmates would not receive discipline for refusing to cooperate during the risk screening process. Staff indicated they have not encountered an incident in which an inmate has refused to cooperate during the risk screen assessments.

115.41(i) NJDOC PCS.001.008 policy notes: The agency shall implement appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates.

NJDOC utilizes electronic medical records safeguarded by password protection and restricted access. The following staff members have access to the system Facility Administrator, Institutional PREA Compliance Manager, Medical and Mental Health Administrators. Per the PREA Compliance Manager, NJDOC has outlined those staff who should have access to the inmates' risk assessments.

The auditor interviewed the following staff members to determine compliance:

- Institutional PREA Compliance Manager / Assistant Superintendent
- Staff Responsible for Risk Screening (Classification, Medical & Mental Health)

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|  | <ul style="list-style-type: none"> <li>• NJDOC Statewide PREA Coordinator</li> <li>• Random and Targeted Inmates</li> </ul> <p>The facility meets compliance with this standard, based on reviewed documentation, observation during walkthrough of the facility, inmate and staff interviews.</p> |
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| <b>115.42</b> | <b>Use of screening information</b>   |
|               | <b>Auditor Overall Determination:</b> Meets Standard  |
|               | <b>Auditor Discussion</b>   |
|               | <p>The auditor reviewed the following policies and documentation to determine compliance:</p> <ul style="list-style-type: none"> <li>• PCS.001.008 Prevention, Detection and Response of Sexual Abuse and Harassment</li> <li>• IMM.001.004 Zero Tolerance Policy: Prison Sexual Abuse and Sexual Harassment</li> <li>• MED.MHS.002.010 Counseling Services for Victims of Sexual Assault</li> <li>• PCS.001TGI.01 Incarcerated Persons Gender Identity Policy</li> <li>• CLS.002.INT.001 Classification Intake Procedures</li> <li>• CLS.002.001 Classification Intake Process</li> <li>• MED.IMA.001 Health Reprisal at Reception</li> <li>• Bayside PREA Audit Questionnaire (PAQ)</li> </ul> <p>115.42 (a) NJDOC Policy PCS.001.008 (page 34) The agency shall use information from the risk screening required by § 115.41 to inform housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive.</p> <p>While on site, this auditor interviewed the Institutional PREA Compliance Manager (IPCM)/Assistant Superintendent that explained the process of obtaining the inmate's risk of victimization and abusiveness history information.</p> <p>This screening process entails screener observations, inmate self-report and a "receiving chart" review which aligns with 115.42. Upon completion of their initial screening, they receive a PREA risk score and status.</p> <p>By examination of the Multidimensional Sexual Victimization and Abusiveness Risk Assessment and the 30-day reassessment, BSP uses information from the risk screening required by § 115.41 to inform housing, bed, work, education, and program assignments to keep separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive.</p> <p>115.42 (b) NJDOC Policy PCS.001.008 (page 34) reads: The agency shall make</p> |

individualized determinations about how to ensure the safety of each inmate.

PREA risk information is restricted to the extent necessary to make and maintain housing, bed, work, education and programming assignments. It is the responsibility of the IPCM to distribute reports relevant to PREA risk assessment to staff responsible for making housing, bed, work, education and programming assignments. It is also the IPCM's responsibility to ensure that this information is presented at Institutional Classification Committees.

By reviewing a sample of the Multidimensional Sexual Victimization and Abusiveness Risk Assessments and the 30-day assessments, this Auditor determined that individualized determinations are made by the agency/facility about how best to ensure the safety of each inmate. Internal Management Procedure PCS.001.TGI.01 (page 8) Housing and Classification indicates NJDOC considers management and security challenges presented by each inmate on a case-by-case basis but considers factors such as: 1. The declaration of a specific gender identity and completion of a Gender Identity Information Form, if applicable; 2. Custody level and sentencing information; 3. Criminal history; 4. Institutional disciplinary history; 5. current gender expression; 6. The inmate's views regarding sexual safety; 7. Medical and mental health needs/ information/status; 8. Compliance with medically recommended treatments; 9. Vulnerability to sexual victimization; 10. Likelihood of perpetrating sexual abuse; 11. Facility-specific factors, including physical layouts; and 12. any other relevant information.

Random and Targeted inmates sampled confirmed completing an assessment and reassessment at BSP during the intake process. The auditor selected some inmates were entered the facility more than one year prior.

115.42 (c) NJDOC Policy PCS.001.008 (page 34) states: In deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, and in making other housing and programming assignments, the agency shall consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether the placement would present management or security problems.

Based on the auditor's observations, during the on-site tour, BSP does not have dedicated housing units for transgender offenders. There were no transgender cases in the inmate population identified during the on-site audit. However, policy and staff interviews revealed BSP determines housing and programming assignments for transgender or intersex inmates on a case-by-case basis and careful consideration is given to all assignments, to include whether a placement would ensure the inmate's health and safety and whether the placement would present management or security problems.

115.42 (d) NJDOC Policy PCS.001.008 (page 34) it reads: Placement and programming assignments for each transgender or intersex inmate shall be reassessed at least twice each year to review any threats to safety experienced by the inmate.

During her interview, the PREA Compliance Manager confirmed that a transgender or intersex inmate's views concerning their safety would be seriously considered. There

were no transgender nor intersex inmate cases. The last transgender case was transferred on the beginning part of last year 2024.

115.42 (e) NJDOC Policy PCS.001.008 (page 34) it reads: A transgender or intersex inmate's own view with respect to his or her own safety shall be given serious consideration.

A transgender or intersex incarcerated person's own view with respect to his or her own safety shall be given serious consideration. Staff shall consider, on a case-by-case basis, whether housing assignments and programming for transgender or intersex incarcerated persons would ensure the incarcerated person's health and safety, and whether the placement would present management or security problems. Housing and programming for transgender and intersex incarcerated persons shall be reassessed at least twice each year, or as needed, to review any threats to the incarcerated person's safety. The process for gender identity-based housing is outlined in PCS.001.TGI.01 (page 10) Incarcerated Persons Gender Identity.

115.42 (f) NJDOC Policy PCS.001.008 (page 34) it reads: Transgender and intersex incarcerated persons shall be given the opportunity to shower separately from other incarcerated persons.

Per PCS.001.TGI.01 (page 11) Incarcerated Persons Gender Identity, transgender and intersex incarcerated persons shall be given the opportunity to shower separately from other incarcerated persons.

According to the Facility Administrator, transgender and intersex inmates are allowed to shower separately from other inmates. She explained, the past transgender cases were allowed to shower separately. During the facility tour, this Auditor observed shower facilities. The facility has installed shower curtains to provide inmates with a measure of privacy but allows for good security management. This Auditor heard staff making announcements about opposite genders before entering the housing unit.

115.42 (g) NJDOC Policy PCS.001.008 (pages 34 and 35) it reads: The agency shall not place lesbian, gay, bisexual, transgender, or intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status, unless such placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting such inmates. Bayside State Prison is not under Federal Consent decree.

NJDOC does not place LGBTI incarcerated persons in dedicated facilities, units, or wings solely on the basis of such identification or status. Auditor interviewed four (4) inmates identifying as gay. All four inmates confirmed that there was no designated housing for LGBTI inmates.

Based on the auditor's observations, during the on-site tour, BSP does not have dedicated housing units for transgender offenders. There were no transgender cases in the inmate population identified during the on-site audit.

The auditor interviewed the following individuals to determine compliance:



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|  | <ul style="list-style-type: none"> <li>• Random Staff</li> <li>• Targeted Staff</li> <li>• Targeted inmates</li> <li>• Facility Administrator</li> <li>• Institutional PREA Compliance Manager / Assistant Superintendent</li> </ul> <p>Interviews with staff and an examination of documentation/policies confirm BSP is compliant with the requirements mandated in Standard 115.42</p> |
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| <b>115.43</b> | <b>Protective Custody</b>  |
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|               | <b>Auditor Overall Determination:</b> Meets Standard   |
|               | <b>Auditor Discussion</b>  |
|               | <p>The auditor reviewed the following policies and documentation to determine compliance:</p> <ul style="list-style-type: none"> <li>• IMM.002.003 Americans with Disabilities Act and New Jersey Against Discrimination- Reasonable Accommodations for Inmates</li> <li>• PCS.001.008 Prevention, Detection and Response of Sexual Abuse and Harassment</li> <li>• PCS.001.TGI.01 Incarcerated Persons Gender Identity Policy</li> <li>• ADM.019.003.TAH Temporary Administrative Housing</li> <li>• ADM.019.003.PCS Protective Custody Status</li> <li>• ADM.019.003.IHU Investigative Housing Unit</li> <li>• CLS.002.001 Classification Intake Process</li> <li>• ADM.019. 003.VH Vulurable Housing Units</li> <li>• ADM.019.003 Close Custody Units</li> <li>• BSP PREA Audit Questionnaire (PAQ)</li> </ul> <p>115.43 (a) NJDOC Policy PCS.001.008 (page 35) Inmates at high risk for sexual victimization shall not be placed in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made 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 involuntary segregated housing for less than 24 hours while completing the assessment.</p> <p>According to the Facility Administrator, inmates at high risk for sexual victimization are not placed in involuntary segregated housing unless an assessment of all available alternatives has been made and a determination has been made that there is no known alternative means of separation from likely abusers. If a facility cannot conduct such an assessment immediately, the facility may hold the inmate in involuntary segregated housing for less than 24 hours while completing the</p> |

assessment. Staff who supervise segregation were interviewed, which confirmed that inmates at high risk for sexual victimization placement in segregation would be a last option to protect the victim's safety.

115.43(b) NJDOC Policy PCS.001.008 (page 36) it reads, Inmates placed in segregated housing for this purpose shall have access to programs, privileges, education, and work opportunities to the extent possible. If the facility restricts access to programs, privileges, education, or work opportunities, the facility shall document:

- (1) The opportunities that have been limited;
- (2) The duration of the limitation; and
- (3) The reasons for such limitations.

Reasons for an incarcerated person's placement in a Close Custody Unit based on PREA Risk and/or a PREA allegation shall be documented in accordance with current policies and procedures. If an incarcerated person victim is in Close Custody status as a result of PREA Risk and/or PREA allegation, they will be afforded all privileges, including visitation, personal property, mail, commissary, programming, and vocational opportunities incarcerated person unless extenuating circumstances exist.

Extenuating circumstances include but are not limited to, pending disciplinary charges, dry cell placement, and any circumstance that would pose a threat to the safety, security and orderly running of the correctional facility, as determined by the facility Administrator or facility designee. Documentation must be made if extenuating circumstances require the restriction/limitation of personal property, telephone, visits and other services.

BSP reported on the PAQ that during the applicable audit period, no inmate was held in involuntary segregated housing. Segregated Housing Staff and inmate interviews revealed no incidents of involuntary segregated housing being used for this purpose during the past 12 months at this facility. The auditor conducted a tour of all restricted housing units at BSP and conducted interviews with inmates assigned to segregated housing unit. Review of staff visiting logs, inmate logs, documentation and interviews with inmates assigned confirmed all inmates have access to legal and leisure material, phone calls, mail, education, medical, mental health services, recreation, meals, and access to staff.

115.43(c)(d) (e) NJDOC Policy PCS.001.008 (page 36 and 37) states, the facility shall assign such inmates to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed a period of 30 days.

(d) If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, the facility shall clearly document:

- (1) The basis for the facility's concern for the inmate's safety; and
- (2) The reason why no alternative means of separation can be arranged.

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|  | <p>If Close Custody Unit housing placement is necessary, such documentation shall be made pursuant to Policy Statement ADM.019.003 Close Custody Units on the Authorization for Placement form and related reports (example: Unusual Incident Report, Preliminary Incident Report, etc.). Placement in Close Custody Unit housing based on a PREA allegation or risk is not automatic. Such placement shall be made by the facility Administrator or Administrator designee. A determination, documented in writing and reviewed by the IPCM and Administrator or Administrator designee within 24 hours, shall be made on a case by case basis taking into account factors which include, but are not limited to: no available alternative means of separation from likely abusers, the nature and severity of the PREA prohibited act, medical, mental health, disciplinary and investigatory considerations, an incarcerated victim's access to property, services and privileges that are afforded to general population incarcerated persons, and any circumstances that would pose a threat to the safety, security and orderly running of the correctional facility.</p> <p>(e) Every 30 days, the facility shall afford each such inmate a review to determine whether there is a continuing need for separation from the general population.</p> <p>Incarcerated persons assigned to a Close Custody Unit based on PREA risk and/or PREA allegation shall remain in a Close Custody Unit only until an alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed a period of 30 days. Documentation of reasoning is made in official NJDOC reports.</p> <p>Staff and inmate interviews revealed no incidents of involuntary segregated housing being used for this purpose during the past 12 months at this facility; therefore, there were no 30-day reviews. This was corroborated by the Facility Administrator and Institutional PREA Compliance Manager. Therefore, the facility demonstrated compliance with this part of the standard during this audit. The PAQ noted no inmates were held in involuntary segregated housing for longer than 30 days in the past 12 months awaiting completion of assessment. The Facility Administrator indicated that involuntary segregated housing is not used for inmates at high risk for sexual victimization.</p> |
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| <b>115.51</b> | <b>Inmate reporting</b>  |
|               | <b>Auditor Overall Determination:</b> Meets Standard   |
|               | <b>Auditor Discussion</b>  |
|               | <p>The auditor reviewed the following policies and documentation to determine compliance:</p> <ul style="list-style-type: none"> <li>• BSP PAQ</li> <li>• PREA Quick Reference Guide</li> <li>• English Inmate PREA Handout</li> </ul> |

- Spanish Inmate PREA Handout
- IMM.002.001 Inmate Remedy System
- Final NJ PREA Staff Reporting Quad Fold
- MED.002.004 Mental Health Services Staff
- MED.001.012 Inmate Medical / Health Care Services
- ADM.001.012 Incarcerated Person Abuse Reporting and Investigation
- IMM.001.004 Zero Tolerance Policy: Prison Sexual Abuse and Sexual Harassment
- PCS.001.008 Prevention, Detection and Response of Sexual Abuse and Harassment
- IMM.002.JPG.001 Inmate Electronic Communication / Information / Visitation System

115.51 (a) NJDOC PCS.001.008 (page37) state the agency shall provide multiple internal ways for inmates to privately report sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents.

NJDOC has established and maintains multiple internal channels for incarcerated persons to privately report sexual harassment and/or sexual abuse, retaliation by other incarcerated persons or staff members for reporting an allegation of sexual abuse/harassment or cooperating with a PREA investigation, and of any staff member neglect or dereliction of responsibilities that may have contributed to the incident. Incarcerated persons can report incidents of sexual abuse or harassment in person or in writing to any staff, contractor, or volunteer, to the facility IPCM in person or in writing, to SID in person or in writing, via accessing communication with an NJDOC approved electronic Kiosk or tablet, or anonymously. Incarcerated persons can report an incident at any time no matter when, or where, it happened.

NJDOC advises and educates incarcerated persons of their rights and ability to report via numerous methods and also provides reporting contact information on posters and literature available throughout each correctional facility.

Incarcerated persons may report PREA sexual abuse/sexual harassment internally by using one of the following methods:

- Verbally or in writing to any NJDOC staff member, contractor or volunteer.
- Contacting the Correctional Facility's IPCM.
- Using the Incarcerated person Remedy System/media Kiosk.
- Contacting the Special Investigations Division (SID) via the Confidential SID box or by dialing \*SID1# on the Incarcerated person Telephone System (free call).

Interviews with random and specialized staff identified these methods as accessible to the inmate population to report PREA allegations.

Methods of reporting PREA allegations are posted on PREA posters throughout the facility to include inmate program areas, housing units, inmate dining, education, medical, visitation, recreation, work assignment areas, and on inmate telephones in addition to the inclusion in the inmate handbook. Formal and informal inmate interviews indicated all inmates were aware of the available reporting options. They acknowledged PREA posters and signage on the facility's walls throughout identifying the PREA Hotline is accessible by calling SID1# on the Inmate Telephone System (free call).

Inmates are issued PREA brochure during the intake process that includes the following: Offenders incarcerated in NJDOC facilities are encouraged to immediately report allegations of sexual abuse to correctional staff, facility administrators, the PREA TIP LINE / SID or through the grievance process.

Formal and informal interviews with the inmate population confirmed they have a continuous opportunity to purchase writing instruments to include note pads, ink pens, pencils and postal stamps from the inmate commissary that allows them to communicate in writing both internally and externally with others. Additionally, writing instruments are provided by the facility as needed.

The auditor utilized the housing unit phone to conduct a test call at SID1. The call was immediately accepted by the SID investigator.

The auditor observed mailboxes for the placement of internal and external mail by the inmate population. Per an interview with staff assigned to the BSP mailroom, staff collects all mail Monday – Friday except for Federal holidays to include anonymously submitted letters. Internal mail is forwarded to the department in which the letter is addressed to. Outgoing mail is prepared for processing by the United States Post Office.

115.51 (b) NJDOC PCS.001.008 (page38) states: The agency shall also provide at least one way for inmates to report abuse or harassment to a public or private entity or office that is not part of the agency, and that is able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials, allowing the inmate to remain anonymous upon request. Inmates detained solely for civil immigration purposes shall be provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security.

The Office of the Correction Ombudsperson serves as an available outside resource to incarcerated persons in custody of the New Jersey Department of Corrections to report incidents of sexual abuse, assault, harassment or retaliation. The Office of the Corrections Ombudsperson, upon receiving such information, shall immediately forward incarcerated person report of sexual abuse or sexual harassment to agency officials, allowing the incarcerated person to remain anonymous upon request. Incarcerated persons can contact the Ombudsperson by writing to:

Office of the Corrections Ombudsperson PO Box 855 Trenton, NJ, 08625 Or by phone at 1-555-555-5555 (free call)

A review of the Inmate Handout identifies resources outside the facility to report PREA allegations. The handout states: "To report incidents of sexual abuse to an outside resource you may call Office of the Corrections Ombudsman, PO Box 855, Trenton, NJ, 08625 Inmate Only Phone # 1-555-555-5555 (free call) or write to Just Detention International at Cynthia Totten, Esq. Just Detention International, 3325 Wilshire Blvd., Suite 340, Los Angeles, CA 90010.

An interview with an employee from The Office of the Corrections Ombudsperson.

She stated her organization has agreed to receive reports of sexual abuse and sexual harassment from inmates at BSP. She further explained, a listener is always available to speak directly with the caller and although the center can receive and immediately forward inmates report of sexual abuse and sexual harassment to the NJDOC facilities, the callers must give authorization for staff to release the information prior to contacting the facility.

115.51 (c) NJDOC PCS.001.008 (page38) states: Staff shall accept reports made verbally, in writing, anonymously, and from third parties and shall promptly document any verbal reports.

Every NJDOC staff member, contractor, and volunteer is obligated to report any actual or suspected instance of sexual abuse or sexual harassment involving incarcerated persons. Documentation of staff statements must be recorded on a Special Report as soon as possible following the receipt of the report. This report should, at a minimum, include the name of the complainant if provided, a description of the allegation, and all relevant information conveyed in the verbal report, such as the time, date, and individuals involved. Completed reports shall be provided to a custody supervisor immediately upon completion.

The review of the ten (10) investigative case files confirmed six (6) were reported verbally to staff, one (1) was reported via the submission of a grievance and three (3) were reported via third party.

115.51 (d) NJDOC PCS.001.008 (page39) states: The agency shall provide a method for staff to privately report sexual abuse and sexual harassment of inmates.

NJDOC staff, contractors and volunteers can privately report an allegation of sexual abuse, sexual harassment, or retaliation to the Special Investigations Division (SID) confidential tip line 609-530-2500, or the IPCM.

Interviews with 23 random and targeted staff indicated they were knowledgeable in how to privately report sexual abuse or sexual harassment. Most staff cited the PREA hotline and/or directly reporting to a supervisor in person or through a private phone call as primary methods to make a private report of sexual abuse or sexual harassment.

The auditor interviewed the following individuals to determine compliance:

- Intake Staff
- Random & Targeted Inmates

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|  | <ul style="list-style-type: none"> <li>• Random &amp; Targeted Staff Members</li> <li>• Corrections Ombudsperson Employee</li> <li>• Institutional PREA Compliance Manager</li> </ul> <p>Based on the review of agency policies, successful testing of internal and external reporting options available to the inmate population, interviews with staff and the inmate population, and site observation, the facility has demonstrated compliance with all the provisions of the standard.</p> |
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| <b>115.52</b> | <b>Exhaustion of administrative remedies</b>  |
|               | <b>Auditor Overall Determination:</b> Meets Standard  |
|               | <b>Auditor Discussion</b>   |
|               | <p>The auditor reviewed the following policies and documentation to determine compliance:</p> <ul style="list-style-type: none"> <li>• IMM.002.JPG.001 Inmate Electronic Communication / Information / Visitation System</li> <li>• PCS.001.008 Prevention, Detection and Response of Sexual Abuse and Harassment</li> <li>• IMM.001.004 Zero Tolerance Policy: Prison Sexual Abuse and Sexual Harassment</li> <li>• IMM.002.001 Inmate Remedy System</li> <li>• Inmate Grievances</li> <li>• BSP PAQ</li> </ul> <p>115.52(a) NJDOC PCS.001.008(page 39) states: An agency shall be exempt from this standard if it does not have administrative procedures to address inmate grievances regarding sexual abuse.</p> <p>In accordance with standard 115.52, incarcerated persons may use the Remedy System as one means to report an allegation of sexual abuse.</p> <p>The Inquiry Form is intended to make routine inquiries and obtain information.</p> <p>The Grievance Form is an internal administrative means for the resolution of complaints associated with the conditions of an incarcerated person’s confinement.</p> <p>115.52(b) NJDOC PCS.001.008(page 39) states: The agency shall not impose a time limit on when an inmate may submit a grievance regarding an allegation of sexual abuse.</p> <p>(2) The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.</p> |

(3) The agency shall not require an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse.

(4) Nothing in this section shall restrict the agency's ability to defend against an inmate lawsuit on the ground that the applicable statute of limitations has expired.

NJDOC accepts all grievances related to sexual abuse, regardless of the time frame the alleged abuse occurred. Grievances are handled in accordance with IMM.002.JPG.01 IP Electronic Communication System Guidelines and IMM.002.IRS.001 Remedy System.

115.52(c) NJDOC PCS.001.008(page 39) states: The agency shall ensure that—

(1) An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint, and

(2) Such grievance is not referred to a staff member who is the subject of the complaint.

Any document received as part of the IP Remedy System related to sexual abuse/ harassment are immediately forwarded to SID and the facility Administrator. Documents are not referred to the staff member who is the subject of the complaint.

Per interviews with the SID Investigator, and Institutional PREA Compliance Manager (IPCM), all grievances alleging sexual abuse and /or sexual harassment are immediately forwarded to the SID Investigators for the completion of an investigation. All correspondence with the inmate regarding the PREA allegation is by the SID Investigators.

115.52(d) NJDOC PCS.001.008(pages 39 and 40) states: 1) The agency shall issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance.

(2) Computation of the 90-day time period shall not include time consumed by inmates in preparing any administrative appeal.

(3) The agency may claim an extension of time to respond, of up to 70 days, if the normal time period for response is insufficient to make an appropriate decision. The agency shall notify the inmate in writing of any such extension and provide a date by which a decision will be made.

(4) At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, the inmate may consider the absence of a response to be a denial at that level.

A Grievance Form is referred to SID for a PREA investigation. Most administrative investigation decisions will be made within 90 days. In cases where matters require extensive research, forensic testing and documentation, the period of time for action by the reviewing SID official(s) may be extended for up to 70 days if findings indicate



that the initial period is insufficient to make an appropriate decision. This extension shall be communicated in writing to the incarcerated person who has submitted the form.

The facility reported zero (0) sexual harassment, and three (3) sexual abuse allegations reported through the grievance process during the 12-month review period. Documentation supports the sexual abuse allegations was referred to the SID Investigators that was completed within timeframe.

Therefore, the requirement of notification to an inmate in writing when the agency files for an extension, including notice of the date by which a decision was made was not applicable.

Interviews conducted with two (2) inmates who reported sexual abuse indicated each were aware of the grievance process as a method to report sexual abuse.

The auditor observed grievance forms were located on open shelves in each housing unit accessible to the inmate population. Grievance depositories were observed located in each housing unit.

115.52(e) NJDOC PCS.001.008(pages 40 and 41) states;

(1) Third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, shall be permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse, and shall also be permitted to file such requests on behalf of inmates.

(2) If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.

(3) If the inmate declines to have the request processed on his or her behalf, the agency shall document the inmate's decision.

As outlined in policy statement IMM.002.001, titled "Incarcerated Person Remedy System," incarcerated persons have the option to utilize the incarcerated person remedy system as a method for reporting allegations of sexual abuse, sexual harassment, or retaliation. A third party can submit any document on behalf of an incarcerated person. Incarcerated persons, family members or other third-party individuals Incarcerated Person can report sexual abuse/sexual harassment on behalf of an Incarcerated Person by using the following methods:

- Corrections Ombudsperson - 1-555-555-5555 - Incarcerated Persons in DOC facilities
- Corrections Ombudsperson - 1-609-633-2596 - family members or third party on behalf of an Incarcerated Person
- Corrections Ombudsperson Address: **Office of Corrections Ombudsperson PO**

**Box 855 Trenton, NJ, 08625**

- NJDOC SID - \*SID1# on the Incarcerated Person Telephone System- for Incarcerated Persons in DOC facilities
- NJDOC SID - 609-826-5617 - for family members or third party on behalf of an Incarcerated Person
- Incarcerated Person Remedy System form/JPay Kiosks for Incarcerated Persons at NJDOC facilities with a JPay account
- Confidential SID box at the facilities - Incarcerated Persons in NJDOC facilities
- Verbally or in writing to any NJDOC staff member, contractor or volunteer - Incarcerated Persons and family members or third parties on behalf of an Incarcerated Person

NOTE: Residential Community Reintegration Programs (RCRPS') are contractors who maintain their own individual compliance with PREA standards which is monitored by the NJDOC. Incarcerated Persons assigned to RCRP's must consult their RCRP Handbook and/or RCRP PREA Compliance Manager for PREA reporting methods that are specific to each RCRP.

All third-party reports are then forwarded to SID for investigation. If the incarcerated person who is the alleged victim chooses not to have the request processed on their behalf, SID will document the incarcerated person's decision in the investigation report.

The auditor conducted a telephone test for confirmation of third-party reporting noted on the agency's' website as the TIP line for third-party reporting of sexual abuse and sexual assault at (609) 633- 2596. The auditor completed a call and was directed to leave a message with the reporting information and to include contact information for a return call. The Auditor received notification of the received call from the NJDOC Statewide PREA Coordinator within one (1) hour of the call. Per the NJDOC Statewide PREA Coordinator, upon receiving third party reporting calls, the information is immediately shared with the affected facility and an investigation is initiated at the facility by an SID investigator.

115.52(f) NJDOC PCS.001.008(pages 40 and 41) states;

(f) (1) The agency shall establish procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse.

(2) After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, the agency shall immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken, shall provide an initial response within 48 hours, and shall issue a final agency decision within 5 calendar days. The initial response and final agency decision shall document the agency's determination whether the inmate is in substantial risk of imminent

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|  | <p>sexual abuse and the action taken in response to the emergency grievance.</p> <p>Policy statement IMM.002.IRS.001 Remedy System and IMM.002.JPG.001 IP Electronic Communication System address this standard by setting forth the procedures of the Remedy System which provides a mechanism for incarcerated persons to address complaints, concerns, questions, problems and/or grievances to correctional facility Administration for resolution through the use of the Inquiry Form, the Grievance Form and the Appeal process via approved departmental forms or electronically through the departmentally approved incarcerated person accessible computerized electronic communication/information/visitation system offered through a contracted electronic service provider. The Remedy System refers to forms on paper or through the electronic submissions.</p> <p>115.52(g) NJDOC PCS.001.008(page 42) states; The agency may discipline an inmate for filing a grievance related to alleged sexual abuse only where the agency demonstrates that the inmate filed the grievance in bad faith.</p> <p>NJDOC does not discipline incarcerated persons for filing a grievance if the incarcerated person made an allegation of sexual abuse in good faith.</p> <p>The auditor interviewed the following individuals to determine compliance:</p> <ul style="list-style-type: none"> <li>• Special Investigation Division Investigator</li> <li>• Inmates Who reported Sexual Abuse</li> <li>• Corrections Ombudsman</li> <li>• IPCM</li> </ul> <p>Based on the review of the agency and facility's grievance policies, inmate handbook, allegation reported via grievances, site observation and testing of third-party reporting, staff and inmate interviews, BSP does meet all provisions of the standard.</p> |
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| <b>115.53</b> | <b>Inmate access to outside confidential support services</b>   |
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|               | <p><b>Auditor Overall Determination:</b> Meets Standard</p>   |
|               | <p><b>Auditor Discussion</b></p> <p>The auditor reviewed the following policies and documentation to determine compliance:</p> <ul style="list-style-type: none"> <li>• English PREA Inmate Handout</li> <li>• Spanish PREA Inmate Handout</li> <li>• Bayside PREA Audit Questionnaire (PAQ)</li> <li>• Flyer Cumberland English Emotional Support</li> <li>• Flyer Cumberland Spanish Emotional Support</li> <li>• PCS.001.008 Prevention, Detection and Response of Sexual Abuse and</li> </ul> |

## Harassment

115.53(a) NJDOC PCS.001.008(pages 42 and 43) states: The facility shall provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations, and, for persons detained solely for civil immigration purposes, immigrant services agencies. The facility shall enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible.

NJDOC maintains a memorandum of understanding with community service providers that are able to provide incarcerated persons with confidential emotional support services related to sexual abuse or sexual harassment. Copies of such agreements are maintained by the Agency PREA Coordinator. Upon request, copies of these agreements are provided to each facility IPCM.

Incarcerated persons who are committed to the custody of the NJDOC have access to external sexual abuse emotional support services. Incarcerated persons may access these services even if they do not wish to make a report of sexual abuse. All incarcerated persons shall be provided with the contact information for State sexual abuse advocacy agencies. They shall also be provided with information on how to write for a sexual abuse survivor packet that is provided by a national sexual abuse victim advocacy group. Facilities shall enable reasonable communication between incarcerated persons and these organizations and agencies in as confidential a manner as possible.

Telephone hotline services are available and can be accessed via the incarcerated person telephone system by dialing \*PREA# on the incarcerated person telephone system. Calls to the PREA Emotional Support Services Line are free. All such calls are confidential, although the incarcerated person must use their Personal Identification Number to access the free calls. The hours of operation of the hotline vary by correctional facility and are posted to the incarcerated person population.

PREA emotional support services shall be provided by external sexual abuse victim advocates who can assist in crisis intervention, provide information and offer support to anyone who has questions or is looking for information about sexual violence. The services are only for emotional support related to sexual abuse. Incarcerated persons shall be advised to address any questions or concerns regarding NJDOC PREA to the IPCM. The advocates who provide PREA emotional support services are not third party PREA reporters of sexual abuse/sexual harassment and/or retaliation. Incarcerated persons may report instances of sexual abuse/sexual harassment and/or retaliation by using any of the methods described in PREA Standards 115.51 Incarcerated person Reporting and 115.54 Third Party Reporting.

115.53(b) NJDOC PCS.001.008(page 43) states: The facility shall inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in

accordance with mandatory reporting laws.

Incarcerated persons are advised of the following: PREA external emotional support services are confidential. However, the service provider will notify the NJDOC if an incarcerated person communicates a threat of imminent harm against self or others. Additionally, misuse/abuse of the PREA emotional support line and/or the incarcerated person telephone system may result in discipline in accordance with N.J.A.C. 10A Chapter 4 Inmate Discipline.

115.53(c) NJDOC PCS.001.008(page 43) states: The agency shall maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse. The agency shall maintain copies of agreements or documentation showing attempts to enter into such agreements.

The NJDOC has entered into Memorandums of Understanding (MOU) with county based sexual abuse and sexual harassment victim advocacy agencies to provide emotional support services. Services are based on the county where the incarcerated person is housed.

Upon each inmate's arrival at BSP they are issued an Inmate Rules and Regulations Handbook and PREA Handout that is available in English and Spanish. The PREA handbook notes "If assistance is needed, contact any staff member, A hotline for reporting sexual assault is available by calling (609)- 633- 2596. "To seek support or victim advocacy to from an outside source, you may call the following number, The Services Empowering the Rights of Victims (SERV) by dialing \*PREA#. This call is confidential and will not be recorded by NJDOC.

NJDOC established a Memorandum of Understanding for the Bayside State Prison for victim advocacy services from SERV. The Memorandum of Understanding included the commitment to provide confidential victim advocate services to victims suffering from sexual assault. These services were confirmed during interviews with representatives from The Services Empowering the Rights of Victims.

The auditor observed the SERV postings on bulletin boards throughout the facility to include in all housing units, library, food service department, education, religious services, medical, mental health, recreation, operational departments, maintenance, administration, visitation, intake, lobby, and staff offices that noted the available victim advocate services provided by the SERV. These phone calls were identified as free and confidential. The mailing address is listed as The Services Empowering the Rights of Victims at 3600 E. Landis Ave, Unit 24, Vineland, NJ 08361.

The auditor observed telephones available for usage by the inmate population in all housing units throughout the facility to include those inmates in the segregation units who are also afforded the opportunity to utilize the phones. Per supervisory staff assigned to segregation, an inmate request to report a PREA allegation and/or contact The Corrections Ombudsman, or SERV to include via phone would be given access.

Formal and informal interviews with the inmate population acknowledged their

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|  | <p>awareness and observation of available advocate services information posted throughout the facility on bulletin boards and how to access via phone, or in writing. All inmates were aware that the calls were free, confidential and would not be recorded. However, zero inmates indicated they had elected to utilize victim advocacy services through these resources and could not provide information regarding the available services.</p> <p>The inmate population also confirmed they have the availability to purchase writing instruments to include note pads, ink pens, pencils and postal stamps from the inmate commissary that allows them to communicate in writing both internally and externally with others. Additionally, writing instruments are provided by the facility as needed.</p> <p>General mailboxes were accessible to the inmate population in all housing units. Mail is collected Monday through Friday and provides an avenue for the inmate population to report internally and externally to include anonymously.</p> <p>An interview with staff assigned to the facility mailroom confirmed the inmates' outgoing mail is sealed by the inmate. Written correspondence between inmate and Corrections ombudsman is not monitored by the mailroom staff and would be treated as legal mail.</p> <p>Auditor interviewed the following individuals to determine compliance:</p> <ul style="list-style-type: none"> <li>• SID Investigator</li> <li>• Targeted &amp; Random Inmates</li> <li>• Institutional PREA Compliance Manager</li> <li>• Corrections Ombudsman Representative</li> <li>• Services Empowering the Victim Representative</li> </ul> <p>Based on the review of agency policies, facility's Inmate Rules and Regulation Handbook, confirmation of MOU with SERV and confirmation of availability of victim advocate services to the inmate population, site observation, and interviews, facility does meet all standard provisions.</p> |
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| 115.54 | Third-party reporting   |
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|        | <p><b>Auditor Overall Determination:</b> Meets Standard</p>   |
|        | <p><b>Auditor Discussion</b></p>  |
|        | <p>The auditor reviewed the following policies and documentation to determine compliance:</p> <ul style="list-style-type: none"> <li>• PCS.001.PREA.OMB Allegations of Sexual Abuse, Assault, Harassment and Retaliation Reported to the Office of the Ombudsman</li> </ul> |

- IMM.002.JPG.001 Inmate Electronic Communication / Information / Visitation System
- PCS.001.008 Prevention, Detection and Response of Sexual Abuse and Harassment
- IMM.001.004 Zero Tolerance Policy: Prison Sexual Abuse and Sexual Harassment
- Zero Tolerance How to Report Sexual Abuse / Sexual Harassment or Retaliation
- IMM.002.001 Inmate Remedy System
- Spanish Inmate PREA Handout
- English Inmate PREA Handout
- Bayside PAQ

115.54(a) NJDOC PCS.001.008(pages 43 and 44) states: The agency shall establish a method to receive third-party reports of sexual abuse and sexual harassment and shall distribute publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate.

Incarcerated persons may also report sexual harassment and/or abuse through external public or private entities – third parties - utilizing outside communication sources available to them. Family members, friends, attorneys, clergy or any other third party may make a report of sexual abuse or sexual harassment on an incarcerated person's behalf.

Publicly available information for the numerous methods of third-party reporting, as detailed below, is made available (on posters and handouts) throughout every NJDOC facility in the visit areas, as well as on the NJDOC PREA webpage: New Jersey Department of Corrections.

Third party reports of sexual abuse and/or harassment within the correctional system are accepted and investigated by NJDOC SID in the same manner as all other such reports. Third parties are informed that they may report sexual abuse/sexual harassment by:

- Contacting the Correctional Facility's Institutional PREA Compliance Manager (IPCM).
- Contacting the NJDOC Special Investigations Division (SID) at (609) 826-5617 (SID takes third party reports and will subsequently conduct an investigation); and
- Contacting the Corrections Ombudsperson: Office of the Corrections Ombudsperson PO Box 855, Trenton, NJ, 08625 Phone (609) 633-2596

115.54(a) NJDOC IMM.001.004(page9) states: Family members or other third-party individuals incarcerated person may report sexual abuse / sexual harassment on behalf of an incarcerated person utilizing the methods detailed below.

Incarcerated persons, family members or other third-party individuals Incarcerated

person can report sexual abuse/sexual harassment on behalf of an incarcerated Person by using the following methods:

- Corrections Ombudsperson - 1-555-555-5555 - Incarcerated persons in DOC facilities
- Corrections Ombudsperson - 1-609-633-2596 - family members or third party on behalf of an Incarcerated Person
- Corrections Ombudsperson Address: Office of Corrections Ombudsperson PO Box 855 Trenton, NJ, 08625
- NJDOC SID - \*SID1# on the Incarcerated person Telephone System- for incarcerated persons in DOC facilities
- NJDOC SID - 609-826-5617 - for family members or third party on behalf of an incarcerated person
- Incarcerated Person Remedy System form/media Kiosks for incarcerated persons at NJDOC facilities with an electronic communication vendor account
- Confidential SID box at the facilities - incarcerated persons in NJDOC facilities
- Institutional PREA Compliance Manager at your NJDOC facility
- Verbally or in writing to any NJDOC staff member, contractor or volunteer - incarcerated persons and family members or third parties on behalf of an Incarcerated person.

Upon each inmate's arrival at BSP they are issued an Inmate Rules and Regulations Handbook and PREA Handouts that is available in English and Spanish. The PREA Handouts explain how to report incidents of sexual abuse to an outside resource, you may call the following number, Corrections Ombudsman.

The Services Empowering the Rights of has a Memo of Understand with Bayside State Prison to provide confidential crisis counseling to victims suffering from sexual assault. Per an interview with the Representative, they confirmed the agency has a 24-hour service available to the callers who report sexual abuse that will only be shared with the others upon authorization for the release of the information by the victim to include those inmates at BSP.

The NJDOC PREA Handouts provided to the inmate population include family and friends of inmates and the public who have knowledge of sexual abuse allegations within the NJDOC system are encouraged to report allegations to the Institutional PREA Compliance Manager, Facility Administration, Corrections Ombudsman, or Special Investigation Division.

PREA Handouts states: Third parties (including fellow inmates, staff members, family members, attorneys, and outside advocates) shall be permitted to assist inmates in filing grievances related to allegations of sexual abuse and shall also be permitted to file such grievances on behalf of the inmates.



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|  | <p>Staff including agency, contractors and volunteers according to policy will report it immediately to their supervisors, PREA Compliance Manager, NJDOC PREA Coordinator, or SID.</p> <p>Third party reporting is noted on the agency website New Jersey Department of Corrections, it's available to the public. The PREA Audit Notice was observed posted on bulletin boards in all inmate housing units, to include the food service department, libraries, intake, warehouse, maintenance, program areas, education, medical and mental health, and visitation. Confirmation of the PREA Notice was provided by the walk through of the facility, interviewing staff and inmates.</p> <p>Formal and informal interviews with staff and the inmate population to those with low vision, hearing disability, cognitive disability, physical disability and LEP, confirmed their awareness, knowledge, and understanding of the information provided that allow them to report sexual abuse and/or sexual harassment by a third-party.</p> <p>The auditor did not receive any written correspondence from the BSP inmate population nor staff requesting to participate in the interview process during the site observation.</p> <p>Per an interview with BSP mailroom staff, the inmates' outgoing mail is not screened by staff. Therefore, inmates may submit written correspondence for third party reporting to family, friends, the Corrections Ombudsman, the auditor and others as an option. Mailboxes were observed in all housing units for the placement of outgoing mail. Mailboxes identified for the deposit of grievances or ombudsman were also observed in the housing units, or outside accessible to the inmates.</p> <p>The review of the investigative case files confirmed three (3) inmates elected to report sexual abuse via dialing Corrections Ombudsman external reporting.</p> <p>The auditor interviewed the following individuals to determine compliance:</p> <ul style="list-style-type: none"> <li>• Random &amp; Targeted Inmates</li> <li>• NJDOC PREA Coordinator</li> <li>• Random &amp; Targeted Staff</li> <li>• Corrections Ombudsman</li> <li>• SERV Representative</li> <li>• Mailroom Supervisor</li> <li>• SID Investigator</li> </ul> <p>Based on the review of agency policies, site observation, interviews, testing of available third-party reporting procedures, the facility does meet compliance.</p> |
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| <b>115.61</b> | <b>Staff and agency reporting duties</b>             |
|               | <b>Auditor Overall Determination:</b> Meets Standard |

## Auditor Discussion

The auditor reviewed the following policies to determine policies:

- PCS.001.008 Prevention, Detection and Response of Sexual Abuse and Harassment
- IMM.001.PSA.001 Zero Tolerance of Sexual Assault

115.61(a) NJDOC PCS.001.008(page 44) states: The agency shall require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency; retaliation against inmates or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.

NJDOC requires all staff to immediately report any knowledge, suspicion or information regarding incarcerated person sexual abuse, sexual harassment, retaliation against an incarcerated person or staff for reporting or cooperating with a PREA investigation, or any staff neglect or violation of responsibilities that contributed to an incident of sexual abuse or harassment or retaliation.

NJDOC staff, contractors and volunteers are able to privately report an allegation to a Shift Commander, the SID confidential tip line at 609-530-2500 or to the IPCM without fear of retaliation.

All NJDOC employees, volunteers and contractors receive training at least bi-annually on their duties and responsibilities under the Department's zero-tolerance policy. Training documentation that staff receive is maintained by the Correctional Staff Training Academy. Employees, contractors and volunteers are informed of their requirement to immediately report any occurrence, incident or allegation of sexual abuse and sexual harassment to the IPCM, custody staff, shift supervisor, or SID.

This duty to report encompasses specific knowledge, credible information or even reasonable suspicion regarding an allegation of sexual abuse or harassment, as well as any acts or threats of retaliation against an incarcerated person or staff member who reported such an allegation.

Interviews with randomly selected security, and non-security staff indicated they were aware of their responsibility and duty to immediately report all PREA allegations. Staff stated they would immediately report to the Shift Commander, the SID Investigators, and /or the Facility Administration, NJDOC PREA Coordinator, by phone or during an in-person conversation and would submit a written report of the information shared.

115.61(b) NJDOC PCS.001.008(pages 44 and 45) states: Apart from reporting to designated supervisors or officials, staff shall not reveal any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions.

It is the expectation that all NJDOC staff, volunteers and contractors shall not reveal any information related to a sexual abuse or harassment report. Professional behavior shall be maintained when interacting with an alleged victim of sexual abuse or sexual harassment and display sensitivity to the potential emotional impact of the situation. Incident-specific information shall be treated as confidential, and disclosure made only to employees who have a "need to know" and to other persons and entities as permitted or required by law.

Interviews with random security, non-security, and specialized staff confirmed their awareness of the extent in which information of sexual abuse and/or sexual harassment would only be shared with authorized staff necessary to make treatment, investigation and other security and management decisions. Staff stated they would only share the information with their direct supervisor, shift commander and investigative staff.

115.61(c) NJDOC PCS.001.008 policy (page 45) states: Unless otherwise precluded by Federal, State, or local law, medical and mental health practitioners shall be required to report sexual abuse pursuant to paragraph (a) of this section and to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services.

Medical and mental health practitioners are required to report sexual abuse and harassment. They are required to inform incarcerated persons at the initiation of services of their duty to report and the limitations of confidentiality. The HIPAA regulations expressly allow medical providers to provide to a facility with lawful custody of an incarcerated person any information necessary for (among other things) "[t]he health and safety of such individual or other incarcerated persons" or "[t]he administration and maintenance of the safety, security, and good order of the correctional institution." 45 C.F.R. § 164.512(k)(5)(i)

Interviews with both medical and mental health staff verified all inmates are required to sign a consent form during the initiation of services upon their arrival and the inmates are reminded during each additional treatment service. Both were aware of their duty to report all information of reported sexual abuse and sexual harassment and was aware that New Jersey is identified as a mandatory reporting state.

115.61(d) NJDOC PCS.001.008 policy (page 45) states: If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, the agency shall report the allegation to the designated State or local services agency under applicable mandatory reporting laws.

NJDOC does not house any incarcerated persons under the age of 18.

Per the NJDOC Statewide PREA Coordinator, and Facility Administrator, the facility does not house youthful offenders under the age of 18, additionally, there were zero reported allegations of sexual abuse involving inmates identified as vulnerable. Therefore, documentation of reports as such were not applicable for review.

115.61(e) NJDOC PCS.001.008 policy (page 45) states: The facility shall report all

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|  | <p>allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators.</p> <p>Non-Custody staff members, contractors and volunteers responding to a report of incarcerated person sexual abuse or harassment must contact an appropriate custody staff member to assist with the incident. All reports of allegations of sexual abuse/sexual harassment, including third-party and anonymous reports, are immediately reported to Administration and SID for review, response and investigation. These reports of allegations are expected to be reported immediately, but at all times within 12 hours of receipt of the report. The failure of any NJ DOC staff member, contractor or volunteer to report an allegation of sexual harassment and/or abuse may result in disciplinary action, up to and including removal.</p> <p>The facility reported nine (9) sexual abuse and one (1) sexual harassment allegations. Documentation of the ten (10) completed investigations were submitted for review.</p> <p>The auditor interviewed the following staff members to determine compliance:</p> <ul style="list-style-type: none"> <li>• Institutional PREA Compliance Manager</li> <li>• Medical &amp; Mental Health Administrator</li> <li>• NJDOC State PREA Coordinator</li> <li>• Facility Administrator</li> </ul> <p>Based on the review of agency policies, investigative casefiles, interviews and analysis, the facility has demonstrated compliance with all the provisions of this standard.</p> |
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| <b>115.62</b> | <b>Agency protection duties</b>   |
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|               | <p><b>Auditor Overall Determination:</b> Meets Standard</p>   |
|               | <p><b>Auditor Discussion</b></p> <p>The auditor reviewed the following policies and documentation to determine compliance:</p> <ul style="list-style-type: none"> <li>• PCS.001.008 Prevention, Detection and Response of Sexual Abuse and Harassment</li> <li>• IMM.001.PSA.001 Zero Tolerance of Prison Sexual Assault</li> <li>• ADM.019.003.TAH Temporary Administrative Housing</li> <li>• ADM.019.003.IHU Internal Management Procedure</li> <li>• ADM.019.003 Close Custody Units</li> </ul> <p>115.62(a) NJDOC PCS.001.008 policy (page 46) states: When the NJDOC learns that an incarcerated person is subject to a substantial risk of imminent sexual abuse, it shall take immediate action to protect the incarcerated person through multiple</p> |

protection methods. Methods include, but are not limited to, housing changes or transfers for alleged incarcerated person abusers, fixed video surveillance, body-worm cameras with audio recording, and/or removal of alleged staff abusers from contact with victims. Furthermore, the NJDOC will fully investigate and aggressively prosecute those who are involved in such conduct if, in fact, a crime has been committed.

Whenever NJDOC receives an allegation that a staff member(s) has engaged in sexual abuse or sexual harassment, the IPCM and Administrator or Administrator designee shall confer to determine whether the staff should be removed from positions of incarcerated person contact until an investigation is concluded. The IPCM shall forward the temporary reassignment notification via email to the Agency PREA Coordinator.

When necessary, and if all other available means of separation have been exhausted, including moving the victim to another General-Population housing unit, non-punitive temporary removal from the general population may be used. Any temporary removal from the general population is subject to the conditions of PREA Standard 115.43 Protective Custody.

An interview with the Agency Head Designee indicated NJDOC has an immediate response system in place as sexual safety is taken seriously by the agency. The first step would be to separate the at-risk individual from the potential risk and protect them from harm, by housing changes or transfers for alleged incarcerated person abusers.

An interview with the Facility Administrator indicated that the circumstances where the facility learns that an inmate is subject to a substantial risk of imminent sexual abuse, methods to ensure safety, the victim would be relocated to another housing unit where they may feel more comfortable. Inmates are not allowed to enter any housing unit that they are not assigned. An inmate identified as a threat would be placed in involuntary segregation pending disciplinary sanctions.

The auditor utilized a variety of scenarios during interviews with 24 random security and non-security staff. All staff indicated they would remove the inmate from the area of threat, secure and/or maintain a visual of the inmate while notifying the Shift Commander.

The PAQ indicated in the past 12 months, the number of times the agency or facility determined that an inmate was subject to a substantial risk of imminent sexual abuse as zero.

Finally, this auditor interviewed 46 randomly and Targeted selected inmates. All inmates indicated they felt safe at BSP due to staff responses.

The auditor interviewed the following individuals to determine compliance:

- Agency Head
- Random Staff

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|  | <ul style="list-style-type: none"> <li>• Facility Administrator</li> <li>• Random &amp; Targeted Inmates</li> </ul> <p>Based on the review of agency policies, interviews and analysis, the facility has demonstrated compliance with this standard.</p> |
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| <b>115.63</b> | <b>Reporting to other confinement facilities</b>   |
|               | <b>Auditor Overall Determination:</b> Meets Standard   |
|               | <b>Auditor Discussion</b>  |
|               | <p>The auditor reviewed the following policies to determine compliance:</p> <ul style="list-style-type: none"> <li>• PCS.001.008 Prevention, Detection and Response of Sexual Abuse and Harassment</li> <li>• IMM.001.004 Zero Tolerance of Prison Sexual Abuse and Sexual Harassment</li> <li>• Bayside State Prison PREA Audit Questionnaire (PAQ)</li> </ul> <p>115.63(a)(b)(c) NJDOC PCS.001.008 policy (page 46) states: The IPCM at each state facility takes the lead after receiving reports that an incarcerated person was sexually abused while incarcerated at another facility within NJDOC, or during incarceration at a facility outside of the Department's purview. It is the responsibility of the IPCM to advise the facility administrator. The facility administrator must notify the head of the facility where the alleged abuse occurred no later than 72 hours after receiving the allegation.</p> <p>Each facility maintains documentation of all such notifications and related communication. This information is also placed in Folder 115.63 on the DOCNet I-Drive.</p> <p>115.63(d) NJDOC PCS.001.008 policy (page 46) states: The facility Administration receiving such notification shall ensure that the allegation is investigated. They shall also provide periodic updates and a copy of the investigative outcome report to the notifying institution which currently houses the alleged incarcerated person victim.</p> <p>Per an interview with the Facility Administrator, upon an inmate reporting sexual abuse or sexual harassment regardless of where or when it was reported to have occurred, an investigation would be conducted. During the audit period, there were no applicable cases requiring BSP staff to initiate a 72- hour response. Interviews with the Facility Administrator and IPCM confirm their understanding of the notification and documentation requirements of this standard.</p> <p>The auditor interviewed the following staff members to determine compliance:</p> |

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|  | <ul style="list-style-type: none"> <li>• Facility Administrator</li> <li>• Institutional PREA Compliance Manager / Assistant Superintendent</li> </ul> <p>Based on the review of agency policies, documentation of notification and review of investigative case file, in addition to staff interviews, the facility does meet compliance of the standard.</p> |
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| <b>115.64</b> | <b>Staff first responder duties</b>  |
|               | <p><b>Auditor Overall Determination:</b> Meets Standard</p>  |
|               | <p><b>Auditor Discussion</b></p> <p>The auditor reviewed the following policies and documentation to determine compliance:</p> <ul style="list-style-type: none"> <li>• PCS.001.008 Prevention, Detection and Response of Sexual Abuse and Harassment</li> <li>• IMM.001.004 Zero Tolerance of Prison Sexual Abuse and Sexual Harassment</li> <li>• Internal Management Procedure Investigation Procedure</li> <li>• CUS.001.CSM.01 Crime Scene Management</li> <li>• Bayside PREA Audit Questionnaire (PAQ)</li> </ul> <p>115.64(a) NJDOC PCS.001.008 policy (page 48) states: Upon initial receipt of a report or allegation of sexual abuse or sexual harassment, first responding Custody staff members must take the following steps:</p> <ul style="list-style-type: none"> <li>• Immediately notify their supervisor;</li> <li>• Separate the alleged victim and abuser;</li> <li>• Preserve and protect the crime scene (if applicable) until SID arrives; and</li> <li>• Request that the victim not take any action that could destroy evidence.</li> <li>• Ensure that the victim receives prompt medical and psychological assistance from the appropriate healthcare providers.</li> </ul> <p>In cases of sexual abuse, if the alleged sexual abuse occurred within a time period that still allows for the collection of physical evidence, staff must request that the victim not take any actions that could destroy evidence, including washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating. Additionally, if the alleged sexual abuse occurred within a time period that still allows for the collection of physical evidence, staff must establish, preserve and protect the crime scene until appropriate steps can be taken to collect evidence. Responsive staff needs to take reasonable measures to identify, isolate and separate witnesses.</p> |

In addition to SID investigative protocols, all custody staff members shall receive formal training regarding evidence collection and preservation, and specific training on identifying and handling evidence subsequent to a sexual assault. This training is provided to them as part of the mandated annual PREA training.

Staff shall not reveal any information related to a sexual abuse or sexual abuse report to anyone other than those necessary for investigative, treatment, and security/management procedures. Any emergency situation, or when events occur that are not specifically covered in any policy or procedure, staff must act in a professional manner, exercise good, sound judgment, and rely on their training and experience at all times.

115.64(b) NJDOC PCS.001.008 policy (page 48) states: When the initial responder is not a custody staff member, the responder is instructed to request that the victim not take any action that could destroy potential physical evidence. They are also instructed to immediately notify custody staff of the situation. Staff shall not reveal any information related to a sexual abuse or sexual harassment report to anyone other than those necessary for investigative, treatment, and security/management procedures.

The PAQ noted in the past 12 months, the number of allegations that an inmate was sexually abused as nine (9). The PAQ noted of these allegations of sexual abuse in the past 12 months, the number of times the first security staff member to respond to the report separated the alleged victim and abuser as one (1). BSP had only one case, when security staff member to respond to the report separated the alleged victim and abuser. The review confirmed eight (8) cases that the victim and aggressor had self-separated prior to reporting the allegations and did not require immediate separation by staff. However, an interview with a staff member who served as the first responder indicated the victim and aggressor were separated when they became aware of the allegation as the allegation had previously occurred the prior day and there was no evidence identified for collection.

The PAQ noted number of allegations where staff were notified within a time that allowed for the collection of physical evidence as one (1). This should be changed to zero, because it didn't happen during the audit cycle.

Interviews with two (2) inmates who reported sexual abuse stated staff responded immediately upon reporting. Both reported the incidents to staff. Each stated they were previously self-separated from the alleged aggressor when staff responded.

Upon reporting and/or receiving the allegation of sexual abuse, each victim stated staff responded immediately and they remained separated from the aggressor, interviewed by SID investigators and were assessed by medical staff. Each stated there was no physical evidence for collection.

The PAQ indicated of the allegations that an inmate was sexually abused made in the past 12 months, the number of times a non-security staff member was the first responder as zero (0).



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|  | <p>The PAQ noted of those allegations responded to first by a non-security staff member, the number of times that staff member requested that the alleged victim not take any actions that could destroy physical evidence as zero and of those allegations responded to first by a non-security staff member, the number of times that staff member notified security staff as zero.</p> <p>Interview with random staff indicated all were aware of their responsibilities as a first responder. Staff stated they would immediately separate the victim and aggressor, advise the victim not to wash their hands, shower, brush teeth, change clothes, urinate, defecate, drink or eat. The Shift Commander would immediately be notified. Staff reference the PREA Actions Steps card in their possession during the interview.</p> <p>Finally, this auditor also requested, received, and viewed the training files of the 23 randomly selected interviewed staff to verify up-to-date annual PREA training. Bayside State Prison Institutional PREA Compliance Manager/Assistant Superintendent printed showed the electronic training tracking spreadsheet, which included the staff's name, name of the training course, the training type, and the date of training completion. The training tracking spreadsheet showed each staff's training verification of attending. This auditor reviewed the PREA Staff Training Lesson Plan, and basic course and annual refresher training curriculum used to train employees, contractors, and volunteers. The curriculum and lesson plans for training covered the components identified in PREA Standard 115.31 and 115.32.</p> <p>While on site, this auditor interviewed randomly selected inmates. Each inmate shared that they felt comfortable informing staff of any PREA-related incident. Each interviewed inmate also shared that staff protects vulnerable inmates, and they immediately respond to any reports of inmate risk of sexual abuse or sexual harassment.</p> <p>The auditor interviewed the following individuals to determine compliance:</p> <ul style="list-style-type: none"> <li>• SID Investigator</li> <li>• Random Inmates</li> <li>• Inmates who reported sexual abuse</li> <li>• Random &amp; Specialized Staff first Responders</li> <li>• Volunteer &amp; Contractors Non- first Responders</li> </ul> <p>Based on the review of agency policies, review of sexual abuse investigations, medical documentation, PREA Response Card, PREA investigative casefiles, and interviews with security first responder, non-security first responder staff, random staff and the inmate population, BSP does meet all provisions of the standard.</p> |
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| <b>115.65</b> | <b>Coordinated response</b>                          |
|               | <b>Auditor Overall Determination:</b> Meets Standard |
|               | <b>Auditor Discussion</b>                            |

The auditor reviewed the following policies to determine compliance:

- PCS.001.008 Prevention, Detection and Response of Sexual Abuse and Harassment
- IMM.001.004 Zero Tolerance Policy: Prison Sexual Abuse or Sexual Harassment
- Med.MHS.002.010 Counseling Services for Victims of Sexual Assault
- Internal Management Procedure #035 Investigation Procedures
- Internal Management Procedure Med.MLI.007 Sexual Assault
- MED.MHS.002.001 Emergency Mental Health Services
- CUS.001.CSM.01 Crime Scene Management
- Med.MLI.005 Forensic Specimen Collection
- BSP PREA Audit Questionnaire (PAQ)

115.65(a) NJDOC PCS.001.008(pages 48 and 49) states: NJDOC recognizes that it is crucial to develop and foster a strong level of coordination between the facility's administration, custody staff and SID to ensure the appropriate response to a sexual abuse allegation and has required each facility to develop a written plan in a Level III policy.

Any incarcerated person that claims they are the victim of sexual abuse will be protected from any further potential threat and they are also provided any immediate medical attention needed. First responders to an incident do not conduct any part of the investigation and – as detailed above for Standard 115.64 - their role is to protect the victim, separate the victim and alleged abuser and to protect and preserve the scene and any evidence that may exist at the scene or on the involved parties.

Once an allegation has been received and proper responsive and investigative staff notified, SID will immediately initiate an investigation, and the following protocols will be followed:

- Victim protected/escorted to infirmary.
- Suspect (if known) is separated.
- Any known witnesses identified and separated.
- Crime scene (if known/applicable) secured.
- Notify the facility Administrator
- If information indicates a sexual assault may have occurred, SID will contact the appropriate county prosecutor's office for a determination if a Sex Crimes Kit/Sexual Assault Nurse Exam is warranted; and
- SANE/SAFE medical personnel will be activated by Prosecutors' Office.

The respective county Prosecutor's office will also advise if they will be actively or passively involved, where applicable.

This auditor reviewed "NJDOC's Policy PCS.001.008" and has concluded that it has the necessary language to align with PREA Standard 115.65.

While on site, this auditor also interviewed 23 randomly selected specialized staff, contractors, and security staff. This auditor shared a scenario of a sexual assault

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|  | <p>occurring in a cell or shower area and the victim immediately runs out and reports the assault to the interviewed staff. There were 23 out of 23 of the interviewed staff, contractors, and volunteers who knew their first responder duties according to their role. There were consistencies in their responses from separating and calling for assistance to crime scene preservation and suggesting/requesting inmates not to change clothing, use the toilet, or shower. Furthermore, this auditor asked each interviewed specialized staff (medical, mental health, facility supervisory, PREA Compliance Manager, etc.) their coordinated responsibilities if an inmate is sexually abused while they are on duty (not the 1st Responder). Each member of staff knew their coordinated responsibilities.</p> <p>Finally, while on site, this auditor interviewed 3 Special Investigations Division (SID) investigators. Each knew their coordinated response once a report is assigned to them as the primary investigator.</p> <p>This auditor reviewed NJDOC's "Internal Management Procedure #ADM.SID.035 Policy (page 3). An excerpt states, "Investigations may be initiated through referrals from the Commissioner or other executive staff, as well as from other law enforcement agencies, in addition to being initiated by the Special Investigations Division upon receipt of information that a violation may have occurred."</p> <p>The auditor interviewed the following staff members to determine compliance:</p> <ul style="list-style-type: none"> <li>• Institutional PREA Compliance Manager / Assistant Superintendent</li> <li>• Special Investigations Division (SID) Investigators</li> <li>• Volunteers &amp; Contractors</li> <li>• Random &amp; Targeted Staff</li> <li>• Facility Administrator</li> </ul> <p>Based on a review of the facility policy, site observation, interview and analysis, the facility has demonstrated compliance with this standard.</p> |
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| <b>115.66</b> | <b>Preservation of ability to protect inmates from contact with abusers</b>  |
|               | <b>Auditor Overall Determination:</b> Meets Standard   |
|               | <b>Auditor Discussion</b>  |
|               | <p>The auditor reviewed the following policies and union contracts to determine compliance:</p> <ul style="list-style-type: none"> <li>• IMM.001.PSA.001 Zero Tolerance of Prison Sexual Assault: Internal Management Procedure</li> <li>• PCS.001.008 Prevention, Detection and Response of Sexual Abuse and</li> </ul> |

Harassment

- Bayside State Prison PREA Audit Questionnaire (PAQ)

115.66(a) NJDOC PCS.001.008(page 49) states: The Collective Bargaining Agreements between NJDOC and eight (8) different employee unions are all written so as not to limit the Department's ability to remove alleged staff sexual abusers from contact with any incarcerated persons. This is a prerequisite in all contractual negotiations for the Department.

This auditor reviewed "NJDOC's Policy PCS.001.008" and has concluded that it has the necessary language to align with PREA Standard 115.66. NJDOC has another policy to keep victims separate from alleged staff abusers IMM.001.PSA.001.

IMM.001.PSA.001(page 3) It states: It is the policy of the New Jersey Department of Corrections to maintain a zero tolerance toward all forms of sexual abuse and sexual harassment, and actively enforce all internal policies and procedures related to the prevention, detection, and response to such conduct. When the NJDOC learns that an inmate is subject to a substantial risk of imminent sexual abuse, it shall take immediate action to protect the inmate. The NJDOC is committed to ensuring the protection of victims of sexual assault, and will employ multiple measures including but not limited to housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or harassment or for cooperating with investigations in order to fulfill this commitment. Furthermore, the NJDOC will fully investigate and aggressively prosecute those who are involved in such conduct if, in fact, a crime has been committed. Any staff who is terminated for a violation of the zero-tolerance prison sexual assault policy shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies.

Policy IMM.001.PSA.001 supports the removal of staff alleged to have committed sexual abuse pending the outcome of the investigative process. Corrective bargaining Agreements between the NJ DOC and at least eight employee unions were reviewed. The agreements do not limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted.

This PREA Auditor interviewed the Facility Administrator, NJDOC State PREA Coordinator, and one of NJDOC's Police Benevolent Association (PBA) representatives. He shared that officers are separated from their post and inmate pending the outcome of an investigation. NJDOC maintains a protocol that requires the facility head to request and receive approval from the Director before reassignment is completed. The BSP Administrator and the IPCM certified that neither the agency nor any other governmental entity responsible for collective bargaining on the agency's behalf shall enter into or renew any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a

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|  | <p>determination of whether and to what extent discipline is warranted.</p> <p>This auditor reviewed the “New Jersey State Policemen’s Benevolent Association Local No. 105” agreement (page4; section C), which states such reassignment or transfer possibilities in the language.</p> <p>The auditor interviewed the following staff members to determine compliance:</p> <ul style="list-style-type: none"> <li>• Institutional PREA Compliance Manager / Assistant Superintendent</li> <li>• Both Regional PREA Coordinators</li> <li>• NJDOC State PREA Coordinator</li> <li>• PBA Union Representative</li> <li>• Facility Administrator</li> </ul> <p>Based on the review of Union Contracts, Staff interviews, and review of policies. This PREA auditor concludes that BSP is in compliance with PREA Standard 115.66.</p> |
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| 115.67 | Agency protection against retaliation  |
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|        | <p><b>Auditor Overall Determination:</b> Meets Standard</p>  |
|        | <p><b>Auditor Discussion</b></p> <p>The auditor reviewed the following policies and documentation to determine compliance:</p> <ul style="list-style-type: none"> <li>• PCS.001.008 Prevention, Detection and Response of Sexual Abuse and Harassment</li> <li>• IMM.001.004 Zero Tolerance Policy: Prison Sexual Abuse and Harassment</li> <li>• PREA Investigative files / Monitoring Forms</li> </ul> <p>115.67(a) NJDOC PCS.001.008(page 49) it states: NJDOC protects all incarcerated persons and staff from retaliation for reporting sexual abuse, sexual harassment or for cooperating with investigations. The IPCM is responsible for monitoring retaliation of all PREA allegations. If an individual who cooperates with an investigation expresses a fear of retaliation, or there is a suggestion of possible retaliation, any evidence of possible retaliation must be referred to SID for investigation and the IPCM notifies the Agency PREA Coordinator or designee. The IPCM at the institution where the incarcerated person resides shall monitor incarcerated person disciplinary reports, housing or program changes, staff and incarcerated person performance reviews and reassignments for staff to determine if there is any suggestion of possible retaliation. Anyone who does retaliate against a staff member or an incarcerated person who has reported an allegation of sexual abuse or sexual harassment in good faith shall be subject to disciplinary action.</p> <p>IPCM is appointed to monitor staff and inmates for protection from retaliation at this</p> |

facility. During the on-site audit, ten (10) files were examined to determine if retaliation monitoring was documented. All files showed face to face meetings.

115.67(b) NJDOC PCS.001.008(page 50) it states: The NJDOC employs multiple protection measures against potential retaliation. Protection measures are utilized on an individualized basis. They include but are not limited to: housing changes or transfers for incarcerated person abusers, fixed video surveillance, body-worn cameras with audio recording, removal of alleged staff or incarcerated person abusers from contact with victims, and emotional support services for incarcerated persons or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations.

Interviews with two (2) inmates who reported sexual abuse indicated they were contacted by the Institutional PREA Compliance Manager / Assistant Facility Administrator who communicated with them each month for a minimum of three (3) months following the report of sexual abuse. Each stated they felt safe from inmate population after reporting the allegation.

115.67(c) NJDOC PCS.001.008(page 50) it states: For at least 90 days following a report of sexual abuse, the agency shall monitor the conduct and treatment of inmates or staff who reported the sexual abuse and of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff, and shall act promptly to remedy any such retaliation. Items the agency should monitor include any inmate disciplinary reports, housing, or program changes, or negative performance reviews or reassignments of staff. The agency shall continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need.

Per an interview with the IPCM and Facility Administrator, retaliation toward staff and/or inmates is prohibited and an investigation would be initiated for all individuals suspected of performing acts of retaliation. Measures taken to protect inmates include staff assigned to conduct retaliation monitoring conducting individual meetings with the victim and/or individual who cooperated with the investigation at a minimum of 30 days, 60 days and 90 days intervals. The Institutional PREA Compliance Manager / Assistant Superintendent assigned to conduct retaliation monitoring for both staff and the inmate population. Inmates would be monitored for unjustifiable work assignment change, increased in disciplinary sanctions, sudden increase in grievance filed, while ensuring the inmate is not being harassed by other inmates and/or staff.

115.67(c) NJDOC PCS.001.008(page 50) it states: The IPCM conducts retaliation monitoring on the victim of the allegation and the incarcerated person or staff member who reported the incident. This does not include a staff member who is relaying a report from an incarcerated person, but it does include third party reporting for an incarcerated person or a staff member who directly observes and reports the incident.

For at least 90 days following report of sexual abuse or sexual harassment allegation, the IPCM will monitor the conduct and treatment of the reporting incarcerated person

or staff by way of periodic status checks. The IPCM will use the NJDOC PREA Retaliation Monitoring Form (FORM-PREA.AC Retaliation). The IPCM will provide a copy of this form to the incarcerated person and request the incarcerated person sign it. A copy of the signed form, or documented refusal to sign, will be maintained by the IPCM and placed in Folder 115.67 on the DOCNet I-Drive.

Retaliation monitoring shall be an ongoing process for 90 days post allegation. NJDOC requires at least 2 face to face meetings and 2 paper reviews to be conducted within those 90 days. These must be done on separate instances, with one face to face and one paper review being in the first 45 days and one face to face and one paper review in the second 45 days. All four reviews must be conducted for each individual.

- Paper reviews include reviewing of disciplinary reports, program changes, housing changes, performance evaluations, staff reassignments and JPay inquiries/grievances.
- Each face-to-face meeting must have signature of staff or incarcerated person located on the 2nd page. Refusal of incarcerated persons to sign the form will be documented. IPCM signature is required at the end of the 90 days.
- If retaliation is found and cannot be corrected within the 90 days, continued monitoring is expected in 30-day intervals until the retaliation is addressed and resolved.

To assist IPCMs in tracking PREA incidents and related retaliation monitoring, the PREA Management Application (PMA) E-Management system automatically generates PREA related e-mails, including New Incident Alert e-mails flagging the initiation of a PREA allegation and 45 Day and 90 Day Reminder Alerts that are automatically generated within the time frame of the established retaliation monitoring period.

Recipients of the New Incident Alert PMA emails are: Agency Wide PREA Coordinator, the respective IPCM, COHQ PREA Compliance Unit staff, SID and healthcare staff of the respective facility. Recipients of the 45 Day and 90 Day Reminder alerts are: Agency PREA Coordinator, the respective IPCM and SID. Alerts containing a list of all new PREA incidents for the preceding week by facility are automatically sent once weekly. Recipients are: NJDOC Agency Wide PREA Coordinator, the respective IPCM and SID.

115.67(e) NJDOC PCS.001.008(page 51) it states: Any individual who cooperates with the investigation (including witnesses, perpetrators, staff, etc.) has the ability to express their concerns of retaliation, and will be monitored for their potential retaliation using the same procedure noted above.

Per the Agency Head Designee, retaliation for cooperation is not tolerated in NJDOC, If the individual is an offender they would be granted a housing change, or protective custody status until the aggressor was removed from the compound, and the retaliation could be addressed. If the individual is a staff member, steps are instituted to ensure that retaliation is recognized and addressed appropriately such as termination of an aggressor, staff transfer of retaliator, or re-assignment of retaliator.

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|  | <p>An interview with the IPCM and Facility Administrator confirmed The IPCM at the institution where the inmate resides shall monitor inmate disciplinary reports, performance reviews and reassignments for staff to determine if there is any suggestion of possible retaliation. If there is a suggestion of possible retaliation, any evidence of possible retaliation must be referred to the SID for investigation and the agency wide PREA Coordinator must be advised of same. The IPCM shall continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need.</p> <p>115.67(f) NJDOC PCS.001.008(page 51) it states: Retaliation monitoring can cease when an investigation deems the allegation as unfounded. However, if a staff person or incarcerated person expresses fear of retaliation they must be monitored, even if the allegation was unfounded.</p> <p>The auditor interviewed the following individuals to determine compliance:</p> <ul style="list-style-type: none"> <li>• Institutional PREA Compliance Manager (IPCM) / Assistant Superintendent</li> <li>• Commissioner of Corrections / Agency Head</li> <li>• Inmates that reported abuse</li> </ul> <p>Based on the review of the agency's policy, completed retaliation monitoring, and interviews with staff who conduct retaliation monitoring and inmates who reported sexual abuse, the facility does meet compliance with all standard provisions.</p> |
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| <b>115.68</b> | <b>Post-allegation protective custody</b>   |
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|               | <p><b>Auditor Overall Determination:</b> Meets Standard</p>   |
|               | <p><b>Auditor Discussion</b></p>  |
|               | <p>The auditor reviewed the following policies to determine compliance:</p> <ul style="list-style-type: none"> <li>• PCS.001.008 Prevention, Detection and Response of Sexual Abuse and Harassment</li> <li>• ADM.019.003 TAH Temporary Administrative Housing</li> <li>• ADM.019.003.PCS Protective Custody Status</li> <li>• ADM.019.003.IHU Investigative Housing Unit</li> <li>• ADM.019. 003.VH Vulnerable Housing Unit</li> <li>• ADM.019.003 Close Custody Units</li> <li>• BSP PAQ</li> </ul> <p>115.68(a) NJDOC PCS.001.008(page 52) states: Any use of Close Custody Unit to protect an incarcerated person who is alleged to have suffered sexual abuse is subject to the conditions of PREA Standard 115.43 Protective Custody.</p> |



No incarcerated person who is alleged to have suffered sexual abuse or sexual harassment shall be placed in Close Custody Unit housing (Temporary Administrative Housing, Prehearing Protective Custody or Involuntary Protective Custody) based solely on PREA Risk unless all available alternatives have been reviewed, documented and there is no available alternate means of separating the incarcerated person from potential abusers.

If an incarcerated person is placed in Close Custody Unit housing, the placement must be reviewed and documented in writing as to the reasons why by the Administrator, Institutional PREA Compliance Manager or the facility designee within 24 hours of placement.

The PAQ identified the number of inmates who alleged to have suffered sexual abuse who were held in involuntary segregated housing in the past 12 months for one to 24 hours awaiting completion of assessment was zero.

Per the PAQ, the number of inmates who alleged to have suffered sexual abuse who were assigned to involuntary segregated housing in the past 12 months for longer than 30 days while awaiting alternative placement was identified as zero. The PAQ also noted a review of case files of inmates who alleged to have suffered sexual abuse who were held in involuntary segregated housing in the past 12 months as zero.

Additionally, the number of case files that include a statement of the basis for facility's concern for the inmate's safety, and the reason or reasons why alternative means of separation could not be arranged is noted as zero.

The PAQ identified the number of inmates who alleged to have suffered sexual abuse who were assigned to involuntary segregated housing in the past 12 months for longer than 30 days while awaiting alternative placement was zero.

Further, The IPCM confirmed evidence submitted in OAS PAQ 115.68 (a)-2. The number of inmates who allege to have suffered sexual abuse who were held in involuntary segregated housing in the past 12 months for one to 24 hours awaiting completion of assessment was zero. During the facility tour, which included segregation, this Auditor noted zero inmates placed in segregation who alleged to have suffered sexual abuse. During an informal tour of segregation, zero inmates made a quest to speak with the Auditor.

Per an interview with the Facility Administrator, the agency and facility policies prohibit placing inmates at high risk of sexual victimization or have alleged sexual abuse in involuntary housing without consideration of alternate available housing that could provide separation from an identified possible threat. Alternative housing is available through various housing assignments within the facility that meets the need of separation as applicable. If an inmate's personal safety is in danger, they would only be placed in protective custody and upon identifying the aggressor, the aggressor would be placed in involuntary segregation pending an investigation and applicable discipline.

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|  | <p>Per an interview with staff who supervise segregation, indicated inmates who report sexual abuse and/or those inmates who are at a high risk of being sexual abused are never placed in segregation. However, all inmates in segregation are allowed access to educational material, chaplain services, legal and leisure library material, visitation, legal aid to include attorney accessibility, showers, meals, personal grooming, recreation, mail services, and limited telephone access. Confirmation of the services provided was supported through documentation review of Record of Staff Visits to Restricted Units, and Segregation Unit Records.</p> <p>This auditor conducted informal interviews with three (3) inmates, who shared that their housing units contained inmates who are on some form of disciplinary status. BSP Correctional Officers on each post were also informally interviewed. They uniformly stated that those housed in those units were solely due to behavioral issues within the facility.</p> <p>The review of the sexual abuse investigative cases confirmed zero inmates who reported sexual abuse and/or identified at a high risk of being sexual abused were placed in segregation based solely on the standard provision. Therefore, no documentation of segregation housing pursuant to the standard was initiated.</p> <p>The auditor interviewed the following individuals to determine compliance:</p> <ul style="list-style-type: none"> <li>• Institutional PREA Compliance Manager</li> <li>• Inmates placed in Segregated housing</li> <li>• Segregated Housing Supervisors</li> <li>• Facility Administrator</li> </ul> <p>Based on the review of agency policy, PAQ, staff interviews, segregation unit records, and analysis, the facility has demonstrated compliance with this standard.</p> |
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| <b>115.71</b> | <b>Criminal and administrative agency investigations</b>   |
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|               | <b>Auditor Overall Determination:</b> Meets Standard   |
|               | <b>Auditor Discussion</b>  |
|               | <p>115.71(a) NJDOC PCS.001.008(page 52) it states: As detailed within Standard 115.22, NJDOC assigns to the SID the responsibility of investigating violations of the laws of the United States, the State of New Jersey, as well as violations of the New Jersey Administrative Code (10A), New Jersey Criminal Code Title 2C and NJDOC policies and procedures by incarcerated persons, staff, contractors, volunteers, and other individuals who visit NJDOC facilities. Investigations will occur in a prompt, thorough, and objective manner for all allegations, including third-party and anonymous reports.</p> <p>NJDOC SID accepts and investigates all verbal, written, and anonymous reports of sexual abuse, misconduct and harassment. NJDOC staff, contract employees and</p> |

volunteers who witness or receive information concerning alleged sexual assault or harassment between incarcerated persons or incarcerated persons and staff must immediately report all allegations including third party reports, anonymous reports, and prisoner grievances, to custody staff, IPCM, SID or shift supervisor.

All PREA allegations of sexual abuse/sexual harassment are reported to Administration and SID promptly, but at all times within 12 hours of receipt of the report or incident, for review, response and investigation.

The departure of the alleged abuser or victim from NJDOC employment or from an NJDOC facility does not provide a basis for terminating an investigation. Administrative investigations will be completed regardless of the results of any criminal investigations and regardless of the subject's continued employment by NJDOC or residency at an NJDOC facility.

The facility reported seven (9) sexual abuse and one (1) sexual harassment allegations during the 12 -month review period. seven (7) sexual abuse investigations were determined as substantiated. Two (2) sexual abuse investigations were determined Unfounded. One sexual harassment determined unsubstantiated. All cases were investigated administratively and criminally.

SID investigators may conduct administrative investigations within the institution.

When an allegation appears to be criminal in nature, the BSP investigative office, in conjunction with the NJ DOC SID will refer the incident to the County Prosecutor for a criminal investigation if the investigation involves potential criminal conduct. Staff-on-inmate criminal investigations are conducted by the SID.

115.71(b) NJDOC PCS.001.008(page 53) it states: All SID investigators are required to complete the New Jersey Division of Criminal Justice Basic Course for Investigators. The specialized training received by members of the SID shall include techniques for interviewing sexual abuse victims. The training helps to ensure that such investigations are conducted in a prompt, thorough, competent, objective manner and using the most current techniques and equipment possible. NJDOC shall maintain documentation that SID investigators have completed the required specialized training in conducting sexual abuse investigations.

While on site, this auditor interviewed 3 SID PREA Investigators. BSP Institutional PREA Compliance Manager submitted copies of their PREA Investigator's Specialized Training through the National Institute of Corrections (NIC). Each interviewed investigator knew their responsibilities regarding evidence collection, Miranda/Garrity rights, interviewing procedures, retaliation monitoring, and report-writing protocols. Further Interviews with the SID Investigators confirmed each have received specialized training to conduct sexual abuse investigations pursuant to standard 115.34. Special Investigative Division is qualified to conduct criminal investigations as each investigator in the Special Investigations Division undergoes extensive correctional academy training as well as prosecutor/law enforcement academy training to become law enforcement officials and possess arresting authority.

115.71(c) NJDOC PCS.001.008(page 53) states: Investigators shall gather and

preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; shall interview alleged victims, suspected perpetrators, and witnesses; and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator.

Interviews with the SID Investigators identified the applicable following procedures when an investigation is initiated. The SID Investigators are contacted immediately when circumstances may be pursuant to criminal findings. The first step is ensuring staff initiate first responder duties by separating the victim and the aggressor and securing the crime scene area. If applicable the victim would be transported to the outside hospital for a forensic examination and clothing would be collected, with a chain of custody report. Lab work is transported to the crime lab for testing DNA sampling and completion of chain of custody. Review available video of the identified area, also review video to observe if staff's actions and/or failure to follow policy contributed to the assault, review inmate phone records to include those of other inmates, take photographs of affected cell/area and available evidence, photographs of victim and aggressor to include noted injuries, complete recordings of all interviews to include victim, aggressor and witnesses, and note medical evaluations to include forensic examinations results as applicable. All would be included in the investigative report and utilized in the determination of the investigative finding.

A review of investigative files revealed interviews are conducted with the alleged victim, suspected perpetrator and potential witnesses.

The ten (10) investigative case files were reviewed for timeliness, promptness, thoroughness and objectivity of the investigations. The review included nine (9) sexual abuse and one (1) sexual harassment reports that confirmed all investigations were initiated on the day of reported allegation.

The 10 investigations were completed as the following: five (5) investigations were concluded within five (5) days of the reported allegations; Four (4) investigative findings were determined within seven (7) days of being reported; One (1) investigative finding was concluded 22 days after reported.

Per interviews with investigative staff, an inmate's prior reports and complaints of sexual abuse involving the suspected perpetrator would already be known as the facility monitors all inmates identified as having a history as a potential aggressor and/or as an aggressor.

115.71(d) NJDOC PCS.001.008(page 53) states: When a PREA report is received within a NJDOC facility:

- Victims will be separated from alleged perpetrators to ensure safety;
- An investigation will be conducted by SID;
- Evidence will be collected (dependent on the timeframe and circumstances of the complaint); and
- Involved incarcerated persons are referred to medical and/or mental health for an examination and/or evaluation.

Additionally, the County Prosecutor may be contacted for possible criminal investigation and prosecution, if warranted.

During the course of any investigation, SID has the authority to interview any employee of the Department or any incarcerated persons, volunteers or contracted vendors/employees; and to review any records and reports retained by the Department. SID investigations are documented in a confidential written report that describes the physical and testimonial evidence and investigative facts and findings. Administrative investigations are documented in written reports that include a description of the physical and testimonial evidence, and investigative facts and findings.

Based on interviews with SID Investigators, when the quality of evidence appears to support criminal prosecution, the agency conducts compelled interviews only after consulting with the County Prosecutor's office as to whether compelled interviews may be an obstacle for subsequent criminal prosecution.

115.71(e) NJDOC PCS.001.008(pages53 and 54) states: The credibility of an alleged victim, suspect, or witness shall be assessed on an individual basis and shall not be determined by the person's status as inmate or staff. No agency shall require an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such an allegation. SID does not rate the credibility of an alleged victim, suspect, or witness by the person's status as prisoner or staff.

The credibility of a victim, suspect, or witness is assessed on an individual basis and shall not be determined based on the status of a victim or staff member. A credibility determination should place no greater weight on one person over another. Victims, suspects, and witnesses are all equally entitled to give their testimony, and none are rejected as incredible simply based on their status. Credibility is impacted by the evidence itself. It is the evidence that refutes, corroborates, or has no impact upon a person's testimonial evidence. The evidence ultimately determines whether the allegation is unfounded, substantiated, or unsubstantiated.

The SID stated the credibility of an alleged victim, suspect, or witness is not a determining factor of the investigative finding. The investigative findings are based on evidence only and not the status of an individual. BSP investigators do not require alleged victims to submit to a polygraph examination or similar process. The on-site interviews also revealed that the credibility of an alleged victim, suspect, or witness is assessed on an individual basis and not determined by the person's status.

Interviews with two (2) inmates who reported sexual abuse indicated neither were asked to submit to a polygraph or other truth telling devices upon reporting the allegation.

The review of the 10 PREA investigative case files supported there was no indication that an alleged victim was requested to participate in polygraphy or another truth telling device. Interviews with two (2) inmates who reported an allegation of sexual abuse acknowledged they were not requested to submit to a polygraph or other truth

telling device.

115.71(f) NJDOC PCS.001.008(page 54) states: Administrative investigations: (1) Shall include an effort to determine whether staff actions or failures to act contributed to the abuse; and (2) Shall be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings.

All administrative investigations were documented in written reports which included a description of the physical and testimonial evidence, the assessments, and investigative facts and findings. BSP's investigative office retains all written reports.

Interviews with SID Investigators indicated when it is determined that staff actions or failure to act facilitated the abuse, the identified policy violations would be documented in a separate report and forwarded to the Facility Administrator. There were zero investigative findings that revealed staff actions and/or failure to perform duties in accordance with agency policy contributed to the sexual abuse and/or sexual harassment.

Documentation of PREA case files, medical, mental health and inmate risk screening is stored electronically. Accessibility is given to authorized staff only within the specific department upon approval and the issuing of credentials for login accessibility. Hard copies of inmate medical and mental health records are maintained in the medical records office accessible to medical and mental health staff only. Inmate records are stored in secured cabinets in the records office that is manned by assigned staff and in the Assistant Facility Administrator's office. Hard copies of PREA file cases are stored in secured file cabinets within the investigator's office accessible only to the SID Investigators.

115.71(g) NJDOC PCS.001.008(page 54) states: Administrative and criminal investigations are documented in a written report. All investigations contain a thorough description of the physical and testimonial evidence. Administrative investigations document if any staff actions or failures to act, or policy flaws, contributed to the abuse, and includes the reasoning behind credibility assessments, and investigative facts and findings. This information is considered for potential corrective action as required in 115.88.

The review of the investigative case files confirmed the facility reported seven (7) unsubstantiated and two (2) sexual abuse investigative findings throughout the review period. The investigative report documented testimonial evidence and a thorough description of the collected physical evidence as applicable per the investigative reports.

Interviews with the SID Investigators indicated the criminal investigations include all information gathered of the allegation occurrence to include the description of all physical evidence, documentary evidence, statements and interviews with the victim, aggressor, witness, to include photos, phone records, written correspondence, and applicable medical results such as forensic results, that support criminal charges.

Interviews revealed the departure of perpetrators or victims from employment or confinement at the facility does not provide a basis for terminating the investigation.

115.71(h) NJDOC PCS.001.008(page 54) states: substantiated cases that appear to be criminal are referred for prosecution, at all times adhering to the Victims' Rights Crime Bill, to the county in which the incident occurred, or to an appropriate law enforcement agency.

Per the PAQ, the number of substantiated allegations of conduct that appear to be criminal that were referred to for prosecution since the last PREA audit was zero.

Per interview with SID Investigators, the County Prosecutor's Office is consulted during every step of the criminal investigation.

115.71(i) NJDOC PCS.001.008(page 54) states: The agency shall retain all written reports referenced in paragraphs (f) and (g) of this section for as long as the alleged abuser is incarcerated or employed by the agency, plus five years.

115.71(j) NJDOC PCS.001.008(page 54) states: Hard copy and electronic reports are retained indefinitely. The departure of an alleged abuser or victim from employment or control of the facility or agency does not terminate either an administrative or criminal investigation.

Interviews revealed the departure of perpetrators or victims from employment or confinement at the facility does not provide a basis for terminating the investigation.

This practice was confirmed by the SID Investigators.

115.71(k)(l) NJDOC PCS.001.008(page 55) states: Special Investigation Division is part of the New Jersey Department of Corrections and conducts its own criminal as well as administrative investigations into cases of sexual abuse and sexual harassment. This information was confirmed during interviews with Facility Administrator, NJDOC Statewide PREA Coordinator, SID Investigators, and Institutional PREA Compliance Manager in addition to the review of the ten (10) investigative case files. Therefore, provisions (k) and (l) are not applicable.

This auditor also interviewed the SID Investigators. The auditor learned during the interview that the SID Investigator completes the investigation, however, is not allowed to make a determination on the investigation. Rather, the assigned primary investigator completes the investigation, then meets with the SID Principal Investigator to review the investigation.

The SID investigators then forward the reviewed report to the Facility Administrator to review and provide the preponderance of evidence conclusion/ determination.

The auditor learned during the interview process that the Bayside Facility Administrator completed the Specialized PREA Investigative training.

The auditor interviewed the following individuals to determine compliance:

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|  | <ul style="list-style-type: none"> <li>• SID Investigators</li> <li>• Inmates alleged sexual abuse</li> </ul> <p>Based on the review of policy, ten (10) investigative case files, interviews and analysis, the facility does meet all standard provisions.</p> |
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| <b>115.72</b> | <b>Evidentiary standard for administrative investigations</b>   |
|               | <b>Auditor Overall Determination:</b> Meets Standard  |
|               | <b>Auditor Discussion</b>   |
|               | <p>The auditor reviewed the following policies and documentation:</p> <ul style="list-style-type: none"> <li>• PCS.001.008 Prevention, Detection and Response of Sexual Abuse and Harassment</li> <li>• IMM.001.004 Zero Tolerance Policy: Prison Sexual Abuse and Harassment</li> <li>• Bayside State Prison PREA Audit Questionnaire (PAQ)</li> </ul> <p>115.72(a) NJDOC PCS.001.008(page 55) states: As indicated above, NJDOC assigns to the SID the responsibility of investigating all potential illegal activities and violations by incarcerated persons, staff and any other individuals who visit NJDOC facilities, including allegations of sexual abuse and sexual harassment. NJDOC training supports the criteria of a “preponderance of evidence” for implementing administrative investigations. In general terms, the “preponderance of evidence” threshold is achieved through a determination that the facts as presented by the investigation are more likely than not to be true. In most cases, this means that there must be at least a 51 percent likelihood that the facts are true.</p> <p>Per interviews with the SID Investigator a preponderance of evidence is the standard necessary to substantiate an administrative allegation of sexual abuse or sexual harassment and a probable cause is for criminal investigations.</p> <p>Based on the review of agency policies and interviews with the assigned investigators, the facility meets compliance with the standard.</p> |

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| <b>115.73</b> | <b>Reporting to inmates</b>   |
|               | <b>Auditor Overall Determination:</b> Meets Standard  |
|               | <b>Auditor Discussion</b>   |
|               | <p>The auditor reviewed the following policy and documentation to determine compliance:</p> |



- PCS.001.008 Prevention, Detection and Response of Sexual Abuse and Harassment
- Bayside State Prison PREA Audit Questionnaire (PAQ)
- PREA Investigative Files

115.73(a) NJDOC PCS.001.008(page 55) states: Incarcerated persons in the custody of the NJDOC are notified of the investigative outcome following a PREA investigation in which they were the complainant. The facility SID investigation report for each PREA case is reviewed by the facility-level Sexual Abuse Advisory Council (SAAC) and by Central Office SAAC. The potential final outcomes of the investigation are substantiated, unsubstantiated, and unfounded.

Policy requires the IPCM to advise inmates who previously alleged sexual victimization of the disposition of the investigation. The IPCM will deliver a copy of form (NJDOC PREA Sexual Abuse Investigation Disposition Report) to the inmate who will sign for same. A copy of the signed form will be maintained by the Compliance Manager and placed in Folder 115.73 on the I drive. The governing notification form informs an inmate of the results of an investigation of inmate-on-inmate sexual abuse allegations. When the allegation involves staff, the form provides a space for the inmate to be informed if the staff member is no longer posted within their housing unit, is no longer employed at BSP, if the staff member was indicted on a charge related to sexual abuse within the facility or the agency learned that the staff member was convicted on a charge related to sexual abuse within the facility.

The PAQ identified the number of criminal and/or administrative investigations of alleged inmate sexual abuse that were completed by the agency/facility in the past 12 months as ten (10). All were concluded as administrative and zero (0) were concluded as criminal.

The PAQ noted of the alleged sexual abuse investigations that were completed in the past 12 months, the number of inmates who were notified, verbally or in writing, of the results of the investigation was ten (10).

Interviews with two (2) inmates who reported sexual abuse indicated they were informed of the investigative findings by the Institutional PREA Compliance Manager.

115.73(b): The NJDOC employs investigators assigned to the Special Investigation Division identified as Investigators who are authorized to conduct both administrative and criminal investigations. Each of the nine (9) sexual abuse investigations and one (1) sexual harassment investigations were completed by staff within the NJDOC agency. Therefore, this provision is not applicable.

115.73(c)(d) NJDOC PCS.001.008(pages 55 and 56) states: Following an incarcerated person's allegation that a staff member has committed sexual abuse against the incarcerated person, the IPCM shall subsequently inform the victim in writing whenever the accused staff member is transferred, no longer employed at the facility, or has been indicted and/or convicted. In cases in which the alleged abuser is an incarcerated person at the facility, the incarcerated person victim is to be notified

when the alleged incarcerated person has been indicted and/or convicted on a charge related to sexual abuse in the facility, as applicable and available. A copy of the signed Notification form, or documented refusal to sign, is maintained by the IPCM and placed in Folder 115.73 on the DOCNet I-drive.

The facility reported two (2) staff on inmate sexual abuse allegations during the review period. Both investigations were determined as (2) un-substantiated. The review of the investigative case files indicated all victims were advised of the investigative findings. Both inmates of sexual abuse investigation acknowledged by signature their notification of the following: "The investigation was un- substantiated and Criminal activity was not identified during the investigation", therefore, no further notification was required.

The facility reported zero substantiated inmate on inmate sexual abuse and zero substantiated inmate on inmate sexual harassment investigative findings during the review period, and the same for staff on inmate.

115.73(e) NJDOC PCS.001.008(page 56) states: All notifications shall be documented. Furthermore, the incarcerated person is informed of the investigation results through the Sexual Abuse Investigation Disposition form, which is produced by the Central Office PREA Compliance staff at the conclusion of the central office SAAC review. The form is sent to the IPCM. The IPCM obtains a signature from, and provides a copy of the form to, the incarcerated person. A copy of the signed form, or documented refusal to sign, is maintained by the IPCM and placed in Folder 115.73 on the DOCNet I-drive Regardless of which facility the alleged PREA violation occurred, it is the responsibility of the respective IPCM at the facility where the victim is housed at the time the Notification or Disposition form has been produced (including those incarcerated persons housed at an RCRP facility) to issue and request signature of the incarcerated person.

The PAQ noted the number of notifications to inmates that were provided pursuant to this standard as nine (9) and of those notifications made in the past 12 months, the number that were documented as nine (9). The facility reported nine (9) sexual abuse allegations. Seven (7) victims acknowledged by signature notification of the investigative findings. Two (2) refused to acknowledge by signature notification of the investigative findings. Their refusal was noted as witnessed by two (2) staff members. Therefore, documentation supports all victims who reported sexual abuse were notified of the investigative findings pursuant to the standard.

Additionally, the one (1) victim who reported sexual harassment was also documented as receiving notification of the investigative findings.

115.73(f) NJDOC PCS.001.008(page 56) states: NJDOC does not issue notifications or dispositions to persons that have been released from NJDOC custody.

The auditor interviewed the following individuals to determine compliance:

- Institutional PREA Compliance Manager

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|  | <ul style="list-style-type: none"> <li>• Inmates reported Sexual Abuse</li> <li>• SID Investigators</li> </ul> <p>Based on the review of agency policy, documentation of inmates' notification of the investigative findings, interviews and analysis, the facility has demonstrated compliance with this standard.</p> |
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| <b>115.76</b> | <b>Disciplinary sanctions for staff</b>   |
|               | <b>Auditor Overall Determination:</b> Meets Standard  |
|               | <b>Auditor Discussion</b>   |
|               | <p>The auditor reviewed the following policies to determine compliance:</p> <ul style="list-style-type: none"> <li>• PCS.001.008 Prevention, Detection and Response of Sexual Abuse and Harassment</li> <li>• IMM.001.004 Zero Tolerance Policy: Prison Sexual Abuse and Sexual Harassment</li> <li>• Bayside PREA Audit Questionnaire (PAQ)</li> </ul> <p>115.76(a)(b)(c) NJDOC PCS.001.008(page 57) states: Staff shall be subject to disciplinary sanctions up to and including termination for violating agency sexual assault zero tolerance policies. Disciplinary sanctions for such violations are commensurate with the nature and circumstances of the acts committed, along with other contributing factors. An employee, contractor or volunteer who fails to report an allegation, or coerces or threatens another person to submit inaccurate or untruthful information with the intent to alter a report may also face disciplinary charges to and including dismissal, even for a first offense.</p> <p>IMM.001.004 (pages 5 and 6) outlines the mandate of the standard. Staff shall be subject to disciplinary sanctions, up to an including termination, for violating agency sexual abuse, sexual misconduct and sexual harassment policies and for failing to report such. Disciplinary sanctions for such violations are commensurate with the nature and circumstances of the acts committed, along with other contributing factors.</p> <p>Contractors and volunteers are provided information regarding conduct and consequences for violating the NJDOC zero tolerance for sexual abuse and sexual harassment policies.</p> <p>Reports concerning a contract vendor employee's unprofessional conduct shall be forwarded to the facility/institution/office site administrator for resolution and shall be reported to law enforcement agencies and to relevant licensing bodies, as appropriate.</p> |

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|  | <p>The NJDOC reserves the right to terminate the services of a volunteer for violating the NJDOC zero tolerance for sexual abuse and sexual harassment policies. Additionally, any volunteers who engages in sexual abuse shall be prohibited from contact with Incarcerated Persons and shall be reported to law enforcement agencies and to relevant licensing bodies, as appropriate.</p> <p>All employees are subject to administrative disciplinary sanctions for violating agency sexual abuse/sexual harassment policies. The Collective Bargaining Agreements with the NJDOC allow for disciplinary sanctions against staff, including termination, for the sexual abuse/sexual harassment of an inmate. All terminations for violations of agency sexual abuse/sexual harassment policies, or resignations by staff in lieu of termination, may be reported to criminal investigators and to any relevant professional, certifying, or licensing agencies, unless the activity was clearly not criminal.</p> <p>This auditor interviewed Facility Administrator as well as Institutional PREA Compliance Manager/Asst Superintendent, who confirmed the NJDOC's Employee Termination Policy in response to substantiated outcomes of sexual abuse and sexual harassment investigations which can range in various forms of disciplinary actions, up to termination and criminal referral.</p> <p>The PAQ noted in the past 12 months, the number of staff from the facility who have violated agency sexual abuse or sexual harassment policies as zero. This was confirmed during the review of the investigative casefiles.</p> <p>Based on the review of agency policies, PREA investigative casefiles, the facility is compliant with all provisions of this standard.</p> |
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| <b>115.77</b> | <b>Corrective action for contractors and volunteers</b>  |
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|               | <p><b>Auditor Overall Determination:</b> Meets Standard</p>  |
|               | <p><b>Auditor Discussion</b></p> <p>The auditor reviewed the following policies to determine compliance:</p> <ul style="list-style-type: none"> <li>• PCS.001.008 Prevention, Detection and Response of Sexual Abuse and Harassment</li> <li>• IMM.001.004 Zero Tolerance Policy: Prison Sexual Abuse and Sexual Harassment</li> <li>• Bayside PREA Audit Questionnaire (PAQ)</li> <li>• PREA Investigative Files</li> </ul> <p>115.77(a)(b) NJDOC PCS.001.008(pages 58 and 59) states: Volunteers and contractors are provided information regarding conduct and consequences for violating the NJDOC zero tolerance for sexual abuse and sexual harassment policies.</p> |

Reports concerning a contract vendor employee's unprofessional conduct shall be forwarded to the facility/institution/office site administrator for resolution.

The NJDOC reserves the right to terminate the services of a volunteer for reasons detailed within Internal Management Procedure PCS.001.VOL.001 Volunteer Services. With regards to PREA, the Internal Management Procedure specifically states:

- All volunteers must comply with the NJDOC's zero tolerance of sexual assault policy;
- Any volunteer who engages in sexual abuse shall be prohibited from contact with incarcerated persons and shall be reported to law enforcement agencies if such action constitutes a crime, and to relevant licensing bodies;
- All volunteers are required to immediately report any knowledge, suspicion or information regarding an incident of sexual abuse or sexual harassment that occurred in the facility; retaliation against incarcerated persons or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation; and
- The NJDOC shall take appropriate remedial measures and consider whether to prohibit further contact with incarcerated persons in the case of a violation of agency zero tolerance sexual abuse/sexual harassment policies.

115.77(a)(b) IMM.001.004 (pages 5 and 6) states: (Applies to all NJDOC staff, volunteers, or contractors). Staff shall be subject to disciplinary sanctions, up to and including termination, for violating agency sexual abuse, sexual misconduct and sexual harassment policies and for failing to report such. Disciplinary sanctions for such violations are commensurate with the nature and circumstances of the acts committed, along with other contributing factors.

Contractors and volunteers are provided information regarding conduct and consequences for violating the NJDOC zero tolerance for sexual abuse and sexual harassment policies.

Reports concerning a contract vendor employee's unprofessional conduct shall be forwarded to the facility/institution/office site administrator for resolution and shall be reported to law enforcement agencies and to relevant licensing bodies, as appropriate.

The NJDOC reserves the right to terminate the services of a volunteer for violating the NJDOC zero tolerance for sexual abuse and sexual harassment policies. Additionally, any volunteers who engages in sexual abuse shall be prohibited from contact with Incarcerated Persons and shall be reported to law enforcement agencies and to relevant licensing bodies, as appropriate. When NJDOC investigates sexual abuse between a staff member and an Incarcerated Person, the County Prosecutor is contacted for possible criminal investigation and prosecution.

Both of the above policies IMM.001.004, and PCS.001.008 address the requirements of standard 115.77.

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|  | <p>Per interview with the Facility Administrator, upon a volunteer and/or contract worker identified as an aggressor in a sexual harassment and/or sexual abuse allegation, the contractor and/or volunteer authorization to enter the facility would be suspended pending the completion of an investigation. Only upon an investigative conclusion that the individual did not commit the prohibited act, would they be allowed for reenter. The contracting agency would be notified of the substantiated investigative findings and would be responsible for ensuring notification is made to their licensing agency. Central Office would be notified of volunteer removal. Criminal charges would be initiated as applicable for both contractors and volunteers.</p> <p>The auditor interviewed NJDOC's SID Investigators and IPCM/Asst. Superintendent, they further shared that BSP have not had any reported allegation of sexual abuse or sexual harassment against volunteers or contractors in the past 12-months. The auditor reviewed the PREA Investigative files and did not find any investigations involving contractors, nor volunteers.</p> <p>The auditor interviewed the following staff members to determine compliance:</p> <ul style="list-style-type: none"> <li>• Institutional PREA Compliance Manager</li> <li>• Facility Administrator</li> </ul> <p>Based on the review of agency policies, interviews, PREA investigative casefiles, the facility is compliant with all provisions of this standard.</p> |
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| <b>115.78 Disciplinary sanctions for inmates</b> |  |
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|  | <b>Auditor Overall Determination:</b> Meets Standard   |
|  | <b>Auditor Discussion</b>  |
|  | <p>The auditor reviewed the following policies and documentation to determine compliance:</p> <ul style="list-style-type: none"> <li>• ADM.008.000 Inmate Disciplinary Hearing Program: Mission, Goals, and Objectives</li> <li>• PCS.001.008 Prevention, Detection and Response of Sexual Abuse and Harassment</li> <li>• Bayside State Prison (PAQ)</li> </ul> <p>115.78(a)(b)(c) NJDOC PCS.001.008(pages 58 and 59) states: Incarcerated persons shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the incarcerated person engaged in incarcerated person on incarcerated person sexual abuse/harassment or following a criminal finding of guilt for incarcerated person on incarcerated person sexual abuse/harassment. Any incarcerated person who violates the zero tolerance of sexual abuse/sexual harassment shall be subject to incarcerated person discipline in</p> |

accordance with N.J.A.C. 10A:4 Incarcerated person Discipline. Additionally, pursuant to N.J.A.C. 10A:4-4.2, all prohibited acts that may constitute crimes of the first (including aggravated sexual assault), second (including sexual assault), third or fourth degree under the Criminal Code of the State of New Jersey (N.J.S.A. 2C:1-1 et seq.) shall be referred to the prosecutor of the county in which the correctional facility is located.

Such discipline is applied via a formal disciplinary process following an administrative finding that the incarcerated person engaged in incarcerated person-on-incarcerated person sexual abuse/harassment or following a criminal finding of guilt for incarcerated person-on-incarcerated person sexual abuse/harassment.

The Facility Administrator confirmed imposed disciplinary sanctions are proportionate to the nature and circumstances of the abuse committed and the inmates' disciplinary histories and similar sanctions imposed on others. Administrative discipline would be imposed on an aggressor prior for substantiated sexual abuse prior to the inmate's criminal conviction. However, an inmate's mental health would be considered when imposing disciplinary sanctions that include input from mental health staff.

The review of the seven (7) inmates on inmate sexual abuse and zero (0) inmate on inmate sexual harassment investigations identified zero were concluded as substantiated.

115.78(d) NJDOC PCS.001.008(page 59) states: In the case where incarcerated persons who have been found guilty of misconduct related to sexual abuse in a facility that offers sex offender treatment programs, the Administrator or appropriate designee shall refer the incarcerated person to the sex offender treatment program staff for evaluation to determine whether or not the incarcerated person is appropriate for the program, and if the incarcerated person will be required to complete the program as part of the sanctions or as a condition to access programming or other benefits.

Per an interview with the Mental Health Administrator, the facility does offer individual counseling to the offending individual in addition to the mental health counselors schedule support groups for victims of sexual abuse.

115.78(e) NJDOC PCS.001.008(page 59) states: Incarcerated persons cannot legally consent to sexual contact with a staff member, contractor or volunteer. It is against the law for any staff member, contractor or volunteer and an incarcerated person to have a sexual relationship of any kind. Incarcerated persons are not disciplined for sexual contact with staff, contractors or volunteers unless it is determined that the staff member did not consent to the contact.

115.78(f) NJDOC PCS.001.008(page 59) states: A report of sexual abuse or harassment 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 sufficient evidence to substantiate the allegation. If an investigation reveals that an incarcerated person, staff member, contractor or

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|  | <p>volunteer knowingly made a false allegation or a false material statement, the Department may take appropriate disciplinary action and/or refer the matter for criminal action.</p> <p>115.78(g) NJDOC PCS.001.008(page 59) states: Although Incarcerated person on incarcerated person consensual sex is not considered sexual abuse or a PREA violation, it is prohibited conduct at NJDOC facilities and is subject to discipline in accordance with N.J.A.C. 10:A Chapter 4 Inmate Discipline.</p> <p>The auditor interviewed the following staff members to determine compliance:</p> <ul style="list-style-type: none"> <li>• Institutional PREA Compliance Manager</li> <li>• Mental Health Administrator</li> <li>• Facility Administrator</li> </ul> <p>Based on the review of agency policies, interviews, PREA investigative casefiles, the facility is compliant with all provisions of this standard.</p> |
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| 115.81 | Medical and mental health screenings; history of sexual abuse  |
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|        | <p><b>Auditor Overall Determination:</b> Meets Standard</p>  |
|        | <p><b>Auditor Discussion</b></p> <p>The auditor reviewed the following policies and documentation:</p> <ul style="list-style-type: none"> <li>• PCS.001.008 Prevention, Detection and Response of Sexual Abuse and Harassment</li> <li>• Med.MHS.001.002 Mental Health Services: Mental Health Reception and Evaluation</li> <li>• Med.IMA.001 Health Appraisals at Reception</li> <li>• Bayside PREA Audit Questionnaire (PAQ)</li> <li>• Risk Screening Forms</li> </ul> <p>115.81(a) NJDOC PCS.001.008(page 60) states: As stated in the Electronic Medical record (EMR) Multidimensional Sexual Victimization and Abusiveness Risk Assessment Checklist, if the screening checklist indicates that an incarcerated person has experienced prior victimization, whether it occurred in an institutional setting or in the community, healthcare staff will ensure that the incarcerated person is referred to be seen for a follow up medical or mental health meeting within 14 days of the screening intake.</p> <p>Per the PAQ, in the past 12 months, 100% of inmates who disclosed prior victimization during screening were offered a follow-up meeting with a medical or mental health practitioner.</p> |



Per the PAQ, in the past 12 months, 100% of inmates who have previously perpetrated sexual abuse, as indicated during the screening, were offered a follow-up meeting with a mental health practitioner.

Per an interview with IPCM, and medical staff who conduct risk screenings, upon an inmate reporting or staff identifying an inmate has a prior history of sexual victimization or have previously perpetrated sexual abuse, a mental health referral is submitted. The inmates are seen within 14 days of their arrival. This procedure was confirmed by the Mental Health Administrative.

The facility reported that 114 inmates who arrived during the review period were referred to mental health based on their risk screening results. The auditor selected to review 20 NJDOC Institutional Health Services Referrals that documented the inmate's referral to mental health based on the risk screening assessment. The NJDOC Health Services Referrals documented the date of referral, date received by mental health and the date the inmate was evaluated by a mental health practitioner. Documentation supported the 20 inmates were identified as the following: 12 individuals were identified with a prior history of sexual victimization; one (1) with a prior history of sexual aggressiveness; and seven (7) individuals with a history both prior sexual victimization and prior history of sexual abuse aggressiveness. Each of the 20 individuals was documented as assessed by a mental health practitioner within seven (7) days of the submitted referrals.

Information is maintained in the EMR PREA Monitoring Module and data is accessible and tracked using the process described in the policy on the PREA E-Management System.

Interviews were conducted with four (4) inmates who reported prior sexual abuse during risk screening. These individuals identified meeting with mental health staff within the following timeframe: one (1) immediately; one (1) within a couple of days and two (2) were unable to identify the specific timeframe but acknowledged they were seen within two (2) weeks of arrival and reporting.

Treatment services are offered without financial cost to the inmate. As confirmed by observation and a review of screening documents, screening for prior sexual victimization in any setting is conducted by healthcare staff, during in-processing procedures. In-processing procedures also screen for previous sexually assaultive behavior in an institutional setting or in the community.

115.81(b) NJDOC PCS.001.008(page 60) states: As stated in the EMR Multidimensional Sexual Victimization and Abusiveness Risk Assessment Checklist, if the screening checklist indicates that an incarcerated person has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, healthcare staff will ensure the incarcerated person is referred to be seen for a follow up mental health meeting within 14 days of the screening intake.

115.81(c)(d) NJDOC PCS.001.008(page 60) states: NJDOC offers specific interventions for incarcerated persons, whether male or female, who have experienced sexual assault. These interventions are offered through a licensed mental health clinician

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|  | <p>employed by the NJDOC health services vendor.</p> <p>Per an interview with medical, information related to sexual victimization or abusiveness is limited to medical and mental health practitioners and other staff with a need-to-know for determining treatment plans, security, housing, work, program assignments and management decisions.</p> <p>115.81(e) NJDOC PCS.001.008(pages 61 and 62) states: Informed consent is a part of the EMR Multidimensional Sexual Victimization and Abusiveness Risk Assessment Checklist. Medical and mental health practitioners ask for consent to allow the reporting of this information to NJDOC.</p> <p>Signed and dated informed consent forms are obtained from inmates before reporting prior sexual victimization that did not occur in an institutional setting. BSP does not house inmates under the age of 18.</p> <p>The auditor interviewed the following individuals to determine compliance:</p> <ul style="list-style-type: none"> <li>• Institutional PREA Compliance Manager</li> <li>• Mental &amp; Medical Administrators</li> <li>• Inmates reported victimization</li> <li>• Inmate scored for abusiveness</li> </ul> <p>Based on a review of agency policies, mental health referrals, site observation, confirmation of secure electronic storage, secure room storage areas, and timely completion of submitted mental health referral, interviews and analysis, the facility is compliant with all provisions of the standard.</p> |
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| <b>115.82</b> | <b>Access to emergency medical and mental health services</b>  |
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|               | <p><b>Auditor Overall Determination:</b> Meets Standard</p>  |
|               | <p><b>Auditor Discussion</b></p> <p>The auditor reviewed the following policies and documentation to determine compliance:</p> <ul style="list-style-type: none"> <li>• PCS.001.008 Prevention, Detection and Response of Sexual Abuse and Harassment</li> <li>• Med.MHS.001.002 Mental Health Services: Mental Health Reception and Evaluation</li> <li>• Med.IMA.001 Health Appraisals at Reception</li> <li>• Inmates alleging sexual abuse medical records</li> <li>• Bayside PREA Audit Questionnaire (PAQ)</li> </ul> <p>115.82(a) NJDOC PCS.001.008(page 61) states: As codified at N.J.A.C.10A:16-2.10</p> |

Emergency medical treatment, emergency medical care shall be available to incarcerated persons 24 hours per day, seven days per week. General emergency response procedures for all medical emergencies within the NJDOC prison system are described in MED.EME.005 Emergency Response.

MED.MLI.007 Sexual Assault establishes specific procedures to ensure that NJDOC healthcare staff is able to respond immediately and appropriately to allegations of prison sexual assault or abuse. Healthcare staff shall follow the institution's written plan for responding to allegations of sexual assault or abuse of incarcerated persons.

Interviews with the Medical Administrator confirmed victims of sexual abuse receive timely, unimpeded access to emergency medical treatment. All victims are seen immediately upon being notified as medical staff are on duty 24/7 and are available to the inmate population. However, if a forensic medical examination is needed, medical staff would only provide emergency care without disturbing any physical evidence and the victim would be transferred to one of the outside hospitals, Inspira Medical Center. Upon the victims' return, medical staff would follow the recommendations made by the SANE/SAFE and/or attending doctor at the local hospital. Continued medical treatment would be based on the WTRC medical staff's professional judgment and scope of practice. There were zero acts of sexual abuse that met the standards for a forensic medical examination.

An interview with the Mental Health Administrator indicated Victims of sexual abuse are normally seen within 24 hours or the next workday after reporting sexual abuse for crisis intervention services. The nature of the services provided is based on the staff's professional judgement in determining a treatment plan.

The auditor requested documentation of the timeliness of emergency medical treatment and crisis intervention services provided for the seven (7) inmates who reported sexual abuse. All seven (7) inmates were assessed by medical and mental health.

The auditor conducted interviews with two (2) inmates who reported and/or were identified in sexual abuse investigations for confirmation of the timeliness of emergency medical treatment and crisis intervention services. Both victims stated they were assessed by medical staff following reporting the sexual abuse. Both acknowledged they are on the mental health caseload and were seen on the day of reporting or within a week of reporting.

115.82(b) NJDOC PCS.001.008(page 61) states: All incarcerated individuals under the jurisdiction of the NJDOC have access to twenty-four-hour emergency mental health services in order to ensure provisions of care in the event of an unexpected or acute mental health problem, or a crisis that cannot be deferred to the next available scheduled service. See MED.MHS.002.001 Emergency Mental Health Services.

In the case of a PREA victim, mental health services are available prior to transport to an emergency facility and following an incarcerated person's return to the facility. Prior to the transport, the mental health staff will assess the incarcerated person's suicide risk and ability to proceed with forensic interventions. They will also provide

supportive counseling and may consult psychiatry, if needed.

Interviews with random and specialized staff confirmed they were aware that medical staff would be notified of reported PREA allegations by the Shift Supervisor. Staff would notify their immediate supervisor, and/or the Shift Commander who would ensure the victim was assessed by medical staff.

Medical staff are scheduled 24/7 to provide medical services. However, the Shift Supervisor completes the Incident Report, for each reported sexual abuse while documenting the date and time of all notifications to include those to medical and mental health. This form is included in the investigative packet.

115.82(c) NJDOC PCS.001.008(pages 61 and 62) states: Incarcerated victims of sexual abuse shall be offered timely information and access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care. Victims of sexual abuse while incarcerated in any facility shall also be offered testing for sexually transmitted infections, as medically appropriate.

Interviews with the Medical Administrator, all victims of sexual abuse would be offered testing for sexually transmitted infections to include HIV, STD and Hepatitis in addition to follow up testing through lab work and medication as needed. The process would be initiated at the outside hospital if the victim is transported for a forensic examination and all follow-ups' services would be continued at Bayside State Prison (BSP) by medical staff. The victim would also be offered timely information and access to emergency contraception.

Interviews were conducted with two (2) of the seven (7) inmates who reported sexual abuse. Both stated the sexual abuse reported did not require testing for emergency medical treatment, testing for sexually transmitted infections prophylaxis access to emergency contraception and/or access to emergency contraception.

The review of the seven (7) sexual abuse investigative case files confirmed zero reports identified acts that warranted the receipt of a forensic examination and/or an offer for HIV, STD and Hepatitis testing, access to emergency contraception sexually transmitted infections prophylaxis, and/or follow-up treatment.

115.82(d) NJDOC PCS.001.008(page 62) states: Per Internal Management Procedure MED.IMHC.010 Co-Pay for Eligible Health/Dental Care sexual abuse emergency services for incarcerated persons are excluded from a co-payment requirement. Signs are posted in all facilities with details on the process for accessing healthcare and mental health services, both in emergent and non-emergent situations.

Per Internal Management Procedure MED.IMHC.010 Co-Pay for Eligible Health/Dental Care sexual abuse emergency services for incarcerated persons are excluded from a copayment requirement. Signs are posted in all facilities with details on the process for accessing healthcare and mental health services, both in emergent and non emergent situations."

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|  | <p>Interviews with the Medical and Mental Health Administrators confirmed the inmate population does not incur any financial obligations for the treatment of services to include those provided within the facility and/or any treatment provided by an outside medical facility.</p> <p>The auditor interviewed the following individuals to determine compliance:</p> <ul style="list-style-type: none"> <li>• Institutional PREA Compliance Manager (IPCM)</li> <li>• Medical &amp; Mental Health Administrators</li> <li>• Inmates alleged sexual abuse</li> <li>• Random &amp; Specialized Staff</li> </ul> <p>Based on the review of agency policies, review of documented medical and mental health services, and interviews. BSP does meet all provisions of the standard.</p> |
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| <b>115.83</b> | <b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>  |
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|               | <p><b>Auditor Overall Determination:</b> Meets Standard</p>   |
|               | <p><b>Auditor Discussion</b></p> <p>The auditor reviewed the following policies and documentation to determine compliance:</p> <ul style="list-style-type: none"> <li>• PCS.001.008 Prevention, Detection and Response of Sexual Abuse and Harassment</li> <li>• Med.MHS.001.002 Mental Health Services: Mental Health Reception and Evaluation</li> <li>• Med.002.002 Emergency Mental Health Services</li> <li>• Med.IMA.001 Health Appraisals at Reception</li> <li>• Inmates alleging sexual abuse medical records</li> <li>• Bayside PREA Audit Questionnaire (PAQ)</li> </ul> <p>115.83(a)(b)(c) NJDOC PCS.001.008(page 62) states: Prior to the transport to a hospital for sexual assault, the mental health staff will assess the incarcerated person's suicide risk and ability to proceed with forensic interventions. They will also provide supportive counseling and may consult psychiatry, if needed. Once the incarcerated person returns to the facility, mental health staff will perform an evaluation which includes another suicide assessment, review recommendations reported by the rape counselor or hospital's emergency services and implement those recommendations, assess for emotional distress or other mental health issues, update the PREA monitoring, and offer treatment, if necessary. A full description of these services is located in Internal Management Procedure MED.MHS.002.010 Counseling Services for Victims of Sexual Assault. Internal Management Procedure</p> |

MED.MHS.002.001 Emergency Mental Health Services provides an overview of the department's emergency services.

Per interviews with both the Mental Health Administrator and Medical Services Administrator, victims of sexual abuse would be offered follow-up services throughout their assignment at the facility and transfer to other NJDOC facilities. Upon an inmate's release from NJDOC custody into the community, Case Managers within each department arrange for continued treatment services within the inmate's release area. The respective case managers maintain a list of agencies and available services within each county throughout the state of New Jersey to arrange appropriate treatment services and the inmates are seen scheduled to be seen 24 hours of their release from NJDOC custody.

Interviews with two (2) inmates who reported sexual abuse indicated each were previously assigned to the mental health caseload and attended regular meetings with Mental Health for matters other than their report of sexual abuse and were aware of the support groups offered.

Interviews with medical and mental health practitioners indicated the level of care provided to the inmate population is nothing less than that of an equal level of care to those individuals within the community.

115.83(d)(e) NJDOC PCS.001.008(pages 62 and 63) states: In accordance with N.J.A.C. 10A 16-6 Pregnant incarcerated persons, every pregnant incarcerated person is provided counseling in the following areas: family planning, birth control, child placement, pregnancy termination, and, if requested by the incarcerated person, religious counseling. They shall also be offered testing for sexually transmitted infections, as medically appropriate.

If pregnancy results from the sexual abuse, alleged victims shall receive timely and comprehensive information about and timely access to all lawful pregnancy related medical services. The medical provider is mandated to provide pregnant incarcerated persons with comprehensive prenatal care. Prenatal care that is offered shall include ongoing nutritional and dietary guidance, as well as advice on appropriate levels of activity, safety precautions and counseling.

Bayside State Prison is an all-male facility.

115.83(f)NJDOC PCS.001.008(page 63) states: Incarcerated victims of sexual abuse shall be offered timely information and access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care. Victims of sexual abuse while incarcerated in any facility shall also be offered testing for sexually transmitted infections, as medically appropriate.

115.83(g)NJDOC PCS.001.008(page 63) states: Per Internal Management Procedure MED.IMHC.010 Co-Pay for Eligible Health/Dental Care sexual abuse emergency services for incarcerated persons are excluded from a co- payment requirement.

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|  | <p>Testing for sexually transmitted infections is offered as medically appropriate. Treatment services are provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. An interview with the Medical Practitioner confirmed this practice.</p> <p>115.83(h)NJDOC PCS.001.008(page 63) states: Incarcerated persons who report sexual abuse and are evaluated by a rape crisis center, are scheduled for follow-up mental health and medical aftercare upon their return to custody. Mental health staff conducts an evaluation of all known incarcerated person abusers within 60 days of learning of such abuse history and offers treatment, when deemed appropriate.</p> <p>There were zero inmate on inmate substantiated sexual abuse investigative findings during the review period. Therefore, an evaluation of the abuser was not applicable. Per the Mental Health Administrator, an inmate identified as the abuser has an option of accepting participation in a sex offender program.</p> <p>The auditor interviewed the following individuals to determine compliance:</p> <ul style="list-style-type: none"> <li>• Institutional PREA Compliance Manager (IPCM)</li> <li>• Medical &amp; Mental Health Administrators</li> <li>• Inmates alleged sexual abuse</li> </ul> <p>Based on the review of policies, investigative case files, medical and mental health documentation, interviews and analysis, the facility is compliant with all provisions of this standard.</p> |
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| 115.86 | Sexual abuse incident reviews  |
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|        | <p><b>Auditor Overall Determination:</b> Meets Standard</p>  |
|        | <p><b>Auditor Discussion</b></p> <p>The auditor reviewed the following documentation to determine compliance:</p> <ul style="list-style-type: none"> <li>• PCS.001.008 Prevention, Detection and Response of Sexual Abuse and Harassment</li> <li>• BSP Sexual Abuse Incident Review Summaries</li> <li>• Bayside State Prison (PAQ)</li> <li>• PREA Investigative Files</li> </ul> <p>115.86(a)(b)(c) NJDOC PCS.001.008(pages 63 and 64) states: NJDOC has established multi-disciplinary Sexual Assault Advisory Councils (SAAC) which convenes at both the correctional facility and Departmental level. The SAAC's review all allegations and instances of sexual abuse/sexual harassment with the purpose of assessing and improving PREA prevention, detection and response. The purpose, composition and duties of the Sexual Assault Advisory Council (SAAC) are contained in the Internal</p> |

Management Procedure PCS. 001.PREA.001 Sexual Assault/PREA Advisory Council.

Facility incident reviews shall convene within thirty (30) days of the conclusion of the investigation. SID shall present the completed investigation case for review at the SAAC meeting. These reviews are done for all allegations of sexual abuse and/or sexual harassment as defined by PREA.

115.86(d)(e)NJDOC PCS.001.008(pages 64 and 65) states: The review team shall: (1) Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse; (2) Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility; (3) Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse; (4) Assess the adequacy of staffing levels in that area during different shifts; (5) Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; and (6) Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to paragraphs (d)(1)-(d)(5) of this section, and any recommendations for improvement and submit such report to the facility head and PREA compliance manager.

Each PREA allegation case review completed by the SAAC takes into account all factors listed above in section (d) of this subsection.

The facility shall implement the recommendations for improvement, or shall document its reasons for not doing so.

The SAAC may issue Corrective Action Reports, if necessary, and will monitor the implementation of recommended corrective actions. Recommendations for improvement shall be implemented or reasons for not doing so shall be documented on the Corrective Action Reports. The Departmental level SAAC reports to the NJDOC Commissioner, or designee, on matters reviewed by the committee and shall comply with collective bargaining agreements in implementing changes or programs.

The PAQ noted nine (9) criminal and/or administrative investigations of alleged sexual abuse completed during the 12-month review period that were followed by a sexual abuse incident review within 30 days, excluding only unfounded incidents. The facility identified seven (7) were concluded as unsubstantiated, and two (2) were unfounded, but a meeting was held and conducted on all nine (9) cases.

The incident reviews were documented as completed by members of the Sexual Assault Advisory Council (SAAC) that included to the following positions: Institutional PREA Compliance Manager, SID Investigator; Mental Health Professional; Medical Professional, Security Supervisors, Assistant Facility Administrator and Facility Administrator.

The IPCM convenes an institutional level sexual assault review of the substantiated and unsubstantiated sexual assault allegations within 30 days of the completion of



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|  | <p>the investigation by the SID. The Institutional PREA Compliance Manager is also a member of the SAAC. She indicated SAAC meetings are held monthly where the members review and discuss in detail the circumstances of the investigations while identifying any areas of concern that could have contributed to the occurrence to include the following: possible blind spots and physical barriers, insufficient staffing level, a need for change in policy or procedures, need for additional staff training, any possible circumstances that could have contributed to the assault to include the victim's status or perceived status as gay, transgender, intersex, based on their race and/or any gang affiliation. The Assistant Facility Administrator are included in the review and recommendations for approval that are forwarded to the Facility Administrator.</p> <p>The auditor interviewed the following staff members to determine compliance:</p> <ul style="list-style-type: none"> <li>• Institutional PREA Compliance Manager / Assistant Superintendent</li> <li>• Mental Health Administrator</li> <li>• Medical Administrator</li> <li>• Facility Administrator</li> </ul> <p>Based on the review of the agency's policy, incident reviews, interviews and analysis, the facility is compliant with all provisions of this standard.</p> |
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| 115.87 | Data collection  |
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|        | <p><b>Auditor Overall Determination:</b> Meets Standard</p>  |
|        | <p><b>Auditor Discussion</b></p> <p>The auditor reviewed the following policy and documentation to determine compliance:</p> <ul style="list-style-type: none"> <li>• PCS.001.008 Prevention, Detection and Response of Sexual Abuse and Harassment</li> <li>• Bayside State Prison (PAQ)</li> </ul> <p>115.87(a)(b)(c) NJDOC PCS.001.008(page 65) states: NJDOC participates in federal data collection on the incidence of prison rape through the annual Survey of Sexual Victimization (SSV) as administered by the U.S. Department of Justice, Office of Justice Programs, and Bureau of Justice Statistics (BJS). As required by PREA, BJS collects information on the incidence of prison rape to aid correctional administrators in addressing the prevention, reporting, investigation and prosecution of such incidence. While the SSV does not require the inclusion of data for allegations of sexual abuse or harassment at contracted private facilities (RCRP's), NJDOC does collect, review, maintain and include this data.</p> <p>115.87(a)(b)(c) NJDOC PCS.001.008(page 65) states: All data shall be maintained,</p> |

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|  | <p>reviewed, and collected as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.</p> <p>Incident-based and aggregated data shall also be collected from every facility the NJDOC contracts with for the confinement of its incarcerated persons.</p> <p>The Annual PREA Report shall be approved by the Commissioner and posted on the NJDOC's website by June 30 of each year.</p> <p>PCS.001. PREA.001 addresses the requirements of Standard 115.87. As confirmed by a review of support documentation, the facility collects accurate, uniform data for every allegation of sexual abuse/sexual harassment by using a standardized instrument. The agency tracks information concerning sexual abuse using data from the facility's PREA E Management system. The NJ DOC headquarters level staff oversees the data collected and maintains the information necessary to answer all questions from the most recent version of the Survey of Sexual Violence, conducted by the Department of Justice. The agency aggregates and reviews all data annually. Upon request, the agency would provide all such data from the previous calendar year to the Department of Justice no later than June 30.</p> <p>The auditor interviewed the following staff members to determine compliance:</p> <ul style="list-style-type: none"> <li>• Institutional PREA Compliance Manager</li> <li>• NJDOC State PREA Coordinator</li> </ul> <p>Agency compliance with this standard was also determined by a review of policy and tracking documentation and staff interviews.</p> |
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| 115.88 | Data review for corrective action  |
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|        | <b>Auditor Overall Determination:</b> Meets Standard   |
|        | <b>Auditor Discussion</b>  |
|        | <p>The auditor reviewed the following documentation to determine compliance:</p> <ul style="list-style-type: none"> <li>• PCS.001.008 Prevention, Detection and Response of Sexual Abuse and Harassment</li> <li>• Bayside State Prison (PAQ)</li> </ul> <p>115.88(a) NJDOC PCS.001.008(pages 65 and 66) states: The SAAC review approach as detailed under 115.86, is additionally deployed in considering whether changes or improvements in environmental, procedural, staffing and monitoring technology factors are required. The SAAC issues Corrective Action Reports, if necessary, upon</p> |

completion of the case review and monitors the implementation of recommended corrective actions.

Recipients of a SAAC Corrective Action Report are required to review the recommendations and notify the PREA Agency Coordinator of their findings within four (4) weeks of receipt. The Departmental level SAAC reports to the NJDOC Commissioner, or designee, on matters reviewed by the committee.

Per an interview with the Agency Head Designee, the agency does use the incident based sexual abuse data to assess and improve sexual abuse prevention, detection, and response policies, practices, and training. As incidents are reported and investigated, trends are identified (i.e. regarding the time, location, staff involved etc.). As the trends are identified, processes and policies are refined to ensure the adequate addressing of any issues found. If there is a deficiency noted that can be corrected with additional training, it is arranged. If there is an issue that needs to be clarified, a memorandum of instruction is issued.

The Annual PREA Report is prepared by the NJDOC State PREA Coordinator and submitted Director of Women's Services for the Commissioner's review and approval. Once approved, the report is posted on the NJDOC website.

Per the Institutional PREA Compliance Manager, the agency does review data collected and aggregated pursuant to 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detections, and response policies, and training. As the facility PREA Compliance Manager she is responsible for gathering and submitting accurate information to the NJDOC State PREA Coordinator for submission to the Director of Women's Services.

115.88(b)(c)(d) NJDOC PCS.001.008(pages 66) states: NJDOC annually compiles and posts a Commissioner-level approved report of the Department's rate of sexual abuse/harassment on the official Department webpage. This annual report includes its findings and corrective actions for each facility, as well as the agency as a whole.

NJDOC State PREA Coordinator confirmed the agency reviewed data collected and aggregated pursuant to standard 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, response policies, and training. When the data shows that corrective action measures are needed, immediate actions are taken to ensure PREA compliance, and the safety of staff and inmates. She completes an Annual Report that is submitted to the Commissioner for review. Once the Commissioner reviews and approves the report, it is posted on the agency's public website. Typically, the agency's Annual Reports does not contain sensitive information that needs to be redacted, as such information is excluded and would not be included in the report.

The auditor reviewed the agency's website and verified that the NJDOC Annual PREA Reported for FY 2023 - 2024 was published and made available to the public. The Annual Report included a comparison of fiscal years of 2022 -2023 and 2023 - 2024.

The auditor interviewed the following individuals to determine compliance:

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|  | <ul style="list-style-type: none"> <li>• Institutional PREA Compliance Manager</li> <li>• NJDOC PREA Coordinator</li> <li>• Agency Head</li> </ul> <p>Based on a review of policy, website, Annual Report, interviews and analysis, the agency is compliant with all provisions of this standard.</p> |
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| <b>115.89</b> | <b>Data storage, publication, and destruction</b>  |
|               | <b>Auditor Overall Determination:</b> Meets Standard   |
|               | <b>Auditor Discussion</b>  |
|               | <p>The auditor reviewed the following policy and documentation to determine compliance:</p> <ul style="list-style-type: none"> <li>• PCS.001.008 Prevention, Detection and Response of Sexual Abuse and Harassment</li> <li>• Bayside State Prison (PAQ)</li> </ul> <p>115.89(a) NJDOC PCS.001.008(page 66) states: The confidential investigation reports are securely maintained by SID indefinitely.</p> <p>115.89(b)(c) NJDOC PCS.001.008(pages 66 and 67) states: As indicated under standard 115.88, NJDOC annually compiles and posts a Commissioner-level approved report of the Department’s rate of sexual abuse/harassment on the official Department webpage. NJDOC data is made available in accordance with the collection schedule established by the U.S. Department of Justice and is done in compliance with the Federal Privacy Act and Freedom of Information Act, and all other applicable laws, rules, and regulations.</p> <p>115.89(d) NJDOC PCS.001.008(page 66) states: Pursuant to the established state Records Retention and Disposition Schedule, the retention of aggregated data is required for 10 years and no personal identifiers are used in the compilation or disclosure of the Report. Destruction of any records shall be done in accordance with the latest Records Retention and Disposition Schedule.</p> <p>PCS.001.PREA.EMS addresses the requirement of Standard 115.89. The NJ DOC PREA Coordinator reviews data compiled by each NJ DOC facility, via the PREA Tracking System. The system interfaces with the department’s ITag and EMR in real time. The SAAC issues a report to the headquarters level staff using PTS data on an annual basis. Facility data is maintained in locked files or on computer databases that are user ID and password protected. Agency PREA data is securely retained and is published on the agency’s public website after removing all personal identifying information. The required reports cover all data required in this standard and are retained in a file.</p> |

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|  | <p>The auditor interviewed the following individuals to determine compliance:</p> <ul style="list-style-type: none"> <li>• NJDOC State PREA Coordinator</li> <li>• Agency Head</li> </ul> <p>Agency compliance with this standard was determined by a review of policy and documentation and staff interviews concerning data protection practices.</p> |
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| <b>115.401</b> | <b>Frequency and scope of audits</b>   |
|                | <p><b>Auditor Overall Determination:</b> Meets Standard</p>  |
|                | <p><b>Auditor Discussion</b></p>   |
|                | <p>115.401(a)- (n) NJDOC PCS.001.008(page 68) it states: A PREA Audit Cycle is three years. NJDOC audits one third of the facilities each year of the audit cycle as outlined below:</p> <p><b>Year 1 of Cycle</b></p> <ul style="list-style-type: none"> <li>• Edna Mahan Correctional Facility</li> <li>• Garden State Youth Correctional Facility</li> <li>• South Woods State Prison</li> </ul> <p><b>Year 2 of Cycle</b></p> <ul style="list-style-type: none"> <li>• Adult Diagnostic and Treatment Center</li> <li>• East Jersey State Prison</li> <li>• Mid-State Correctional Facility</li> </ul> <p><b>Year 3 of Cycle</b></p> <ul style="list-style-type: none"> <li>• New Jersey State Prison</li> <li>• <u>Bayside State Prison</u></li> <li>• Northern State Prison</li> </ul> <p>NJDOC provides a sample of documentation, prepared by the IPCM, and allows the auditor access to any documents while on site. A complete tour of the facility is part of the PREA Audit. NJDOC ensures that the auditor has access to, and has the opportunity to observe, all areas of audited facilities. Additionally, NJDOC ensures that the auditor has the ability to interview a representative sample of incarcerated persons, staff, supervisors, and Administration.</p> <p>This is the third year of the fourth audit cycle. The review of the NJDOC agency website confirmed PREA Audit Final Reports were posted for each of the 11</p> |

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|  | <p>correctional facilities under NJDOC management throughout the third cycle and the second year of the fourth cycle.</p> <p>The last BSP PREA audit was conducted on September 2, 2022. The auditor was allowed access to all areas of the facility and had access to all required supporting documentation. BSP also allowed the auditor to conduct private interviews with both inmates and staff. Document submittals were reviewed for the applicability to the PREA standards. Interview results were cross-referenced to physical and documentary evidence.</p> <p>The PREA Audit Notice was provided to the facility by this Auditor and noted as posted on April 14, 2025, an excess of six weeks prior to the site observation. The PREA Audit Notice was observed posted throughout BSP to include the front entrance, visitation, recreation, food services, program areas, administration, segregation units, intake, mental health, medical, and all housing units accessible for viewing by inmates, staff, volunteers and contractors. Interviews with staff to include contractors and volunteers and the inmate population, acknowledged observance and awareness of the posting.</p> <p>An interview with staff assigned to the mailroom confirmed the inmates' outgoing mail is sealed by the inmates unless identified for monitoring due to security concerns per the Facility Administrator, or SID. Outgoing mail addressed to the PREA Auditor would have been treated as confidential and legal mail. The auditor did not receive any written correspondence nor verbal requests from the inmate population or staff during the site observation to participate in the interview process.</p> <p>This PREA auditor concludes BSP is in compliance with PREA standard 115.401, by facility walkthrough, reviewing documentation and interviews.</p> |
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| 115.403 | Audit contents and findings  |
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|         | <p><b>Auditor Overall Determination:</b> Meets Standard</p>  |
|         | <p><b>Auditor Discussion</b></p> <p>115.403(a)- (f) NJDOC PCS.001.008(page 70) it states: Once the final audit report is received, NJDOC publishes this information on the agency website.</p> <p>BSP has fully implemented all policies, practices and procedures outlined in the PREA standards. The auditor reviewed applicable standards and, through the review of supporting documentation, interviews with staff and inmates and the observation of physical evidence, concluded that this facility fully meets and substantially complies in all material ways with all PREA standards for the relevant review period. The agency has posted all audit reports on its website within ninety days of their completion. The public has access to reporting mechanisms and NJ DOC PREA trends data via the agency's website.</p> <p>Bayside State Prison (BSP) currently meets 45 applicable standards.</p> |

**Appendix: Provision Findings****115.11 (a) Zero tolerance of sexual abuse and sexual harassment; PREA coordinator**

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| Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment? | yes |
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| Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment? | yes |
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**115.11 (b) Zero tolerance of sexual abuse and sexual harassment; PREA coordinator**

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| Has the agency employed or designated an agency-wide PREA Coordinator? | yes |
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| Is the PREA Coordinator position in the upper-level of the agency hierarchy? | yes |
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| Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities? | yes |
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**115.11 (c) Zero tolerance of sexual abuse and sexual harassment; PREA coordinator**

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| If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.) | yes |
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| Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.) | yes |
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**115.12 (a) Contracting with other entities for the confinement of inmates**

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| If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.) | yes |
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**115.12 (b) Contracting with other entities for the confinement of inmates**

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| Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure | yes |
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|                   | that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)   |     |
| <b>115.13 (a)</b> | <b>Supervision and monitoring</b>   |     |
|                   | Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?   | yes |
|                   | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?   | yes |
|                   | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?   | yes |
|                   | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?  | yes |
|                   | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?   | yes |
|                   | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)? | yes |
|                   | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?  | yes |
|                   | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?   | yes |
|                   | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?  | yes |
|                   | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into   | yes |



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|                   | consideration: Any applicable State or local laws, regulations, or standards?   |     |
|                   | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?   | yes |
|                   | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?  | yes |
| <b>115.13 (b)</b> | <b>Supervision and monitoring</b>   |     |
|                   | In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)  | na  |
| <b>115.13 (c)</b> | <b>Supervision and monitoring</b>   |     |
|                   | In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?                     | yes |
|                   | In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?     | yes |
|                   | In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan? | yes |
| <b>115.13 (d)</b> | <b>Supervision and monitoring</b>   |     |
|                   | Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?                                      | yes |
|                   | Is this policy and practice implemented for night shifts as well as day shifts?   | yes |
|                   | Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?                            | yes |

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| <b>115.14 (a)</b> | <b>Youthful inmates</b>   |     |
|                   | Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).) | na  |
| <b>115.14 (b)</b> | <b>Youthful inmates</b>   |     |
|                   | In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)   | na  |
|                   | In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)  | na  |
| <b>115.14 (c)</b> | <b>Youthful inmates</b>   |     |
|                   | Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)   | na  |
|                   | Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)  | na  |
|                   | Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)  | na  |
| <b>115.15 (a)</b> | <b>Limits to cross-gender viewing and searches</b>  |     |
|                   | Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?   | yes |
| <b>115.15 (b)</b> | <b>Limits to cross-gender viewing and searches</b>  |     |
|                   | Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)   | na  |
|                   | Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the  | na  |

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|                   | facility does not have female inmates.)   |     |
| <b>115.15 (c)</b> | <b>Limits to cross-gender viewing and searches</b>  |     |
|                   | Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?  | yes |
|                   | Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?   | na  |
| <b>115.15 (d)</b> | <b>Limits to cross-gender viewing and searches</b>  |     |
|                   | Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?   | yes |
|                   | Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks? | yes |
|                   | Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?   | yes |
| <b>115.15 (e)</b> | <b>Limits to cross-gender viewing and searches</b>  |     |
|                   | Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?  | yes |
|                   | If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?          | yes |
| <b>115.15 (f)</b> | <b>Limits to cross-gender viewing and searches</b>  |     |
|                   | Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?   | yes |
|                   | Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?   | yes |

| 115.16 (a) | <b>Inmates with disabilities and inmates who are limited English proficient</b>  |     |
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|            | Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing?                           | yes |
|            | Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are blind or have low vision?                          | yes |
|            | Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have intellectual disabilities?                        | yes |
|            | Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have psychiatric disabilities?                         | yes |
|            | Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have speech disabilities?                              | yes |
|            | Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other (if "other," please explain in overall determination notes.) | yes |
|            | Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing?  | yes |
|            | Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?   | yes |
|            | Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication   | yes |

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|                   | with inmates with disabilities including inmates who: Have intellectual disabilities?   |     |
|                   | Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills?   | yes |
|                   | Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: are blind or have low vision?  | yes |
| <b>115.16 (b)</b> | <b>Inmates with disabilities and inmates who are limited English proficient</b>   |     |
|                   | Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?   | yes |
|                   | Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?  | yes |
| <b>115.16 (c)</b> | <b>Inmates with disabilities and inmates who are limited English proficient</b>   |     |
|                   | Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations? | yes |
| <b>115.17 (a)</b> | <b>Hiring and promotion decisions</b>   |     |
|                   | Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?   | yes |
|                   | Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who 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?                                | yes |
|                   | Does the agency prohibit the hiring or promotion of anyone who  | yes |

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|  | may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?   |     |
|  | Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?   | yes |
|  | Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who 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?  | yes |
|  | Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?   | yes |
| <b>115.17 (b) Hiring and promotion decisions</b> |  |     |
|  | Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?  | yes |
|  | Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?   | yes |
| <b>115.17 (c) Hiring and promotion decisions</b> |  |     |
|  | Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?  | yes |
|  | Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse? | yes |
| <b>115.17 (d) Hiring and promotion decisions</b> |  |     |
|  | Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?   | yes |

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| <b>115.17 (e)</b> | <b>Hiring and promotion decisions</b>   |     |
|                   | Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?  | yes |
| <b>115.17 (f)</b> | <b>Hiring and promotion decisions</b>   |     |
|                   | Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?  | yes |
|                   | Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?   | yes |
|                   | Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?  | yes |
| <b>115.17 (g)</b> | <b>Hiring and promotion decisions</b>   |     |
|                   | Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?   | yes |
| <b>115.17 (h)</b> | <b>Hiring and promotion decisions</b>   |     |
|                   | Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)  | yes |
| <b>115.18 (a)</b> | <b>Upgrades to facilities and technologies</b>  |     |
|                   | If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.) | na  |
| <b>115.18 (b)</b> | <b>Upgrades to facilities and technologies</b>  |     |

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|                   | If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)                  | yes |
| <b>115.21 (a)</b> | <b>Evidence protocol and forensic medical examinations</b>   |     |
|                   | If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)  | yes |
| <b>115.21 (b)</b> | <b>Evidence protocol and forensic medical examinations</b>   |     |
|                   | Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)  | yes |
|                   | Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.) | yes |
| <b>115.21 (c)</b> | <b>Evidence protocol and forensic medical examinations</b>   |     |
|                   | Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?  | yes |
|                   | Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?   | yes |
|                   | If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?   | yes |



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|                   | Has the agency documented its efforts to provide SAFEs or SANEs?  | yes |
| <b>115.21 (d)</b> | <b>Evidence protocol and forensic medical examinations</b>  |     |
|                   | Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?  | yes |
|                   | If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)   | yes |
|                   | Has the agency documented its efforts to secure services from rape crisis centers?  | yes |
| <b>115.21 (e)</b> | <b>Evidence protocol and forensic medical examinations</b>  |     |
|                   | As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?   | yes |
|                   | As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?  | yes |
| <b>115.21 (f)</b> | <b>Evidence protocol and forensic medical examinations</b>  |     |
|                   | If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)  | na  |
| <b>115.21 (h)</b> | <b>Evidence protocol and forensic medical examinations</b>  |     |
|                   | If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.) | yes |
| <b>115.22 (a)</b> | <b>Policies to ensure referrals of allegations for investigations</b>   |     |

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|  | Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?   | yes |
|  | Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?  | yes |
| <b>115.22 (b) Policies to ensure referrals of allegations for investigations</b> |  |     |
|  | Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior? | yes |
|  | Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?  | yes |
|  | Does the agency document all such referrals?   | yes |
| <b>115.22 (c) Policies to ensure referrals of allegations for investigations</b> |  |     |
|  | If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)                                 | na  |
| <b>115.31 (a) Employee training</b>  |  |     |
|  | Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?   | yes |
|  | Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?   | yes |
|  | Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment?  | yes |
|  | Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?  | yes |
|  | Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?  | yes |

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|                   | Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?   | yes |
|                   | Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?   | yes |
|                   | Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?  | yes |
|                   | Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates? | yes |
|                   | Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?   | yes |
| <b>115.31 (b)</b> | <b>Employee training</b>   |     |
|                   | Is such training tailored to the gender of the inmates at the employee's facility?   | yes |
|                   | Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?  | yes |
| <b>115.31 (c)</b> | <b>Employee training</b>   |     |
|                   | Have all current employees who may have contact with inmates received such training?   | yes |
|                   | Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?                                   | yes |
|                   | In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?   | yes |
| <b>115.31 (d)</b> | <b>Employee training</b>   |     |
|                   | Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?  | yes |
| <b>115.32 (a)</b> | <b>Volunteer and contractor training</b>   |     |

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|                   | Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?   | yes |
| <b>115.32 (b)</b> | <b>Volunteer and contractor training</b>  |     |
|                   | Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)? | yes |
| <b>115.32 (c)</b> | <b>Volunteer and contractor training</b>  |     |
|                   | Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?   | yes |
| <b>115.33 (a)</b> | <b>Inmate education</b>   |     |
|                   | During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?   | yes |
|                   | During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?  | yes |
| <b>115.33 (b)</b> | <b>Inmate education</b>   |     |
|                   | Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?  | yes |
|                   | Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?  | yes |
|                   | Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?  | yes |
| <b>115.33 (c)</b> | <b>Inmate education</b>   |     |
|                   | Have all inmates received the comprehensive education referenced in 115.33(b)?  | yes |

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|                   | Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?  | yes |
| <b>115.33 (d)</b> | <b>Inmate education</b>   |     |
|                   | Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?   | yes |
|                   | Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?   | yes |
|                   | Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?  | yes |
|                   | Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?   | yes |
|                   | Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?  | yes |
| <b>115.33 (e)</b> | <b>Inmate education</b>   |     |
|                   | Does the agency maintain documentation of inmate participation in these education sessions?   | yes |
| <b>115.33 (f)</b> | <b>Inmate education</b>   |     |
|                   | In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats?   | yes |
| <b>115.34 (a)</b> | <b>Specialized training: Investigations</b>   |     |
|                   | In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) | yes |
| <b>115.34 (b)</b> | <b>Specialized training: Investigations</b>   |     |
|                   | Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)  | yes |
|                   | Does this specialized training include proper use of Miranda and  | yes |

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|                   | Garrrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)  |     |
|                   | Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)  | yes |
|                   | Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)   | yes |
| <b>115.34 (c)</b> | <b>Specialized training: Investigations</b>   |     |
|                   | Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)  | yes |
| <b>115.35 (a)</b> | <b>Specialized training: Medical and mental health care</b>   |     |
|                   | Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)                           | yes |
|                   | Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)  | yes |
|                   | Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.) | yes |
|                   | Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or   | yes |

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|                   | suspicious of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)   |     |
| <b>115.35 (b)</b> | <b>Specialized training: Medical and mental health care</b>  |     |
|                   | If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.)   | na  |
| <b>115.35 (c)</b> | <b>Specialized training: Medical and mental health care</b>  |     |
|                   | Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.) | yes |
| <b>115.35 (d)</b> | <b>Specialized training: Medical and mental health care</b>  |     |
|                   | Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)   | yes |
|                   | Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)  | yes |
| <b>115.41 (a)</b> | <b>Screening for risk of victimization and abusiveness</b>   |     |
|                   | Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?   | yes |
|                   | Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?  | yes |
| <b>115.41 (b)</b> | <b>Screening for risk of victimization and abusiveness</b>   |     |
|                   | Do intake screenings ordinarily take place within 72 hours of arrival at the facility?   | yes |
| <b>115.41 (c)</b> | <b>Screening for risk of victimization and abusiveness</b>   |     |
|                   | Are all PREA screening assessments conducted using an objective  | yes |

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|                   | screening instrument?  |     |
| <b>115.41 (d)</b> | <b>Screening for risk of victimization and abusiveness</b>   |     |
|                   | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?   | yes |
|                   | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?  | yes |
|                   | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?   | yes |
|                   | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?  | yes |
|                   | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?  | yes |
|                   | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?  | yes |
|                   | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)? | yes |
|                   | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?   | yes |
|                   | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?   | yes |
|                   | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10)  | yes |



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|                   | Whether the inmate is detained solely for civil immigration purposes?   |     |
| <b>115.41 (e)</b> | <b>Screening for risk of victimization and abusiveness</b>  |     |
|                   | In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?   | yes |
|                   | In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?   | yes |
|                   | In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?  | yes |
| <b>115.41 (f)</b> | <b>Screening for risk of victimization and abusiveness</b>  |     |
|                   | Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening? | yes |
| <b>115.41 (g)</b> | <b>Screening for risk of victimization and abusiveness</b>  |     |
|                   | Does the facility reassess an inmate's risk level when warranted due to a referral?   | yes |
|                   | Does the facility reassess an inmate's risk level when warranted due to a request?  | yes |
|                   | Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?  | yes |
|                   | Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?   | yes |
| <b>115.41 (h)</b> | <b>Screening for risk of victimization and abusiveness</b>  |     |
|                   | Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?   | yes |
| <b>115.41 (i)</b> | <b>Screening for risk of victimization and abusiveness</b>  |     |
|                   | Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive  | yes |

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|                   | information is not exploited to the inmate's detriment by staff or other inmates?  |     |
| <b>115.42 (a)</b> | <b>Use of screening information</b>  |     |
|                   | Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?   | yes |
|                   | Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?   | yes |
|                   | Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?  | yes |
|                   | Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?   | yes |
|                   | Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?   | yes |
| <b>115.42 (b)</b> | <b>Use of screening information</b>  |     |
|                   | Does the agency make individualized determinations about how to ensure the safety of each inmate?  | yes |
| <b>115.42 (c)</b> | <b>Use of screening information</b>  |     |
|                   | When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)? | yes |
|                   | When making housing or other program assignments for transgender or intersex inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would  | yes |

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|                   | present management or security problems?   |     |
| <b>115.42 (d)</b> | <b>Use of screening information</b>  |     |
|                   | Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?   | yes |
| <b>115.42 (e)</b> | <b>Use of screening information</b>  |     |
|                   | Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?  | yes |
| <b>115.42 (f)</b> | <b>Use of screening information</b>  |     |
|                   | Are transgender and intersex inmates given the opportunity to shower separately from other inmates?  | yes |
| <b>115.42 (g)</b> | <b>Use of screening information</b>  |     |
|                   | Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.) | yes |
|                   | Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)                | yes |
|                   | Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing  | yes |

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|                   | solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)  |     |
| <b>115.43 (a)</b> | <b>Protective Custody</b>   |     |
|                   | Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers? | yes |
|                   | If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?  | yes |
| <b>115.43 (b)</b> | <b>Protective Custody</b>   |     |
|                   | Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?  | yes |
|                   | Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?  | yes |
|                   | Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?   | yes |
|                   | Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?  | yes |
|                   | If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)                                      | yes |
|                   | If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)  | yes |
|                   | If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)  | yes |
| <b>115.43 (c)</b> | <b>Protective Custody</b>   |     |

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|                                      | Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?  | yes |
|                                      | Does such an assignment not ordinarily exceed a period of 30 days?  | yes |
| <b>115.43 (d) Protective Custody</b> |   |     |
|                                      | If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?  | yes |
|                                      | If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?   | yes |
| <b>115.43 (e) Protective Custody</b> |   |     |
|                                      | In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS? | yes |
| <b>115.51 (a) Inmate reporting</b>   |   |     |
|                                      | Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?   | yes |
|                                      | Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?   | yes |
|                                      | Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?   | yes |
| <b>115.51 (b) Inmate reporting</b>   |   |     |
|                                      | Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?   | yes |
|                                      | Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?  | yes |
|                                      | Does that private entity or office allow the inmate to remain   | yes |

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|                   | anonymous upon request?   |     |
|                   | Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)   | na  |
| <b>115.51 (c)</b> | <b>Inmate reporting</b>   |     |
|                   | Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?   | yes |
|                   | Does staff promptly document any verbal reports of sexual abuse and sexual harassment?  | yes |
| <b>115.51 (d)</b> | <b>Inmate reporting</b>   |     |
|                   | Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?   | yes |
| <b>115.52 (a)</b> | <b>Exhaustion of administrative remedies</b>  |     |
|                   | Is the agency exempt from this standard?<br>NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse. | no  |
| <b>115.52 (b)</b> | <b>Exhaustion of administrative remedies</b>  |     |
|                   | Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)   | yes |
|                   | Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)  | yes |
| <b>115.52 (c)</b> | <b>Exhaustion of administrative remedies</b>  |     |
|                   | Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from   | yes |

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|                   | this standard.)  |     |
|                   | Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)   | yes |
| <b>115.52 (d)</b> | <b>Exhaustion of administrative remedies</b>   |     |
|                   | Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)   | yes |
|                   | If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)  | yes |
|                   | At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)  | yes |
| <b>115.52 (e)</b> | <b>Exhaustion of administrative remedies</b>   |     |
|                   | Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)  | yes |
|                   | Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.) | yes |
|                   | If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)   | yes |
| <b>115.52 (f)</b> | <b>Exhaustion of administrative remedies</b>   |     |

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|                   | Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)   | yes |
|                   | After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.). | yes |
|                   | After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)  | yes |
|                   | After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)   | yes |
|                   | Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)   | yes |
|                   | Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)   | yes |
|                   | Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)  | yes |
| <b>115.52 (g)</b> | <b>Exhaustion of administrative remedies</b>  |     |
|                   | If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)  | yes |
| <b>115.53 (a)</b> | <b>Inmate access to outside confidential support services</b>   |     |
|                   | Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?   | yes |
|                   | Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers,   | na  |



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|                   | including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)  |     |
|                   | Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?   | yes |
| <b>115.53 (b)</b> | <b>Inmate access to outside confidential support services</b>  |     |
|                   | Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?               | yes |
| <b>115.53 (c)</b> | <b>Inmate access to outside confidential support services</b>  |     |
|                   | Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?                         | yes |
|                   | Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?   | yes |
| <b>115.54 (a)</b> | <b>Third-party reporting</b>   |     |
|                   | Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?  | yes |
|                   | Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?  | yes |
| <b>115.61 (a)</b> | <b>Staff and agency reporting duties</b>   |     |
|                   | Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency? | yes |
|                   | Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?                    | yes |
|                   | Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual                  | yes |

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|                   | abuse or sexual harassment or retaliation?   |     |
| <b>115.61 (b)</b> | <b>Staff and agency reporting duties</b>   |     |
|                   | Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions? | yes |
| <b>115.61 (c)</b> | <b>Staff and agency reporting duties</b>   |     |
|                   | Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?   | yes |
|                   | Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?  | yes |
| <b>115.61 (d)</b> | <b>Staff and agency reporting duties</b>   |     |
|                   | If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?   | yes |
| <b>115.61 (e)</b> | <b>Staff and agency reporting duties</b>   |     |
|                   | Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?   | yes |
| <b>115.62 (a)</b> | <b>Agency protection duties</b>  |     |
|                   | When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?  | yes |
| <b>115.63 (a)</b> | <b>Reporting to other confinement facilities</b>   |     |
|                   | Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?   | yes |
| <b>115.63 (b)</b> | <b>Reporting to other confinement facilities</b>   |     |
|                   | Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?  | yes |

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| <b>115.63 (c)</b> | <b>Reporting to other confinement facilities</b>  |     |
|                   | Does the agency document that it has provided such notification?  | yes |
| <b>115.63 (d)</b> | <b>Reporting to other confinement facilities</b>  |     |
|                   | Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?  | yes |
| <b>115.64 (a)</b> | <b>Staff first responder duties</b>   |     |
|                   | Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?   | yes |
|                   | Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?  | yes |
|                   | Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?     | yes |
|                   | Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence? | yes |
| <b>115.64 (b)</b> | <b>Staff first responder duties</b>   |     |
|                   | If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?  | yes |
| <b>115.65 (a)</b> | <b>Coordinated response</b>   |     |
|                   | Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in  | yes |

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|                   | response to an incident of sexual abuse?  |     |
| <b>115.66 (a)</b> | <b>Preservation of ability to protect inmates from contact with abusers</b>   |     |
|                   | Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted? | yes |
| <b>115.67 (a)</b> | <b>Agency protection against retaliation</b>  |     |
|                   | Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?  | yes |
|                   | Has the agency designated which staff members or departments are charged with monitoring retaliation?   | yes |
| <b>115.67 (b)</b> | <b>Agency protection against retaliation</b>  |     |
|                   | Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?   | yes |
| <b>115.67 (c)</b> | <b>Agency protection against retaliation</b>  |     |
|                   | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?  | yes |
|                   | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?   | yes |
|                   | Except in instances where the agency determines that a report of  | yes |

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|                   | sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?  |     |
|                   | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?       | yes |
|                   | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?                | yes |
|                   | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?                | yes |
|                   | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff? | yes |
|                   | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?                | yes |
|                   | Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?   | yes |
| <b>115.67 (d)</b> | <b>Agency protection against retaliation</b>   |     |
|                   | In the case of inmates, does such monitoring also include periodic status checks?  | yes |
| <b>115.67 (e)</b> | <b>Agency protection against retaliation</b>   |     |
|                   | If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?                              | yes |
| <b>115.68 (a)</b> | <b>Post-allegation protective custody</b>  |     |
|                   | Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?  | yes |
| <b>115.71 (a)</b> | <b>Criminal and administrative agency investigations</b>   |     |
|                   | When the agency conducts its own investigations into allegations   | yes |

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|                   | of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)                   |     |
|                   | Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).) | yes |
| <b>115.71 (b)</b> | <b>Criminal and administrative agency investigations</b>  |     |
|                   | Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?   | yes |
| <b>115.71 (c)</b> | <b>Criminal and administrative agency investigations</b>  |     |
|                   | Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?  | yes |
|                   | Do investigators interview alleged victims, suspected perpetrators, and witnesses?  | yes |
|                   | Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?   | yes |
| <b>115.71 (d)</b> | <b>Criminal and administrative agency investigations</b>  |     |
|                   | When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?            | yes |
| <b>115.71 (e)</b> | <b>Criminal and administrative agency investigations</b>  |     |
|                   | Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?  | yes |
|                   | Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?  | yes |
| <b>115.71 (f)</b> | <b>Criminal and administrative agency investigations</b>  |     |
|                   | Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?  | yes |

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|                   | Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?  | yes |
| <b>115.71 (g)</b> | <b>Criminal and administrative agency investigations</b>   |     |
|                   | Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?   | yes |
| <b>115.71 (h)</b> | <b>Criminal and administrative agency investigations</b>   |     |
|                   | Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?   | yes |
| <b>115.71 (i)</b> | <b>Criminal and administrative agency investigations</b>   |     |
|                   | Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?   | yes |
| <b>115.71 (j)</b> | <b>Criminal and administrative agency investigations</b>   |     |
|                   | Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?   | yes |
| <b>115.71 (l)</b> | <b>Criminal and administrative agency investigations</b>   |     |
|                   | When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).) | na  |
| <b>115.72 (a)</b> | <b>Evidentiary standard for administrative investigations</b>  |     |
|                   | Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?   | yes |
| <b>115.73 (a)</b> | <b>Reporting to inmates</b>  |     |
|                   | Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?  | yes |

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| <b>115.73 (b)</b> | <b>Reporting to inmates</b>  |     |
|                   | If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)  | na  |
| <b>115.73 (c)</b> | <b>Reporting to inmates</b>  |     |
|                   | Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?  | yes |
|                   | Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?   | yes |
|                   | Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?      | yes |
|                   | Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility? | yes |
| <b>115.73 (d)</b> | <b>Reporting to inmates</b>  |     |
|                   | Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?  | yes |
|                   | Following an inmate's allegation that he or she has been sexually  | yes |



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|                   | abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?  |     |
| <b>115.73 (e)</b> | <b>Reporting to inmates</b>   |     |
|                   | Does the agency document all such notifications or attempted notifications?   | yes |
| <b>115.76 (a)</b> | <b>Disciplinary sanctions for staff</b>   |     |
|                   | Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?  | yes |
| <b>115.76 (b)</b> | <b>Disciplinary sanctions for staff</b>   |     |
|                   | Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?  | yes |
| <b>115.76 (c)</b> | <b>Disciplinary sanctions for staff</b>   |     |
|                   | Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories? | yes |
| <b>115.76 (d)</b> | <b>Disciplinary sanctions for staff</b>   |     |
|                   | Are 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, reported to: Law enforcement agencies(unless the activity was clearly not criminal)?  | yes |
|                   | Are 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, reported to: Relevant licensing bodies?   | yes |
| <b>115.77 (a)</b> | <b>Corrective action for contractors and volunteers</b>   |     |
|                   | Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?  | yes |
|                   | Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?  | yes |

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|                   | Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?  | yes |
| <b>115.77 (b)</b> | <b>Corrective action for contractors and volunteers</b>   |     |
|                   | In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?  | yes |
| <b>115.78 (a)</b> | <b>Disciplinary sanctions for inmates</b>   |     |
|                   | Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?   | yes |
| <b>115.78 (b)</b> | <b>Disciplinary sanctions for inmates</b>   |     |
|                   | Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?  | yes |
| <b>115.78 (c)</b> | <b>Disciplinary sanctions for inmates</b>   |     |
|                   | When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?  | yes |
| <b>115.78 (d)</b> | <b>Disciplinary sanctions for inmates</b>   |     |
|                   | If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits? | yes |
| <b>115.78 (e)</b> | <b>Disciplinary sanctions for inmates</b>   |     |
|                   | Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?   | yes |
| <b>115.78 (f)</b> | <b>Disciplinary sanctions for inmates</b>   |     |
|                   | For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish   | yes |

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|                   | evidence sufficient to substantiate the allegation?   |     |
| <b>115.78 (g)</b> | <b>Disciplinary sanctions for inmates</b>   |     |
|                   | If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)  | yes |
| <b>115.81 (a)</b> | <b>Medical and mental health screenings; history of sexual abuse</b>  |     |
|                   | If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).              | yes |
| <b>115.81 (b)</b> | <b>Medical and mental health screenings; history of sexual abuse</b>  |     |
|                   | If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)                            | yes |
| <b>115.81 (c)</b> | <b>Medical and mental health screenings; history of sexual abuse</b>  |     |
|                   | If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).                  | yes |
| <b>115.81 (d)</b> | <b>Medical and mental health screenings; history of sexual abuse</b>  |     |
|                   | Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law? | yes |
| <b>115.81 (e)</b> | <b>Medical and mental health screenings; history of sexual abuse</b>  |     |
|                   | Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior  | yes |

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|                   | sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?  |     |
| <b>115.82 (a)</b> | <b>Access to emergency medical and mental health services</b>   |     |
|                   | Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment? | yes |
| <b>115.82 (b)</b> | <b>Access to emergency medical and mental health services</b>   |     |
|                   | If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?   | yes |
|                   | Do security staff first responders immediately notify the appropriate medical and mental health practitioners?  | yes |
| <b>115.82 (c)</b> | <b>Access to emergency medical and mental health services</b>   |     |
|                   | Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?          | yes |
| <b>115.82 (d)</b> | <b>Access to emergency medical and mental health services</b>   |     |
|                   | Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?  | yes |
| <b>115.83 (a)</b> | <b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>  |     |
|                   | Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?  | yes |
| <b>115.83 (b)</b> | <b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>  |     |
|                   | Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?      | yes |
| <b>115.83 (c)</b> | <b>Ongoing medical and mental health care for sexual abuse</b>  |     |

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|                   | <b>victims and abusers</b>  |     |
|                   | Does the facility provide such victims with medical and mental health services consistent with the community level of care?   | yes |
| <b>115.83 (d)</b> | <b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>  |     |
|                   | Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)   | na  |
| <b>115.83 (e)</b> | <b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>  |     |
|                   | If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.) | na  |
| <b>115.83 (f)</b> | <b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>  |     |
|                   | Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?   | yes |
| <b>115.83 (g)</b> | <b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>  |     |
|                   | Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?  | yes |
| <b>115.83 (h)</b> | <b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>  |     |
|                   | If the facility is a prison, does it 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? (NA if the facility is a jail.)   | yes |

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| <b>115.86 (a)</b> | <b>Sexual abuse incident reviews</b>  |     |
|                   | Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?   | yes |
| <b>115.86 (b)</b> | <b>Sexual abuse incident reviews</b>  |     |
|                   | Does such review ordinarily occur within 30 days of the conclusion of the investigation?  | yes |
| <b>115.86 (c)</b> | <b>Sexual abuse incident reviews</b>  |     |
|                   | Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?   | yes |
| <b>115.86 (d)</b> | <b>Sexual abuse incident reviews</b>  |     |
|                   | Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?   | yes |
|                   | Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility? | yes |
|                   | Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?  | yes |
|                   | Does the review team: Assess the adequacy of staffing levels in that area during different shifts?  | yes |
|                   | Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?  | yes |
|                   | Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?     | yes |
| <b>115.86 (e)</b> | <b>Sexual abuse incident reviews</b>  |     |
|                   | Does the facility implement the recommendations for improvement, or document its reasons for not doing so?  | yes |

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| <b>115.87 (a)</b> | <b>Data collection</b>  |     |
|                   | Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?  | yes |
| <b>115.87 (b)</b> | <b>Data collection</b>  |     |
|                   | Does the agency aggregate the incident-based sexual abuse data at least annually?   | yes |
| <b>115.87 (c)</b> | <b>Data collection</b>  |     |
|                   | Does the incident-based data 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?  | yes |
| <b>115.87 (d)</b> | <b>Data collection</b>  |     |
|                   | Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?  | yes |
| <b>115.87 (e)</b> | <b>Data collection</b>  |     |
|                   | Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)  | yes |
| <b>115.87 (f)</b> | <b>Data collection</b>  |     |
|                   | Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)  | yes |
| <b>115.88 (a)</b> | <b>Data review for corrective action</b>  |     |
|                   | Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?                    | yes |
|                   | Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis? | yes |
|                   | Does the agency review data collected and aggregated pursuant   | yes |

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|                    | to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole? |     |
| <b>115.88 (b)</b>  | <b>Data review for corrective action</b>   |     |
|                    | Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?  | yes |
| <b>115.88 (c)</b>  | <b>Data review for corrective action</b>   |     |
|                    | Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?   | yes |
| <b>115.88 (d)</b>  | <b>Data review for corrective action</b>   |     |
|                    | Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?  | yes |
| <b>115.89 (a)</b>  | <b>Data storage, publication, and destruction</b>  |     |
|                    | Does the agency ensure that data collected pursuant to § 115.87 are securely retained?   | yes |
| <b>115.89 (b)</b>  | <b>Data storage, publication, and destruction</b>  |     |
|                    | Does the agency 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 through its website or, if it does not have one, through other means?                      | yes |
| <b>115.89 (c)</b>  | <b>Data storage, publication, and destruction</b>  |     |
|                    | Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?   | yes |
| <b>115.89 (d)</b>  | <b>Data storage, publication, and destruction</b>  |     |
|                    | Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?  | yes |
| <b>115.401 (a)</b> | <b>Frequency and scope of audits</b>   |     |



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|                    | During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)                        | yes |
| <b>115.401 (b)</b> | <b>Frequency and scope of audits</b>   |     |
|                    | Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)  | no  |
|                    | If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)      | no  |
|                    | If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.) | yes |
| <b>115.401 (h)</b> | <b>Frequency and scope of audits</b>   |     |
|                    | Did the auditor have access to, and the ability to observe, all areas of the audited facility?   | yes |
| <b>115.401 (i)</b> | <b>Frequency and scope of audits</b>   |     |
|                    | Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?   | yes |
| <b>115.401 (m)</b> | <b>Frequency and scope of audits</b>   |     |
|                    | Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?  | yes |
| <b>115.401 (n)</b> | <b>Frequency and scope of audits</b>   |     |
|                    | Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?  | yes |
| <b>115.403</b>     | <b>Audit contents and findings</b>   |     |

| (f) |   |
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|     | <div data-bbox="320 185 1273 555"> <p>The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)</p> </div> <div data-bbox="1302 185 1353 219">yes</div> |