

# PREA Facility Audit Report: Final

**Name of Facility:** Massachusetts Bay Transportation Authority Police Department

**Facility Type:** Lockups

**Date Interim Report Submitted:** 03/02/2019

**Date Final Report Submitted:** 09/29/2019

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input checked="" type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input checked="" type="checkbox"/>
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.	<input checked="" type="checkbox"/>
<b>Auditor Full Name as Signed:</b> Ginny Morrison	<b>Date of Signature:</b> 09/29/2019

AUDITOR INFORMATION	
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<b>Telephone number:</b>	
<b>Start Date of On-Site Audit:</b>	2018-12-18
<b>End Date of On-Site Audit:</b>	2019-01-04

<b>FACILITY INFORMATION</b>	
<b>Facility name:</b>	Massachusetts Bay Transportation Authority Police Department
<b>Facility physical address:</b>	240 Southampton St, Boston, Massachusetts - 02118
<b>Facility Phone</b>	617-222-1000
<b>Facility mailing address:</b>	240 Southampton St, Boston, Massachusetts - 02118

<b>Primary Contact</b>	
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<b>Facility Characteristics</b>	
<b>Designed facility capacity:</b>	12
<b>Current population of facility:</b>	0
<b>Average daily population for the past 12 months:</b>	
<b>Has the facility been over capacity at any point in the past 12 months?</b>	No
<b>Which population(s) does the facility hold?</b>	
<b>Age range of population:</b>	
<b>Facility security levels/detainee custody levels:</b>	maximum
<b>Does the facility hold juveniles or youthful detainees?</b>	No
<b>Number of staff currently employed at the facility who may have contact with detainees:</b>	
<b>Number of individual contractors who have contact with detainees, currently authorized to enter the facility:</b>	
<b>Number of volunteers who have contact with detainees, currently authorized to enter the facility:</b>	

<b>AGENCY INFORMATION</b>	
<b>Name of agency:</b>	Massachusetts Bay Transportation Authority Police Department
<b>Governing authority or parent agency (if applicable):</b>	
<b>Physical Address:</b>	240 Southampton St, Boston, Massachusetts - 02118
<b>Mailing Address:</b>	
<b>Telephone number:</b>	

Agency Chief Executive Officer Information:	
<b>Name:</b>	
<b>Email Address:</b>	
<b>Telephone Number:</b>	

Agency-Wide PREA Coordinator Information			
<b>Name:</b>	Annmarie Moreno	<b>Email Address:</b>	amoreno@mbta.com

## AUDIT FINDINGS

### **Narrative:**

The auditor's description of the audit methodology should include a detailed description of the following processes during the pre-audit, on-site audit, and post-audit phases: documents and files reviewed, discussions and types of interviews conducted, number of days spent on-site, observations made during the site-review, and a detailed description of any follow-up work conducted during the post-audit phase. The narrative should describe the techniques the auditor used to sample documentation and select interviewees, and the auditor's process for the site review.

This audit covers the sole lockup facility of the Massachusetts Bay Transportation Authority Transit Police ("MBTA Police"). The agency headquarters and the lockup, which does not have a separate name, are located at 240 Southampton Street, Boston, Massachusetts. This is the agency's first PREA audit and staff indicate they have never received a PREA complaint.

The audit was solely conducted by an independent auditor, Ginny Morrison, who is certified to conduct PREA audits in adult and juvenile lockups, jails, prisons, and community confinement settings. Her address is P.O. Box 413, Leeds, Massachusetts 01053.

In the Pre-Audit period, MBTA Police initially contacted the auditor, using the PREA Resource Center Contact Auditor Form, on February 5, 2018. The auditor provided the relevant PREA Standards, her credentials, a narrative briefing on the audit process, the Pre-Audit Questionnaire, and a 15-page checklist of documents that would be expected in the audit process.

After periodic discussion, MBTA Police retained the services of the auditor by a contract that was effective September 3, 2018. Subsequently, the auditor and MBTA Police representatives maintained regular contact. By telephone conference, the auditor, PREA Coordinator, and PREA Manager conducted a kickoff meeting, followed by another six telephone conferences and 14 email exchanges. In them, the auditor and agency representatives discussed the nature, content, and process of audits; forms of documentation; activities to be undertaken before and during the onsite review; the auditor's philosophy; the numbers and types of staff and prisoners to be interviewed; the requirement for the auditor to have unimpeded access to the facility, documents, and staff; and the fact that PREA audits are practice-based/performance-based. Staff and the auditor discussed the corrective action phase, including its length; that corrective action is the norm in the vast majority of audits; that it is an opportunity for the agency to bring various activities into, or closer to, compliance; and that it can be a collaborative process with the auditor. During the Pre-Audit period, the auditor also identified resources for PREA training and other material for the agency's consideration, as well as sources for standards questions. At the agency's request, the auditor sought and conveyed interpretation guidance from the PREA Resource Center on the applicability of Standard 115.141, Screening, to this facility.

Six weeks prior to the first site visit, the auditor provided posters in English and Spanish--the languages most commonly spoken by the facility's detained population--announcing the upcoming onsite audit and inviting correspondence to the auditor; the agency provided evidence of posting those materials the same day in 13 locations accessible to prisoners and/or staff. If the facility conveys prisoner mail to the auditor, the agency is required to process that mail confidentially to the same extent as it handles prisoners' legal mail. This facility does not permit prisoners to send or receive mail of any kind, so it neither interfered with, nor protected, confidentiality of mail per se. This did not pose an obstacle to prisoners communicating with the auditor, as prisoners are almost always released the same day or the

following day. The auditor did not receive written correspondence from prisoners or staff.

Before the onsite review, the agency provided extensive sets of documents and information responsive to the Pre-Audit Questionnaire. Agency staff initiated the use of the PREA Resource Center's Online Audit System, a confidential, secure system for agencies and auditors to share information; staff uploaded documents and entered responses to the questionnaire, some of which directly populates this report. It is the auditor's understanding that the agency initiated use of this system on November 26, 2018 and continued input up until the first site visit on December 18, 2018; the auditor began reviewing the Online Audit System information on December 7, 2018.

The auditor, PREA Manager, and PREA Coordinator discussed a number of the documents and responses ahead of the visit, clarifying their meaning and seeking follow-up documentation, which the agency provided. While in some audits, an auditor employs an Issue Log for this process, email was sufficient for this audit and agency staff responded very quickly and in a thorough fashion. Because predictably there would only be 3 prisoners onsite during the audit, the auditor did not request the 6 lists of different types of prisoners (youthful, disabled, limited English proficiency, LGBTI, segregation, isolation) that are often used to identify relevant prisoners to interview within a large population. Further, tracking such individuals would not enhance sexual safety; as will be discussed in this report, practices ensure vulnerable prisoners are never alone with other prisoners, all staff contacts with such prisoners are on camera, and repeat arrests of the same individual seem unlikely so tracking would have limited, if any, benefit in informing future incarcerations. The auditor did request the identities of prisoners who had reported sexual abuse during screening or while locked up onsite and there reportedly were none, so there were no lists of complaints, grievances, incident reports, investigations, or hotline calls to review.

On December 18, 2018 and January 4, 2019, the agency hosted the auditor onsite for a total of 1.5 days. The review included:

Staff interviews: The auditor interviewed all "specialized staff" expected under PREA audit protocols to the extent they are employed at the lockup; some staff and leaders serve in multiple roles and a number of categories in the protocols are not employed for a population of this size. The "specialized staff" interviews were:

Designee of the Agency Head and designee of the Superintendent: interviewed the Deputy Chief of Administration Services

PREA Manager and PREA Coordinator: interviewed

Intermediate or higher level facility staff responsible for conducting and documenting unannounced rounds: interviewed 2 lieutenants

Line staff who supervise youthful inmates: interviewed 5 Booking Officers

Administrative (human resources) staff: interviewed the head of Professional Standards and the Deputy Chief of Administration Services

Investigative staff: interviewed the head of Professional Standards, who is responsible for all PREA administrative and criminal investigations

Staff on the sexual abuse incident review team: interviewed the head of Professional Standards, the Deputy Chief of Administration Services, the PREA Manager, and the PREA Coordinator

First responders: interviewed 2 lieutenants and 5 officers who are sometimes posted as Booking Officers

Intake staff: interviewed 5 officers who are sometimes posted as Booking Officers

As will be described in this report, the following functions do not take place in this facility, and therefore no such staff interviews occurred: education and program staff who work with youthful inmates; medical

and mental health staff; non-medical staff involved in cross-gender strip or visual searches; SAFE and SANE staff; volunteers and contractors who have contact with prisoners; staff who perform screening; staff who supervise inmates in segregated housing; designated staff member charged with monitoring retaliation.

In total, then, the auditor interviewed 11 people who were responsible for the functions of 11 "specialized staff" categories.

The agency employs 256 police officers and supervisors, nearly all of whom work in Patrol Operations and Investigative Services, not the lockup. The only staffing for the lockup facility is one Booking Officer, one Monitor Room Officer, and two Transport Officers, supervised by one Lieutenant -- that is, 5 people - per shift. Reportedly, there are approximately 35 staff who can be assigned to those line staff positions and 8 lieutenant positions were filled at the time of the onsite audit.

While it is typical to request staffing lists from which to select a sample for interviewing, no sampling was necessary in this audit. Rather, the auditor interviewed ALL staff in the lockup facility posts on one shift and additional staff on those posts on an additional shift. This was a total of 5 officers, representing a 14% sample of the relevant work force. The auditor also interviewed the lieutenants on duty on different shifts; these 2 lieutenants represented a 25% sample of lockup supervisors.

Since there are no other staff onsite who have prisoner contact, it was not possible to conduct random staff interviews. While civilian staff are not permitted to have prisoner contact, they may interact with a third party interested in a prisoner, or a prisoner after release, so the auditor interviewed 3 civilian workers in Dispatch, an 18% sample of that work force; this was all but one of the civilians working during the site visits. There are no volunteers or contractors who have contact with prisoners, so no such lists were reviewed and no such interviews took place. The law enforcement and civilian interviews took place at staff's posts; some were in fully confidential settings, some were conducted alongside the PREA Manager, and some were conducted in small groups of staff who perform the same, or overlapping, functions.

Prisoner interviews: The auditor sought to obtain information from prisoners. On the first site visit day, the auditor was onsite more than 10 hours but there was only 1 prisoner incarcerated during that time. Multiple staff encouraged the prisoner to speak with the auditor, but he refused. The auditor returned in January principally for another opportunity to interview prisoners; there were no arrests that day. No prisoners wrote the auditor to offer information.

Physical plant inspection: the auditor's physical plant tour included observations of the receiving garage; booking room; multi-holding cell; prisoner phone area; legal visit and on-unit detective interview room; all areas where prisoners may be escorted; Booking Officer's office; Monitor Room; dispatch and Duty Supervisor's desk; Professional Standards/investigations office; detectives' offices; entrances from parking lots to staff offices; supplies and storage closets; and Command Staff offices. The auditor did not observe a shower room, as showers are not offered to prisoners; a dining room, as prisoners are fed in-cell; medical or mental health treatment units, as all such services are provided in a local hospital and not onsite; grievance collection boxes, as they are not used; nor any area that in other facilities might employ prisoners or provide programming, as these are not offered during the one-day stays at this lockup. The auditor inspected for blind spots.

The auditor observed the 3 separate runs of the single-cell housing where adult men, adult women, and juveniles are housed. The auditor inspected the interiors of these cells, including the toilets, cameras,

and sight lines. The auditor observed the positioning of cameras in most of the areas listed above, as well as the camera monitoring occurring in the Booking, Monitor Room, and lieutenants' posts, and noted the positioning of mirrors in hallways and other common areas. The auditor observed the supervision practices of the Booking Officer and Monitor Room Officer and received descriptions of Booking Officer and lieutenant rounds, but did not observe those. The observed supervision ratio was consistent with that reported leadership.

Document review: most documents were reviewed before and after the site visits, but the auditor took the opportunity onsite to review comprehensive training tracking materials; a 12-session sample of training verifications covering at least 120 trainees (chosen by convenience sample); 6 employee files (chosen by convenience sample); and 3 collective bargaining agreements. The auditor also noted the locations and positioning of PREA-related posters, flyers about reporting to a third-party agency, prisoner handouts, and a file of prisoner acknowledgements of receipt of rights during Intake.

As noted above, the facility is not required to conduct Screening, and Classification does not take place under the circumstances, so there were no screening or classification records to review. Since all leaders said there had been no prisoner reports of sexual abuse or harassment, there were no logs, complaints, grievances, incident reports, first response records, investigation referrals or files, hotline calls, retaliation-related records, incident reviews, or notifications to other agencies to review. No medical or mental health care is provided onsite, so there are no medical or mental health files to review. The auditor received no prisoner correspondence, so no document review was conducted to follow up the content of such complaints.

Processes observed: Booking Officers described to the auditor in detail the Intake and Inmate Education processes, which occur simultaneously. Only 1 Intake (with Inmate Education) occurred during the auditor's 2 site visits, and the auditor was not notified in time to observe it. The PREA Resource Center determined that this facility is not required to conduct Screenings, so observing them was not applicable. The auditor observed the location of the phone prisoners would use to make PREA complaints to an external agency or to request counseling; no phone calls were made during the site visit, so it was not possible to observe them, but the auditor observed features affecting accessibility and confidentiality, staff demonstrated their phone call monitoring method, and staff discussed in detail prisoners' access to make calls and the conditions under which they make them.

Since there are commonly only 3 prisoners onsite, they do not have contact with each other, and the vast majority are released in 1 day or less, there is no Classification process to observe nor records to review. The short time prisoners are in custody is insufficient to conduct a written Grievance process, so none was reviewed; instead, the auditor discussed with staff and supervisors their methods to respond to grievances made orally, and the process of handling citizen complaints, which is the mechanism prisoners would use after release. The staff do not make Cross-Gender Announcements, so none were observed. There were no prisoners requiring interpretation during the site visits, so the auditor did not observe Interpretation, but nearly all staff described in detail the process they use.

Between site visits, and after the final visit, the PREA staff and the auditor continued in contact through one telephone conference and 7 email exchanges. These centered on follow-up questions arising from the visits and document reviews, and producing additional documents. The auditor reviewed policy manual sections regarding PREA requirements and procedures, staff discipline, internal affairs, search, and crime scene procedures; training materials; a sample of prisoner censuses for the year preceding the audit; and Massachusetts laws governing cell size, cell location, and civil servant discipline rights. The



auditor reviewed the MBTA Police website pages containing its statement of zero tolerance and its instructions for making reports to MBTA Police staff and to a third-party reporting agency. The agency does not have previous PREA audits nor any PREA complaints, and therefore there are no audits or abuse and harassment data to be posted.

As a complement to information directly in control of MBTA Police, the auditor also contacted external sources with different PREA-related responsibilities. The auditor reviewed the website for Boston Medical Center, which provides medical services for MBTA Police detainees, and verified the availability of SAFEs or SANEs for any prisoner requiring a forensic examination. The auditor contacted Just Detention International and Boston Area Rape Crisis Center, which reported they had received no complaints about sexual abuse in MBTA Police custody. The auditor also spoke with staff at the Suffolk County District Attorney's office, the third-party agency whose leadership has agreed to receive PREA complaints and convey them to MBTA Police.

During the corrective action period, the facility created extensive documentation changes, which the auditor reviewed as part of email exchanges and phone conversations that occupied portions of 24 days spanning six months. The auditor conducted a verification visit on August 12, 2019, during which she interviewed 9 staff, reviewed documents, and observed operations in the Booking Unit and Monitoring Room. No prisoners were onsite long enough for the auditor to interview. The auditor also made five calls to the Suffolk County District Attorney's office to attempt to verify changes in practice there.

## AUDIT FINDINGS

### Facility Characteristics:

The auditor's description of the audited facility should include details about the facility type, demographics and size of the inmate or resident population, numbers and type of staff positions, configuration and layout of the facility, numbers of housing units, description of housing units including any special housing units, a description of programs and services, including food service and recreation. The auditor should describe how these details are relevant to PREA implementation and compliance.

Massachusetts Bay Transportation Authority Transit Police, and its lockup, are located at 240 Southampton Street, Boston, Massachusetts. MBTA Police is responsible for responding to and investigating crimes and incidents involving MBTA properties and vehicles, and the department has full police powers within the cities and towns in the MBTA service area. This agency has one lockup facility, built in 1997, and its total rated capacity is 12. A sample of daily census reports from 2018 indicates that the average daily population is 3 persons. The actual population on the first day of the audit was 1 adult male; the actual population on the return visit was 0.

The facility is authorized to house adult men, adult women, and juveniles. There are 3 small, single-celled housing units, a separate one for each of these populations; the units have sight and sound separation from each other and are distinguished with permanent signage. Demographic information is not routinely kept, but staff estimate that fewer than 10% of incarcerated persons are women and fewer than 10% are juveniles; ethnicity and language statistics were not readily available. There are no specialized units for segregation, medical patients, or other special populations. There are no dorms and no other units that are not in use.

The agency employs approximately 256 law enforcement officers but the vast majority are in Patrol Operations or Investigative Services and are never posted in the lockup facility. They have prisoner contact only at the initial arrest until the Transport Officers take the arrestee for transport to the lockup. Detectives only have prisoner contact for interviews about the incident, if at all. The lockup is staffed with one Booking Officer, one Monitor Room Officer, and one Duty Supervisor (a lieutenant) on each shift, and two Transport Officers support the unit as well as other operations. There are no volunteers or contractors routinely onsite and policy prohibits them, as well as civilian staff, from having prisoner contact. The facility does conduct its own administrative and criminal investigations.

The entire unit consists of the units described above, two large common areas (one containing a phone for prisoners), and two individual interview rooms. If multiple prisoners are arrested at once, they are maintained in the Multi-Holding Room, handcuffed to poles therein, and supervised by one or more officers. Once an individual is booked, he or she has no further contact with other prisoners. Prisoners are only held until they can be seen in court, which is often less than a day, though they can be held overnight or through the weekend. There are no medical or mental health services onsite; prisoners are taken to an offsite hospital if needed. Food service is in-cell, and showers, programs, and recreation are not offered. Prisoners thus come out of cell only for phone calls, attorney visits, or detective interviews, all of which occur on-unit except some detective interviews take place in another part of the building. All areas described, and hallways and the building's exterior, are under extensive camera coverage. Supervision is conducted by 2 to 3 staff members monitoring the video feeds at all times, as well as the Booking Officer and lieutenant conducting separate rounds. Staff access throughout the building is controlled by electronic badges and movement is recorded.

Each of these features keeps prisoners separate from other prisoners who could otherwise pose a threat. The design and practices limit the possibility of improper staff access to prisoners and the continuous video monitoring and controlled movement very likely serve as a deterrent against potential staff abuse. In sum, the design serves well to provide protection against sexual abuse.

## AUDIT FINDINGS

### Summary of Audit Findings:

The summary should include the number of standards exceeded, number of standards met, and number of standards not met, along with a list of each of the standards in each category. If relevant, provide a summarized description of the corrective action plan, including deficiencies observed, recommendations made, actions taken by the agency, relevant timelines, and methods used by the auditor to reassess compliance. Auditor Note: No standard should be found to be "Not Applicable" or "NA". A compliance determination must be made for each standard.

<b>Number of standards exceeded:</b>	2
<b>Number of standards met:</b>	22
<b>Number of standards not met:</b>	11

The agency exceeds the standard for 115.118.

This standard requires agencies to consider the effect on staff's ability to protect detainees from sexual abuse when the agency designs or acquires a new lockup, or plans an expansion or modification of the lockup or its monitoring technology. MBTA Police meets the standard by virtue of the fact that it has not designed, expanded, or modified its lockup or monitoring technology since PREA went into effect in 2012, and leaders say there are no plans to do so. Moreover, the lockup exceeds the standard by making extensive use of technology that serves PREA purposes well. The auditor observed cameras trained on multiple points of the building exterior; the 2 places of ingress/egress to the Booking Unit, including both sides of those passages; all rooms in the Booking Unit; all cells; and hallways and most other areas on the first floor. In several key locations, multiple cameras capture different angles. A bank of live camera feeds is monitored by 2 to 3 staff continuously; the monitoring screen can observe all holding cells concurrently and has capability to view up to 64 cameras. Additionally, staff movement throughout the facility requires an electronic badge, with restricted access depending on post, and each use of the badge reportedly is tracked.

The agency also exceeds the standard for 115.117.

In a process reportedly in place since 2010, staff conduct an extensive background check, which they say typically takes 40 hours of staff time. It includes speaking with all prior employers and volunteer settings (if the candidate signs a release), friends, family, and local police departments to look into temperament and behavior that is observable but may not be recorded. Online checks include searches of Cop Link, TLO (The Last One, an investigative and risk management program for due diligence, threat assessment, identity verification, fraud prevention, and debt recovery), the National Crime Information Center/Interstate Identification Index ("NCI/III"), Board of Probation, Recent Inquiries, sex offender registries, credit reports, and social media accounts. The applicant must complete a 30-page application, whose contents are investigated, and has a duty to report all law enforcement contacts during the application period and employment. This extensive process, the standards to which applicants and employees are held, and background checks being run for promotional candidates and for all employees every five years, constitute a rigorous process that exceed the requirements of this standard.

After corrective action,

The agency meets the standard with 22 standards: 115.111, 115.112, 115.113, 115.114, 115.115, 115.122, 115.132, 115.134, 115.141, 115.154, 115.161, 115.162, 115.164, 115.165, 115.166, 115.167, 115.172, 115.176, 115.177, 115.178, 115.182, and 115.187.

The agency does not meet standard with 11 standards: 115.116, 115.121, 115.131, 115.151, 115.163, 115.171, 115.186, 115.188, 115.189, 115.401, 115.403.

A summary of the corrective actions recommended after the audit stage follows:

#### 115.111

Corrective action: to come into full compliance, the agency must:

- improve the sections of Chapter 237 that relate to Standards 115.122, 115.154, and 115.167 so that the agency's approach to each is described
- improve the definitions section to specify the actual behaviors that are prohibited as being sexual abuse

#### 115.113

Corrective action: to come into full compliance, the agency must conduct a review of its staffing plan and document whether adjustments are needed to the plan, staffing patterns, video monitoring, or the resources available for staffing. This review must be repeated at least annually.

#### 115.115

Corrective action: to come into full compliance, the agency must:

- maintain some form of tracking, or conduct periodic internal audits of arrest reports, to verify and demonstrate that cross-gender strip and cavity searches have not taken place
- make announcements at the beginning of a shift (if prisoner(s) already in custody), or when a new prisoner is taken into custody, if the Monitor Room Officer or Duty Supervisor is of a gender different from the prisoner(s)

#### 115.116

Corrective action: to reach full compliance, the agency would need to strengthen effective communication methods for prisoners with vision, intellectual, psychiatric, or speech disabilities.

#### 115.117

Corrective action: to reach full compliance, the department must:

- specifically ask new hire candidates, who may have detainee contact, about any history of sexual abuse in an institution, and convictions or civil or administrative adjudications for sexual activity in the community involving force, threat or coercion. (115.117(f))
- when considering promotion for staff members who may have detainee contact, specifically run online checks, and ask the employees, about sexual abuse in the lockup, and convictions or civil or administrative adjudications for sexual activity in the community involving force, threat or coercion (115.117(a), (b), (f))
- institute a system to conduct criminal background checks on employees every five years, or an alternate system to capture similar information (115.117(e))
- provide evidence that the agency will provide information on substantiated allegations of sexual abuse

or sexual harassment involving a former employee upon receiving a request from a potential employer (115.117(h))

#### 115.121

Corrective action: to reach compliance, the agency must

- develop a written uniform evidence protocol and ensure that it is developmentally appropriate for juveniles and consistent with the resources cited in the Standard
- provide training for staff who have prisoner contact in how to detect and respond to victims of sexual abuse

#### 115.122

Corrective action: to reach compliance, the agency must

- have a period for proof of performance, and must document investigations for all PREA-related complaints that are made in that time
- develop a written policy governing the conduct of such investigations

#### 115.131

Corrective action: to reach compliance, the agency must:

- provide all staff with potential prisoner contact training in the topics specified in 115.131(a) - 2-6
- provide annual refresher training going forward
- have trainees verify that they understand the training received

#### 115.132

Corrective action: to reach full compliance, there must be a period of performance in which staff become more versed in the information they are distributing and consistently distribute it, and a track record of acknowledgements further supports that prisoners have been informed.

#### 115.151

Corrective action: to reach full compliance, the agency must:

- increase awareness among staff of the various reporting options
- communicate the requirement for staff to document all PREA complaints received orally
- work with the Suffolk County District Attorney's office to ensure that staff will take and immediately convey PREA-related complaints
- create an alternative for staff to report PREA-related information that is more private than discussing it with an immediate supervisor may be

#### 115.161

Corrective action: to reach full compliance, the agency must ensure that staff are aware they are required to report retaliation against detainees or staff who reported a PREA incident, as well as any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.

#### 115.162

Corrective action: there must be a period of performance during which there may be an opportunity for the agency to act to protect vulnerable prisoners from imminent harm.

115.163

Corrective action: there must be a period of performance during which there may be an opportunity for the agency to make notifications according to the requirements of this standard, and/or to act upon any notifications it receives from other agencies.

115.164

Corrective action: to reach full compliance, the agency must ensure that staff--particularly those with responsibilities in the Booking Unit--are aware of first responder responsibilities.

115.167

Corrective action: to reach full compliance, the agency must:

- expand its policy to describe how it will monitor for potential retaliation, including designating responsibility to key person(s) or department(s), and the protection methods it will provide
- to the extent prisoners or staff report sexual abuse, monitor the conduct and treatment of those who have reported for signs of being subject to retaliation
- if witnesses cooperate with a sexual abuse investigation and express fear of retaliation, provide protection to them, and to those who reported if applicable

115.171

Corrective action: to reach full compliance, the agency must:

- have a period of performance in which the practices in subsections (a) through (j) can be demonstrated.
- ensure that reviewing previous complaints about the accused abuser(s) are part of routine practice
- ensure that, when considering compelled interviews, investigators first confer with prosecutors about the potential effect on prosecution
- establish a policy for retaining PREA-related administrative and criminal investigation reports consistent with the requirements of 115.171(i)

115.176

Corrective action: to reach full compliance:

- the agency must verify that staff will notify licensing bodies, as well as prosecutors, in the event of substantiated sexual abuse
- there must be a period of performance during which there may be an opportunity for the agency to respond to any sexual abuse or harassment allegations consistent with the requirements in Standard

115.176

115.177

Corrective action: to reach full compliance:

- the agency must make a commitment to reporting a contractor to relevant licensing bodies, and to law enforcement unless the activity is not criminal, if the contractor has been found to have engaged in

sexual abuse

- the agency must identify measures it would take to remediate a contractor's behavior if he or she is found to have violated agency sexual abuse or sexual harassment policies

115.186

Corrective action: for the agency to reach full compliance, there must be a period of performance in which there may be an opportunity for the agency to conduct a review of PREA incidents, if they are reported

115.187

Corrective action: to reach full compliance

- the agency must design methods of data collection

- there must be a period of performance in which there may be an opportunity for the agency to collect and analyze data concerning PREA incidents

115.188

Corrective action: to reach full compliance, there must be a period of performance, which may provide an opportunity for the agency to collect and analyze data.

115.189

Corrective action: to reach full compliance, there must be a period of performance, which may provide an opportunity for the agency to collect data and handle it securely.

The agency worked diligently throughout the six-month corrective action period to implement actions to address the above-listed corrective action plans. In so doing, it brought an additional 12 standards into substantial compliance, such that those are now found to meet the standards. The agency made progress on the other corrective actions as well. Staff accomplished this by establishing tracking mechanisms and well-designed data collection methods, establishing or expanding required plans, making adjustments for reasonable accommodations, clarifying positions, improving policies, institutionalizing practices that were new as of the first audit visit, increasing staff PREA-related knowledge, following up with an external office to ensure acceptance of PREA complaints, conducting a staffing analysis, improving cross-gender practices, strengthening personnel practices to prevent the hiring or promotion of persons who have engaged in sexual abuse or harassment, and initiating a system to monitor for and respond to retaliation against PREA complainants or cooperating witnesses.

The auditor verified these changes through reviewing draft and final documents, email discussions, telephone conferences, an additional site inspection, and interviewing all staff with responsibility for prisoners on two shifts, as well as three members of leadership.

The physical layout, video monitoring, and longstanding practices provide strong protection for sexual safety. Prisoners are never alone with other prisoners and there are many methods inhibiting staff and contractors from being able to have unsupervised access to prisoners. While not all of the standards have been met, the agency is fulfilling most of the purposes of the standards.



## Standards

### Auditor Overall Determination Definitions

- Exceeds Standard  
(Substantially exceeds requirement of standard)
- Meets Standard  
(substantial compliance; complies in all material ways with the stand for the relevant review period)
- Does Not Meet Standard  
(requires corrective actions)

### Auditor Discussion Instructions

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.

115.111	<b>Zero tolerance of sexual abuse and sexual harassment</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>MBTA Police Manual Chapter 237, reviewed by the auditor, communicates that the agency policy is zero tolerance toward all forms of sexual abuse and sexual harassment in its lockup facility. According to leadership interviews, the agency does not contract with any other entity to house its prisoners. Thus, Chapter 237 sets the necessary policy for all lockup facilities within MBTA Police control, and satisfies Standard 115.111(a)-1.</p> <p>Chapter 237 incorporates PREA Lockup Standards, nearly all verbatim, including 4 standards concerning sexual abuse/harassment prevention (115.113, 115.114, 115.116, 115.132), 2 standards concerning detection (115.131, 115.141), and 14 standards concerning response to abuse or harassment allegations (115.121, 115.122, 115.134, 115.161, 115.162, 115.163, 115.164, 115.165, 115.166, 115.167, 115.171, 115.172, 115.176, 115.186). In three of these cases, the Standard's requirement to have a plan is quoted, but the agency's actual plan or actions expected of employees are not described. In this way, agency policy falls slightly short of fulfilling 115.111 (a)-2.</p> <p>The agency also has practices in place relevant to four other standards that prevent, detect, or respond to sexual abuse or harassment but are not captured in Chapter 237. These supplement the approach outlined in Chapter 237.</p> <p>Chapter 237 does provide definitions verbatim from the Lockup Standards, defines sexual harassment, and defines to some extent sexual abuse by prisoners and by staff. It omits the PREA definitions of specific sexual behavior prohibited, and would need to include them to be compliant with 115.111(a)-3.</p> <p>At 237-11, policy specifies that sanctions will be employed for staff found to have engaged in sexual harassment or abuse; options for termination and referral for prosecution are included. MBTA Police Manual Chapter 25 details progressive discipline steps applied in all types of discipline, including with allegations of sexual harassment or abuse. The agency is thus in compliance with 115.111 (a)-4.</p> <p>As for 115.111 (a)-5, as noted above, Chapter 237 incorporates Lockup Standards aimed at reducing and preventing sexual abuse and harassment. In the context of a lockup that already has many other practices in place that effectively prevent sexual abuse -- prisoners are rarely in each other's presence and are cuffed and supervised for the few minutes they are together, single-celling, extensive camera coverage in all cells and places where staff could have prisoner contact -- this is sufficient to comply with 115.111 (a)-5.</p> <p>By personal interview, the auditor determined that the agency has designated the Training Unit Supervisor to perform the role of PREA Coordinator. The agency provided its organizational chart, which does reflect the PREA Coordinator position. Based on these two sources, the agency is complying with 115.111 (b)-1 and (b)-3.</p> <p>In answering to the Deputy Chief of Administrative Services, and being well-known throughout</p>

the agency through her training oversight, the PREA Coordinator has a reasonable amount of authority and agency-wide reach. In terms of having sufficient time for the responsibilities, it can be difficult to add PREA oversight to an already full-time position. On the other hand, the agency and the one existing lockup facility are co-located and PREA measures are jointly designed and overseen with the PREA Manager, who is an experienced accreditation manager. With the strong role that training plays in PREA implementation, that aspect integrates well into the PREA Coordinator's pre-existing duties. Additionally, the Deputy Chief and the head of Professional Standards convey a strong culture of holding people to high standards, and appear likely to reinforce the PREA staff in ensuring that investigations and discipline take place when necessary. With these supports and coordination, the PREA Coordinator position has adequate authority and time to accomplish the responsibilities. On balance, the agency is also in compliance with 115.111 (b)-2.

Thus, the agency is nearly in compliance with 115.111, with only a few subsections that do not meet the standard.

Corrective Action: to come into full compliance, the agency must:

- improve the sections of Chapter 237 that relate to Standards 115.122, 115.154, and 115.167 so that the agency's approach to each is described
- improve the definitions section to specify the actual behaviors that are prohibited as being sexual abuse

#### CORRECTIVE ACTION IMPLEMENTATION:

The agency improved its primary PREA-related policy (Chapter 237) to reflect previously missing requirements. The policy now provides confidence that it will ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment, in that it states that expectation; details the responsibilities of first responders and the PREA Investigator, which include ensuring an investigation takes place; and details the expected steps in the required investigation. These policy sections satisfactorily cover Standard 115.122.

Section 18.0 of Chapter 237 was revised to capture at least five ways in which third parties may convey PREA-related reports, and it directs staff to receive those reports, document them, and convey them to the PREA Investigator. This satisfactorily describes the methods established for third-party reporting, as required by Standard 115.154, which had been missing from the policy at the Audit stage.

Section 23.0 of Chapter 237 was revised to include the elements required by Standard 115.167. The policy affirms that the agency will protect all relevant categories of people from retaliation, details methods of protection to be offered, designates the PREA Investigator as the employee responsible for monitoring for retaliation, and details methods he or she will use to monitor. This section is satisfactory in its coverage of Standard 115.167.

The definitions in Chapter 237 were revised to include the definitions of the specific sexual behavior prohibited, taken directly from the PREA Standards. Thus, the definitions satisfy Standard 115.111(a)-3.

In summary, the agency completed all corrective actions for Standard 115.111 effectively and is in substantial compliance with all provisions of this standard.

115.112	<b>Contracting with other entities for the confinement of detainees</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>According to interviews with a Deputy Chief, the PREA Coordinator, and the PREA Manager, the agency does not contract with any other entity to house prisoners.</p> <p>The agency provided a sample of daily census reports for 2018, all of which showed populations far below the lockup's maximum capacity. The same leadership interviews described methods they take to ensure that the lockup does not reach capacity, including issuing summonses instead of taking the accused into custody, seeking to expedite bail decisions, and deferring to other area agencies (Boston Police Department, Massachusetts State Police) to respond to incidents where there may be mass arrests. Staff, some of whom had worked for the agency between 14 and 21 years, could not recall a time when the lockup facility was full. These data suggest no need to contract for additional beds and tend to support the leadership position that MBTA Police does not utilize such contracts.</p> <p>This standard is thus not applicable to this agency, so it will be found to meet the standard.</p>

115.113	<b>Supervision and monitoring</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The facility typically houses 3 to 4 prisoners and can house a maximum of 12. All are single-celled. There is camera coverage in every cell, every walkway, and every room in the self-contained Booking Unit. The only time prisoners may be in contact is on arrival, if there are multiple arrests; in that event, they wait in the Multi-Holding Room, handcuffed to poles and with an officer posted in the room. Meals are served in the cells and showers are not provided, so the only time a prisoner comes out of the cell is to make a phone call or to meet with a detective or attorney. Staff make rounds of the cells. Each of those contact areas, and the walkways and entrances between them, are under camera coverage. Cameras are continuously monitored by two posts, and episodically by a third. There has never been a complaint filed about sexual abuse. The auditor determined these facts through reviewing a sample of daily census data, observing all areas of the Booking Unit, observing the various cameras and camera-monitoring stations, and interviews of 10 staff whose responses were consistent.</p> <p>Under those conditions, the agency has developed a staffing plan that is documented, among other places, in MBTA Police Manual Chapter 237-3. The plan accommodates these factors:</p> <p>Physical layout: the Booking Unit is a small, first-floor unit with only 2 sites for ingress/egress. There are 3 short runs of cells to house different populations separately and approximately 4 other rooms for operations.</p> <p>Composition of detainee population: levels of dangerousness do not come into play as all prisoners are single-celled and do not come out of their cells so do not require additional staff escorts or other security measures. Arrests of women and juveniles occur, but infrequently, and they are housed on separate runs labeled as belonging to those populations. In the Pre-Audit Questionnaire, staff noted the average number of prisoners in custody since PREA went into effect, and the number of prisoners upon whom the staffing plan is premised. These numbers matched and were consistent with the sample of 2018 daily census reports reviewed by the auditor.</p> <p>Prevalence of sexual abuse incidents: none has ever been observed or reported.</p> <p>Other relevant factors: lockup stays are generally 1 day or less, there is almost no prisoner movement, and prisoners are never alone together.</p> <p>The staffing plan takes the above factors into account and provides in-person and video monitoring staff sufficient to protect prisoners against abuse. The agency is in compliance with 115.113(a).</p> <p>Agency leadership asserts that there have not been, and cannot be, deviations from the staffing plan. They say the 3 designated positions are essential for operations and are thus mandatory posts to fill. They indicated there is a sufficient overtime budget to cover additional time on those posts and that, if necessary, patrol officers would be called in for coverage</p>

rather than leaving the posts open. Therefore, there is reportedly no recording of deviations from the plan. The agency is in compliance with 115.113(b).

Leadership interviews determined that there are not annual reviews of the staffing plan for the adequacy of features specified in the PREA standards. The agency does not meet standard for 115.113(c).

As will be discussed later in this report, Standard 115.141 does not apply to this lockup, so 115.113(d) is also not applicable. Nevertheless, the reportedly universal practice of single-celling, actively monitored by camera by the Booking Officer who is a very short distance away, would serve as protection for any vulnerable prisoners arrested.

The agency is in compliance with 3 of the 4 subsections, so has 1 more to fulfill. At this time, it does not meet standard.

Corrective Action: to come into full compliance, the agency must conduct a review of its staffing plan and document whether adjustments are needed to the plan, staffing patterns, video monitoring, or the resources available for staffing. This review must be repeated at least annually.

#### CORRECTIVE ACTION IMPLEMENTATION:

In March 2019, the Deputy Chief of Police, Patrol Operations Division conducted a staffing analysis. The analysis was documented and provided to the agency's Superintendent and to the PREA Auditor. The analysis reviews the facility's physical layout and video monitoring system, relevant policies and practices governing prisoner management that protect sexual safety, the prevalence of sexual abuse incidents (none ever reported), the staffing pattern, and the means that ensure that those posts are always covered, and the analysis states that there have been no staffing plan deviations since the plan's inception in 2016. The analysis considers whether changes are needed to the staffing plan, staffing patterns, video monitoring and other technology, and resources to ensure adequate staffing levels.

During the Audit stage, the auditor determined that the staffing plan provides levels of staffing and video monitoring adequate to protect prisoners from sexual abuse. In the corrective action, staff conducted the required internal analysis of the staffing plan. Staff have expressed an understanding that such an analysis is to be conducted annually, and staff's demonstrated conscientiousness and tracking systems give the auditor confidence that the systems are in place to ensure annual analyses.

The agency is in substantial compliance with Standard 115.113.

<b>115.114</b>	<b>Juveniles and youthful detainees</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The PREA Manager notes that separate juvenile housing has been in place long-term to satisfy accreditation requirements. The auditor observed a separate run with permanent signage labeled "Juveniles." It is behind a locked door and traffic patterns are such that adult prisoners would not pass by the cells. The door to the run has a small window through which one can see the run but not into the cells; it appears that juveniles in the cells cannot see the other cells or anyone outside the door. MBTA Police Manual Chapter 237-3 reiterates in policy the requirement for separate juvenile housing.</p> <p>The agency is in compliance with 115.114.</p>

115.115	<b>Limits to cross-gender viewing and searches</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>According to staff and leadership interviews, agency policy is to only conduct pat searches routinely. MBTA Police Manual Chapter 147-1 through 147-5 governs searches. It specifies the procedure for getting authorization for ANY strip searches and it dictates that visual cavity searches require probable cause. In both cases, it specifies the searches must be conducted by the same gender with a supervisor present. At least five staff and leaders affirmed that this is their understanding.</p> <p>The opportunities for any cross-gender interaction are relatively rare. While the MBTA Police do not routinely keep demographic information on prisoners, staff estimate that only about 5% of prisoners are women and only about 10% of staff are women, so generally both the prisoner and officer will be men. At least seven staff and leaders convincingly described routine practices for obtaining an officer of another gender for a search when needed. These include calling in officers from patrol if none of the needed gender is in the building, or calling upon other cooperating agencies; staff estimate this can be accomplished within 15 minutes and does not disrupt operations.</p> <p>Because of these longstanding policies and practices, and low likelihood of cross-gender interaction at the time of a search, leaders believe that no cross-gender strip or cavity searches have taken place in the last 12 months. The auditor agrees that essential protections are in place and are very likely to cause this result. However, it will be necessary to maintain some form of tracking, or to conduct periodic internal audits of arrest reports, to verify and demonstrate that no such searches have indeed taken place. 115.115 (a) does not yet meet standard.</p> <p>Chapter 147 requires that strip and cavity searches be documented in the arrest report, and the PREA Manager affirmed that this is routine practice. Therefore, any cross-gender conduct of those searches would also be documented in the reports. The agency is in compliance with 115.115 (b).</p> <p>MBTA Police Manual Chapter 237-3 incorporates Standard 115.115 verbatim, including the prohibition of cross-gender viewing of private body parts except when exigent or incidental to routine cell checks. The agency manages this requirement well. Staff and leaders noted that prisoners remain in their street clothes and are not offered a shower, so there is not occasion to view them undressed unless they must change into hospital clothes because their own are too soiled or damaged to wear. Positioning cameras away from the in-cell toilets is also an accreditation requirement, according to the PREA Manager who is also responsible for maintaining the agency's accreditations. The auditor verified in-cell that cameras are overhead above the toilet and positioned to face the bed; the auditor also observed the in-cell view on the camera monitors and it does not capture the toilet.</p> <p>The auditor observed that the agency has signs posted announcing that prisoners are on camera at all times; these are highly visible during booking and at various points when the prisoner is escorted within the unit. These do not, however, specifically mention that prisoners</p>



are being viewed by the opposite gender, and no such announcements were being made as of the site visits, according to officers posted in the Booking Unit, Monitor Room and the PREA leadership. Since cross-gender camera monitoring does take place, announcements should be instituted. The agency does not meet standard for 115.115 (c).

MBTA Police Manual Chapter 237-3 incorporates verbatim the Standard's prohibition on pat-searching transgender or intersex individuals solely to determine their genital status. At least six staff uniformly said that a transgender or intersex prisoner may identify the gender of officer he or she prefers to conduct the search and the department will accommodate that. Thus, the prisoner declares his or her gender and there is no need to search to determine it. Staff did not display any discomfort or alternate views on the topic. According to one officer who has conducted pat searches with transgender individuals, the practice is to conduct the search with two officers of the same gender and a supervisor. The agency meets standard for 115.115 (d).

The PREA Coordinator/Training Unit Supervisor provided the Moss Group curriculum, which the agency had used to train staff on least-intrusive, respectful, and professional searches of transgender and intersex individuals, as well as cross-gender pat searches. The auditor reviewed the curriculum, tracking spreadsheets for the delivery of PREA trainings, and a sample of sign-in sheets for those trainings. All interviewed staff mentioned having received this training and described some details of the video and other content. Same-gender pat searches have reportedly been in place long term; staff on the force 14 to 22 years said they cannot remember a time when that was not the policy. They note that, if there must ever be an exception, a supervisor must be present during the cross-gender pat search. The agency meets standard for 115.115 (e).

Thus, the agency is in compliance with many of the provisions of 115.115, but does not meet standard overall.

Corrective action: to come into full compliance, the agency must:

- maintain some form of tracking, or conduct periodic internal audits of arrest reports, to verify and demonstrate that cross-gender strip and cavity searches have not taken place
- make announcements at the beginning of a shift (if prisoner(s) already in custody), or when a new prisoner is taken into custody, if the Monitor Room Officer or Duty Supervisor is of a gender different from the prisoner(s)

#### CORRECTIVE ACTION IMPLEMENTATION:

As described during the Audit stage, there are longstanding practices to ensure that cross-gender searches do not take place, and staff believe that they do not. During the Corrective Action phase, staff employed a tracking mechanism to substantiate this belief. Staff revised the Arrest Log so that, with every arrest, one data point is whether a cavity or strip search took place. The PREA Manager reportedly reviews the Arrest Log semi-weekly; whenever this data field shows a cavity or strip search, she expects to pull the arrest report to check whether the search was cross-gender and to notify the PREA Investigator should that occur. The PREA Investigator also established a routine of monitoring quarterly for various PREA requirements, including cross-gender searches. During the Corrective Action stage, he produced three reports documenting that he had checked this tracking source for the preceding quarter (or,

for one report, it covered the preceding month) and determined that no such occurrences were recorded.

Taken together, the policies, practices, and monitoring should ensure ongoing that cross-gender searches do not take place, and it appears that none have in 2019. This is sufficient to satisfy Standard 115.115(a).

Given that prisoners usually remain in their own clothes and do not shower, and the auditor verified that toileting is not in view of the video monitors, it would seem to be rare that staff would be in a position to view prisoners' breasts, buttocks, or genitalia. During the Corrective Action stage, the agency instituted announcements to inform prisoners of the possibility of cross-gender viewing, nevertheless. At booking, the Booking Officer reportedly reads PREA-related information to the prisoner; the sheet is posted approximately at eye level for the officer and the prisoner. Staff sent a photo documenting that the sheet includes the statement that the prisoner may be viewed on video monitor by a person of the opposite sex.

The auditor interviewed every Lieutenant, Booking Officer, and Monitor Room Officer on two shifts during an August visit to the facility. Monitor Room Officers volunteered that they announce their presence over a speaker when they begin a shift, or when a prisoner is placed in a cell if an officer of another gender is already on shift. A Lieutenant and a Booking Officer also said they announce their presence when they make rounds of the Booking area cells. No bookings took place, and a prisoner was only in custody for a few minutes, during the auditor's August revisit, so the above-described actions could not be verified through observation. However, the consistency of staff's accounts and the multiple measures apparently in place convince the auditor that Standard 115.115(c) is being satisfied.

With most provisions in compliance during the Audit phase, and these additional two provisions now being met, the agency is in substantial compliance with Standard 115.115.

115.116	<b>Detainees with disabilities and detainees who are limited English proficient</b>
	<b>Auditor Overall Determination:</b> Does Not Meet Standard
	<b>Auditor Discussion</b>
	<p>MBTA Police Manual Chapter 237-3 - 237-4 incorporates Standard 115.116 verbatim. It also names the two Massachusetts agencies responsible for assisting people with disabilities. MBTA Police provides access for all prisoners to its efforts to prevent, detect, and respond to sexual abuse and sexual harassment through: posters in the Multi-Holding Room, on the glass partition during booking, and by the phone; the Booking Officer reading to each prisoner key PREA rights; providing handouts; making staff available to take complaints and investigate; and providing means to report orally, by phone, online, by mail, or by hand-delivery of a document. The agency has not received any PREA-related complaints, so the following discussion centers on existing equal access and effective communication practices the agency uses in general, and which would be used in PREA-related efforts.</p> <p>For prisoners who have hearing limitations, the agency has a relationship with the Massachusetts Commission for the Deaf and Hard of Hearing. This is noted in Chapter 237 and was well known by at least 8 staff interviewed. The commission can be called to provide ASL interpreters; staff described the method to arrange this. Some staff were aware that some patrol officers and a detective also know ASL and can be utilized for interpretation. One officer noted that communicating in writing had also worked well in the few interactions s/he had had with a deaf member of the public. All noted that contact with deaf persons is rare; no one remembered more than 2 such encounters and several had not yet interacted with a deaf person on the job. One or more of the above-described methods reportedly would be used to facilitate a deaf prisoner's access to the agency's PREA-related efforts.</p> <p>Staff offered that having the Booking Officer read the rights material to prisoners would help accommodate prisoners with vision, intellectual, psychiatric, or speech disabilities. It is also the case that prisoner handouts are in somewhat simplified language. Typically, one would see materials in audio, large print, Braille, or other formats, and with much greater simplification, for effective communication with such populations. While mobility impairment is not mentioned in the Standard, it is also the case that the poster near the phone, and potentially those in the Multi-Holding Room, are posted higher than is easy to read for prisoners in wheelchairs. The agency does not meet standard as to 115.116 (a).</p> <p>Interviewed staff were universally familiar with interpretation into other languages. They said limited English proficiency is not common, but Spanish is the highest need among other languages. Staff noted there are MBTA officers, Boston Police, and State Police who speak Spanish and Mandarin. They are sometimes called to translate; this can be done by putting out a request on a common frequency. All staff volunteered knowing how to access the Language Line, a phone service connecting a translator, staff, and prisoner. The access method is memorialized in MBTA Police Manual Chapter 182; some officers had the number on their phones. Reportedly, many languages are available; one officer reported using the service for multiple other languages and found the service "excellent" for the arrest and public service context. Specific to PREA, staff have created the posters, brochures, and notice of the audit in Spanish and English. The agency is in compliance with 115.116 (b).</p>

Chapter 237 incorporates the Standard verbatim, including the prohibition on using detainees to interpret. Among the methods staff mentioned, no one raised the possibility of calling upon a prisoner to interpret. Multiple concurrent arrests are uncommon, as is a daily census of more than 3 or 4. Prisoners are never brought together during the time they are locked up. Under these conditions, and given the available professional resources that staff find effective, it is not plausible that staff would use prisoners to interpret. The auditor is confident that the agency is in compliance with 115.116 (c).

Because only some subsections are in compliance, the agency does not meet standard for 115.116 as a whole.

Corrective action: to reach full compliance, the agency would need to strengthen effective communication methods for prisoners with vision, intellectual, psychiatric, or speech disabilities.

#### CORRECTIVE ACTION IMPLEMENTATION:

For disabilities other than hearing impairment, staff rely heavily on the Booking Officer reading material to the prisoner as a means to ensure effective communication. Whether effective communication is accomplished, however, appears to be quite variable by staff member. One described multiple ways he explains the content and verifies that the information was understood. Another, however, said he reads aloud the zero tolerance statement only and instructs the prisoner to read the rest. Both Lieutenants suggested that calling Emergency Medical Technicians could be a resource with their experience in communicating with people with compromised cognitive ability, and one might seek the help of the prisoner's family or an advocate.

Alternate formats are not available, although staff did make posters larger, with larger lettering that will help prisoners with vision impairment but who are not fully blind, and lowered the posters to an appropriate height for prisoners in wheelchairs.

These measures are not sufficient to consistently ensure effective communication with some prisoner populations, so the agency does not satisfy Standard 115.116.

115.117	<b>Hiring and promotion decisions</b>
	<p data-bbox="252 170 927 203"><b>Auditor Overall Determination:</b> Exceeds Standard</p> <p data-bbox="252 248 523 282"><b>Auditor Discussion</b></p> <p data-bbox="252 327 1442 528">The auditor interviewed the head of Professional Standards, who is responsible for background checks and other portions of the hiring and promotion process, as well as investigations of alleged staff misconduct. The auditor interviewed the Deputy Chief of Administration Services, who is ultimately responsible for the same activities, and served as the head of Professional Standards before promoting into the Deputy Chief role.</p> <p data-bbox="252 584 1477 786">The auditor reviewed a background check packet template and employment application. Among the 256 employee files, the auditor reviewed the background check material present in the files of 4 employees hired within the preceding year and 2 employees hired between one and five years preceding the audit. These files were selected as a convenience sample. Each of those files contained background checks with the elements described in interviews.</p> <p data-bbox="252 842 1453 1088">The following comments describe the background investigation process in general. While it does not specifically name the disqualifying behaviors outlined in Standard 115.117, the process is designed to capture accusations of sexual harassment and other behavior that would damage the integrity of the department, as well as all contacts with the criminal justice system. The 115.117 disqualifying behaviors would, by their nature, be identified by these methods.</p> <p data-bbox="252 1144 1477 1514">Both leaders strongly emphasize that they see their overall responsibility as constructing and maintaining a workforce with high ethical standards that preserves the integrity of the department and protects the safety of prisoners in lockup. They emphatically and repeatedly declared that any credible hint of a history of sex crime, domestic violence, or sexual harassment would be contrary to these objectives and would disqualify a candidate. As further support for the department's approach to sexual harassment, these leaders and the PREA leaders described parent agency MBTA's heavy emphasis on preventing sexual harassment and related retaliation for the last two years through strengthened policies, universal training, and a hotline for staff reports that generates investigations for all calls.</p> <p data-bbox="252 1570 395 1603">New Hires:</p> <p data-bbox="252 1615 1477 2152">Staff showed the auditor the 30-page application that is a feature of the hiring process. It requires the candidate to self-disclose any accusations of sexual harassment; any crimes alleged; and any employer discipline, reprimands, suspensions, or counseling for any reason. During the hiring process, a candidate is required to report any new contacts with law enforcement or the courts. In a process reportedly in place since 2010, staff say a typical background check takes 40 hours of staff time. It includes speaking with all prior employers and volunteer settings (if the candidate signs a release), friends, family, and local police departments to look into temperament and behavior that is observable but may not be recorded. Online checks include searches of Cop Link, TLO (The Last One, an investigative and risk management program for due diligence, threat assessment, identity verification, fraud prevention and debt recovery), the National Crime Information Center/Interstate Identification Index ("NCI/III"), Board of Probation, Recent Inquiries, sex offender registries, credit reports, and social media accounts.</p>

This procedure is substantiated by the background check packet the auditor reviewed, and there was evidence of these procedures being followed in the 4 new-hire employee files the auditor reviewed. The hiring process also reportedly includes a psychological evaluation, a drug test, a panel interview with standardized questions, and a review of the packet by every member of the Command Staff.

Engaging in sexual abuse in an institution would be surfaced in employer interviews, self-disclosure of on-the-job discipline, and in several of the online searches that capture criminal activity. Conviction on improper sexual activity in the community would be captured in the same online sources. Alerts concerning relevant civil and administrative adjudications reportedly are included in the TLO search, which would then lead the department to review the related court files. The agency is in compliance with the hiring aspect of 115.117 (a).

As described above, applicants are required to self-disclose accusations of sexual harassment against them, and this information is sought during interviews of prior employers and personal contacts. The leadership has said it considers this information and it is disqualifying. The agency is in compliance with the hiring aspect of 115.117 (b).

As described above, MBTA Police performs a criminal background check and makes its best efforts to speak with previous employers, if the candidate signs a release, about possible sexual abuse or harassment in the candidate's history. The agency is in compliance with 115.117 (c).

A candidate is asked about his or her history in the 30-page application and through a uniform set of questions asked by a panel. Reportedly, neither method asks about the specific behaviors outlined in Standard 115.117. The agency does not meet standard for 115.117 (f).

#### Ongoing Employment/Promotions:

Since the department endeavors not to hire anyone with a history of sexual abuse or harassment, those individuals would not likely be on the force and available for promotion. As to behavior during MBTA Police employ, all leaders said they have received no PREA-related complaints about staff while working for the department. The head of Professional Standards said that review for promotion includes reviewing all citizen complaints and Internal Affairs documentation about the staff member. It does not include a complete background check. Staff also have a continuous obligation to report all contacts with the criminal justice system. These methods tend to surface the information that should be disqualifying for promotion under 115.117(a) and (b), but do not completely meet those components of the standard, nor 115.117(f)'s requirement to ask employees directly.

Per the interviewed leaders, as of the site visit, the agency did not have in place a means to conduct criminal background checks every five years nor to otherwise capture that information other than requiring employees to self-report and receiving alerts from some systems such as the Massachusetts Registry of Motor Vehicles. The agency is not in compliance with 115.117(e).

According to separate interviews of the Deputy Chief and the head of Professional Services there is a continuing, affirmative duty to disclose contacts with the criminal justice system,

including for the behaviors described in Standard 115.117, and material omissions, or providing false information, are grounds for dismissal. This is consistent with their descriptions of holding various staff accountable for ethical and legal breaches, the fairly low threshold they described for putting staff on leave pending investigations of complaints against them, and the leaders' descriptions of their expected culture of self-disclosure and reporting of misconduct by others, which some staff echoed. The auditor found them convincing and finds the agency is in compliance with 115.117(g).

The head of Professional Services noted that if an employee left MBTA Police while under a PREA-related investigation, and the head of Professional Services learned of a potential new employer for that person, the head of Professional Services would feel obligated to contact that potential employer to inform him or her that there was an open investigation. Taken together with the other discussions of ethical expectations and practices, the auditor infers that the head of Professional Services would also confirm to a potential employer that complaints of sexual abuse or harassment had been substantiated, but this was not discussed directly during the audit. Thus, there is not yet evidence to support compliance with 115.117(h).

#### Contractors:

According to all MBTA Police leaders and PREA leaders interviewed, the department prohibits all contractors from detainee contact, and contractors must always be accompanied by a member of law enforcement when they move about the facility. Reportedly, there were no contractors onsite during the site visits, and their presence is a rare occurrence, so the auditor was unable to interview them for verification. However, the universal nature of staff's information on this point, offered in separate, private interviews, was corroborative and convincing. Thus, the auditor finds that 115.117 (d) does not apply. However, the head of Professional Standards said that his department does conduct a criminal background check on all contractors who come onsite.

In summary, MBTA Police is in compliance with many aspects of 115.117 but there are enough incomplete provisions that it does not meet standard.

Corrective Action: to reach full compliance, the department must:

- specifically ask new hire candidates, who may have detainee contact, about any history of sexual abuse in an institution, and convictions or civil or administrative adjudications for sexual activity in the community involving force, threat or coercion. (115.117(f))
- when considering promotion for staff members who may have detainee contact, specifically run online checks, and ask the employees, about sexual abuse in the lockup, and convictions or civil or administrative adjudications for sexual activity in the community involving force, threat or coercion (115.117(a), (b), (f))
- institute a system to conduct criminal background checks on employees every five years, or an alternate system to capture similar information (115.117(e))
- provide evidence that the agency will provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from a potential employer (115.117(h))

#### CORRECTIVE ACTION IMPLEMENTATION:

During the Corrective Action stage, staff revised the candidate interview questions to include

direct questioning about accusations of workplace sexual abuse or harassment, and provided the revised question set to the auditor. As described above, convictions and civil or administrative adjudications are identified through the routine use of TLO and other background check methods. This satisfies the one hiring-related element of 115.117(f) that had been outstanding.

As to candidates for promotion, staff revised the main PREA-related policy, Chapter 237, to require that candidates be asked about sexual safety-related misconduct, and that a background check be run. The head of Professional Services, who is central to hiring and promotion processes and is also the PREA Investigator, committed to ensuring that the practices are institutionalized. These changes are sufficient to satisfy the remaining promotion-related elements of 115.117(a), (b) and (f).

The office of Professional Services added a sergeant to its staff. According to the head of the office, the new sergeant's duties will include running background checks on all employees every five years. The sergeant reportedly completed the first set of these checks in June 2019. This satisfies the element that was outstanding in 115.117(e).

The head of Professional Services previously confirmed to the auditor the routine practice of contacting candidates' employers with a range of questions, including those about criminal activity; he also volunteered that it is the agency's obligation to tell other employers about former employees who were under investigation for sexual safety complaints. During the Corrective Action stage, this leader also confirmed that the agency will provide information on substantiated allegations of sexual abuse or harassment to a potential employer of a former MBTA employee. This is credible, as it is consistent with the longstanding, similar practices described at the beginning of this paragraph. The agency has satisfied the elements of 115.117(h).

With these improvements in the Corrective Action stage, along with the practices demonstrated during the Audit stage, the agency's practices are well-designed to prevent the hire or promotion of persons who compromise prisoners' sexual safety, and these practices appear to be well executed. The agency exceeds the requirements of Standard 115.117.



115.118	<b>Upgrades to facilities and technologies</b>
	<b>Auditor Overall Determination:</b> Exceeds Standard
	<b>Auditor Discussion</b>
	<p>According to the Deputy Chief of Administrative Services and the PREA Manager, the facility was built in 1997, there have been no upgrades in 2012 or later, and none are contemplated. Thus, Standard 115.118 is not applicable during this audit cycle.</p> <p>The Booking Unit, however, does make extensive use of technology that serves PREA purposes well. The auditor observed cameras trained on multiple points of the building exterior; the 2 places of ingress/egress to the Booking Unit, including both sides of those passages; all rooms in the Booking Unit; all cells; and hallways and most other areas on the first floor, even those remote from the Booking Unit. In several key locations, multiple cameras capture different angles.</p> <p>The auditor observed that a bank of live camera feeds is monitored by the Booking Officer, the Monitor Room Officer, and the Duty Supervisor; this was confirmed in 7 staff interviews. The monitoring screen is generally optimized to view 16 locations, but has capability to view up to 64 cameras, so can monitor all holding cells concurrently as well as other areas.</p> <p>For movement into and out of the Booking Unit, the auditor observed that paired doors are electronically controlled. Staff movement throughout the facility requires an electronic badge, which the auditor observed in use, and each use of the badge reportedly is tracked. Badges restrict entry to only certain persons in some areas. The auditor observed a small number of closets, offices, and stairwells out of camera view, but these are distant from any location where prisoners are authorized to be and someone would have to walk the prisoner through camera-monitored hallways to get there. Most civilian jobs reportedly do not move about (for example, dispatch); all civilians are required to be escorted by law enforcement staff, or are the only ones possessing the key to a particular area, and they are prohibited from prisoner contact. No non-booking functions require going into the Booking Unit.</p> <p>Thus, with no prisoner movement expected, known patterns of staff activity, frequent escort requirements, extensive camera coverage continuously monitored and recorded, and electronically-controlled and tracked access, unusual movement or use of space would be easily noticed and any incidents would be easily traced. Leaders describe this system as functioning well to deter improper behavior, including that which would fall under PREA.</p> <p>MBTA Police lockup makes excellent use of technology that exceeds Standard 115.118.</p>

115.121	<b>Evidence protocol and forensic medical examinations</b>
	<b>Auditor Overall Determination:</b> Does Not Meet Standard
	<b>Auditor Discussion</b>
	<p>MBTA Police does conduct its own investigations. There have been no PREA complaints to date, but Professional Standards will be responsible for those investigations. As to a uniform evidence protocol, MBTA Police Manual Chapter 237-5 - 237-6 incorporates the standard requiring one, and elements of a protocol are reflected as part of the Coordinated Response Plan found at Chapter 237-6 - 237-7. MBTA Police Manual Chapter 283 instructs staff about preserving crime scenes and evidence in general. It does not specify the particular methods when there are allegations of sexual assault. It does note, "All evidence will be collected in a manner consistent with the standards developed by the U.S. DOJ and the FBI." The auditor asked in multiple ways for a uniform protocol, making the request of people likely to be most knowledgeable; none was provided and it appears one is not in use.</p> <p>The head of Professional Standards, who would take responsibility for the investigation, did know procedures to preserve evidence outlined in Standard 115.164 Staff First Responder Duties, as did the Deputy Chief, who would serve as the backup investigator. The Superintendent would also serve as a backup; he is SANE-certified. There reportedly are also detectives with a sexual assault specialization; while they are not posted in the Booking Unit, they could be called if necessary. A few interviewed staff volunteered their knowledge on point; others, including a lieutenant, did not know what would be contained in such a protocol. Of note, the auditor observed that some elements are communicated to prisoners in a brochure they are to receive on arrival. Although some components are in place in a practical way, the agency is expected to develop a written uniform protocol, to ensure that it is developmentally appropriate for juveniles, and to ensure that staff are instructed in how to detect and respond to victims of sexual abuse. Absent these, the agency is not in compliance with 115.121 (a) and (b).</p> <p>Chapter 237, using the Standard language verbatim, does require that prisoners be offered and provided forensic medical exams without charge, and interviewed staff were familiar with this provision. Many staff expressed that it is well-accepted practice to take prisoners to Boston Medical Center for urgent medical needs. Staff described easily the process for calling EMTs, quick response times, and the procedure for transfers, and they seemed well accustomed to it. The Deputy Chief said there are MOUs with private EMS companies as a backup transport mechanism. Boston Medical Center advertises that it is a SANE-designated hospital providing SANE services 24 hours per day. The agency is in compliance with 115.121 (c).</p> <p>Chapter 237 also incorporates the Standard's language verbatim about access to victim advocates. The Deputy Chief and 2 Transport Officers confirmed that prisoners would be permitted this service and that there would be no security reason to prevent it. The agency is in compliance with 115.121 (d).</p> <p>The Standard's subsections (e) and (f) do not apply to MBTA Police because it does conduct its own investigations.</p>

The agency thus does not yet meet standard on 115.121 as a whole.

Corrective Action: to reach compliance, the agency must

- develop a written uniform evidence protocol and ensure that it is developmentally appropriate for juveniles and consistent with the resources cited in the Standard
- provide training for staff who have prisoner contact in how to detect and respond to victims of sexual abuse

**CORRECTIVE ACTION IMPLEMENTATION:** no additional materials were provided during the corrective action period. The original finding remains in place.

115.122	<b>Policies to ensure referrals of allegations for investigations</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>All interviewed law enforcement and civilian staff affirmed their understanding that an investigation will take place for all PREA-related allegations, that they are aware of the office responsible for investigations, and they know the means to refer there. Some components of Standard 115.122 are included in MBTA Police Manual Chapter 237-7, and elements of Chapter 182 reinforce it. An investigator has received PREA-related training and is prepared to carry out such investigations.</p> <p>On the other hand, PREA implementation was initiated recently and there have been no PREA complaints to date. There has not been an opportunity to test those preparations and ensure that investigations are completed as intended. The agency does not yet meet standard for 115.122 (a).</p> <p>MBTA Police would benefit from developing a written "policy governing the conduct of such investigations." The agency does not yet meet standard for 115.122 (c).</p> <p>Subsections (b) and (d) are not applicable because the agency does conduct its own investigations.</p> <p>The agency thus does not yet meet standard for 115.122 as a whole.</p> <p>Corrective action: to reach compliance, the agency must</p> <ul style="list-style-type: none"> <li>- have a period for proof of performance, and should document investigations for all PREA-related complaints that are made in that time.</li> <li>- develop a written policy governing the conduct of such investigations.</li> </ul> <p><b>CORRECTIVE ACTION IMPLEMENTATION:</b></p> <p>The agency revised its main PREA-related policy, Chapter 237, to provide greater detail about the conduct of PREA complaint investigations, including the responsibilities of first responders and the PREA Investigator and the expected steps in the required investigation. These policy sections are sufficient to satisfy Standard 115.122(c).</p> <p>The PREA Investigator has established a routine of monitoring quarterly for various PREA requirements. During the Corrective Action stage, he produced three reports documenting that he had checked tracking sources for the preceding quarter (or, for one report, it covered the preceding month) and determined that no PREA complaints were made throughout 2019. This is consistent with staff's previous perceptions, but is now routinely monitored for verification.</p> <p>Absent any PREA complaints, it has not been possible to demonstrate that investigations universally take place and are conducted according to PREA standards. Several factors indicate that a sufficient system is in place, however. Throughout three site visits, interviewed police and civilian staff uniformly, strongly stated that they would refer for investigation any indication of a PREA concern, and all are aware of the PREA Investigator as the point of</p>

contact. Training staff have led two trainings for all staff within an eight-month period where referrals and investigation were the primary focus. The agency appointed a highly experienced investigator, who already fills a powerful position, to serve as the PREA Investigator. That investigator completed the specialized training. Policy affirms the obligation of staff to report and for the investigator to complete and document investigations of all PREA complaints, and it specifies the steps that should be included in the investigations. The PREA Investigator, PREA Coordinator, and PREA Manager work closely on PREA and other matters, which would support and facilitate investigations when complaints are made. Leadership strongly endorses the ethic of surfacing and investigating all types of staff misconduct, including that which relates to prisoners' sexual safety. Taken together, these factors indicate that investigations will take place if and when PREA complaints are made.

The auditor finds the agency in substantial compliance with Standard 115.122.

115.131	<b>Employee and volunteer training</b>
	<p><b>Auditor Overall Determination:</b> Does Not Meet Standard</p> <p><b>Auditor Discussion</b></p> <p>MBTA Police Manual Chapter 237-7 - 237-8 incorporates the Standard, modified only to omit the reference to volunteers, since there are no volunteers who have prisoner contact, and changing the date by which initial training will be completed.</p> <p>The auditor reviewed training materials, the number of employees, spreadsheets tracking the individuals trained or pending training, and a sample of employee sign-in sheets. The agency trained the vast majority of law enforcement and civilians in a very short time. Tracking showed that 85% had been trained as of the site visits. This includes patrol officers who only have contact at the initial arrest and do not have any responsibility for the lockup; they maintain control over the prisoners only until the Transport team takes the prisoners to take them to lockup. Reportedly, about half of those not trained were unavailable as they were on various types of leave. For those who are working but were not yet trained, makeup training is being implemented on a 1:1 basis, according to the PREA Coordinator/Training Unit Supervisor. As noted, there reportedly are no volunteers who have prisoner contact.</p> <p>The auditor reviewed the training materials, which consisted of</p> <ul style="list-style-type: none"> <li>- handouts summarizing 3 of the 6 elements enumerated in this Standard, supplemented by detail about prevention and response procedures MBTA Police staff are expected to follow</li> <li>- the full MBTA Police Manual chapter dedicated to PREA, which incorporates the Standards, nearly all verbatim</li> <li>- The Moss Group power points titled Guidance in Cross-Gender and Transgender Pat Searches.</li> </ul> <p>The materials are accurate and are drawn from PREA Resource Center material. Reportedly, staff also viewed a video that accompanied the power points on pat searches. As a first introduction for staff, the materials focus appropriately on high-priority elements most needed in their day-to-day jobs. The materials are a bit minimalist and a number of key PREA training requirements will need to be added in refresher trainings.</p> <p>The training material reportedly was provided to supervisors to present, who drew on a range of backgrounds in training experience. The 11 staff and supervisors interviewed in the audit retained the training information to varying degrees. All were clear on the most essential point: take any allegations seriously and immediately forward them to a supervisor. Some staff were aware of additional elements such as preserving potential evidence, providing medical exams, and searches for transgender and intersex prisoners. Staff noted that their knowledge can be reinforced by referring back to the relevant policy manual chapter, which is on the computer network and posted in the Booking Area for ease of reference. These are all significant steps, but the agency does not yet meet standard for 115.131 (a).</p> <p>A year has not passed since the initial training, so there has not yet been an annual refresher. This is planned for the next department-wide in-service. The agency does not meet standard for 115.131 (b).</p>

Trainees did verify their attendance through sign-in sheets. They have not signed anything with the specific verification named in 115.131(c), so the agency does not meet standard for that provision.

The agency does not meet standard for 115.131 as a whole.

Corrective action: to reach compliance, the agency must:

- provide all staff with potential prisoner contact training in the topics specified in 115.131(a) - 2-6
- provide annual refresher training going forward
- have trainees verify that they understand the training received

#### CORRECTIVE ACTION IMPLEMENTATION:

Reportedly, all staff were provided a second round of training during the Corrective Action stage. PREA staff indicated that the materials used in the Audit stage were employed, and were supplemented by the main PREA-related policy, which had been revised to satisfy the corrective actions specified in other sections of this report. The auditor interviewed all onsite Booking Officers, Monitor Room Officers, and Lieutenants on two shifts, and they were significantly more conversant in the training content.

The content, however, omits several elements required by Standard 115.131. The material includes agency's zero-tolerance policy, prisoners' right to be free from sexual abuse and sexual harassment; and the right of detainees and employees to be free from retaliation for reporting sexual abuse or harassment. The auditor did not see material covering the dynamics of sexual abuse and harassment in confinement settings, including which prisoners are most vulnerable in lockup settings; means to detect and respond to signs of threatened and actual abuse; methods to communicate effectively and professionally with all prisoners; and methods to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.

A year has not passed since initial PREA implementation, so it is not yet possible to meet the annual training requirement. Staff do report that they have scheduled time in the next in-service training for an annual refresher on PREA topics.

Thus, the agency does not meet standard on Standard 115.131.

115.132	<b>Detainee, contractor, and inmate worker notification of the agency's zero-tolerance policy</b>
	<p data-bbox="252 219 896 253"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="252 297 523 331"><b>Auditor Discussion</b></p> <p data-bbox="252 376 1484 454">MBTA Police Manual Chapter 237-8 notes that prisoners will be notified; there is no mention of contractors.</p> <p data-bbox="252 499 1484 969">Staff has put in place effective materials and systems to notify prisoners. The auditor observed posters on all walls of the Multi-Holding Room where prisoners await booking. A poster is in view on the glass facing the prisoners as they are being booked and also in their line of sight behind the Booking Officer. The Booking Officer has a recap of PREA rights posted at his/her eye level to read to the prisoner during booking. Neither lieutenant knew the contents of what the prisoners are being informed, so although they are present for all bookings, they can not guide other staff nor correct them if needed. Prisoners are required to sign an acknowledgement that they were informed and those documents are being collected for internal monitoring by the PREA Manager. That practice had been in place for a few days before the site visit; the auditor observed two signed forms, a partial demonstration of the beginnings of the acknowledgements being collected.</p> <p data-bbox="252 1014 1484 1440">The prisoner also is to be given a handout, which covers zero tolerance, inclusive descriptions of harassment, abuse, and voyeurism, a tone that sounds sincere about protection and welcomes questions and reporting, and phone numbers for the PREA Coordinator, PREA Manager, the Duty Supervisor, the third party reporting agency, and a rape crisis center. The auditor observed that the handout is available in English and Spanish, which staff indicated are by far the most-spoken languages in the prisoner population. As discussed in Standard 115.116, for speakers of other languages, staff would use a phone-based interpretation service called Language Line through which speakers of many languages are available to interpret as staff reads the material to the prisoner. Not all interviewed staff who cover the Booking Officer post were aware of the handout.</p> <p data-bbox="252 1485 1484 1731">The auditor reviewed each of these printed materials and interviewed 6 staff concerning the materials and the process. The auditor was unable to further verify by observing the intake process; only one intake occurred during the site visits and the auditor was not informed in time to observe. Similarly, the auditor was unable to interview prisoners for verification; the sole prisoner detained during the site visits refused an interview despite the encouragement of three different staff members.</p> <p data-bbox="252 1776 1484 1865">These are important beginnings, though the agency does not meet standard for 115.132 (a) until staff practice becomes more consistent.</p> <p data-bbox="252 1910 1484 2112">There are no inmates onsite long enough to serve as inmate workers. Leaders said that policy prohibits prisoner contact for any volunteers and contractors. Contractors reportedly only come onsite for activities such as building repairs, and they are required to always be accompanied by a law enforcement professional. The auditor was unable to interview contractors as none were onsite during the site visits. Contractors have not been notified</p>



directly about the zero tolerance policy, but there are signs posted in multiple locations of the common areas of the Booking Unit. The agency is in compliance with 115.132 (b).

Overall, the agency does not meet standard for 115.132 as a whole.

Corrective action: to reach full compliance, there must be a period of performance in which staff become more versed in the information they are distributing and consistently distribute it, and a track record of acknowledgements further supports that prisoners have been informed.

**CORRECTIVE ACTION IMPLEMENTATION:**

On an August return visit, the auditor interviewed all Booking Unit-related staff on two shifts. They were familiar, more than in the first site visits, with PREA-related policies and practices, and were thus better equipped to inform prisoners. The auditor observed that above-described posters and PREA rights recap remain visible. Some staff treated the most valuable piece of information, a brochure, as optional. There were no bookings during the return visit, so the auditor was unable to verify the information flow by observation or prisoner interview. A large file of signed acknowledgements is one indication that prisoners are being informed.

On balance, practices are reasonable and sufficient for Standard 115.132.

<b>115.134</b>	<b>Specialized training: Investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The agency does conduct its own investigations and has designated the head of Professional Standards to conduct administrative and/or criminal investigations for all PREA complaints. The agency has never received a PREA complaint, so designating one person may be sufficient.</p> <p>The head of Professional Standards participated in a 3-day training titled "PREA Grant Project / Sexual Assault Investigation Training" tailored to confinement settings, led by the Massachusetts Department of Corrections PREA Division, and created under a Bureau of Justice Assistance Grant. The auditor reviewed the agenda, which shows that the course covered the required elements as applied to confinement settings: PREA definitions, investigation timelines, evidence protocol and forensic medical examinations, interviewing methods, Miranda and Garrity warnings, reasoning when reaching determinations, report-writing, and tracking to protect against retaliation. The course reportedly provided a manual of more than 100 pages; the auditor reviewed a sample of that manual, which was consistent with the agenda and reflected topics required by the Standard. The investigator confirmed that these topics were covered and discussed various methods used to foster learning. The PREA Manager provided the certificate verifying the investigator's participation, which the agency is maintaining. The agency is in compliance with 115.134 (a)-(c).</p> <p>The requirement to train investigators is also captured verbatim in MBTA Police Manual Chapter 237-8, which will support the training of investigators designated in the future. The agency is in compliance with 115.134 (d).</p> <p>The agency meets standard for 115.134 as a whole.</p>

<b>115.141</b>	<b>Screening for risk of victimization and abusiveness</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Although sometimes prisoners are housed overnight in this lockup, they do not have any contact after booking and are always single-celled. Thus, the PREA Resource Center, citing the August 4, 2014 FAQ, has found that Standard 115.141 is not applicable to this facility. A discussion follows.</p> <p>Leaders and booking staff report that prisoners are held in lockup only until they can be taken to court, which can be the same day or may require an overnight stay.</p> <p>The same staff also report that the facility exclusively single-cells prisoners in cells that are configured to comply with MA 105 CMR 470.403 for single cells. The auditor observed that these are a conventional size for single cells and equipped with one bed. A sample of censuses from the past year supports staff assertions that the population is far less than capacity, so no pressure to double-cell is created. Staff with longevity of 14 to 21 years said they could not remember a time when the holding unit needed more than its 12 cells. Otherwise, prisoners are only in each other's presence during transport, if they were arrested together, and in a large room during booking if there are multiple prisoners being booked. In that room, they are handcuffed to poles and under direct officer observation.</p> <p>For these reasons, it appears that, although sometimes prisoners are housed overnight, there is no opportunity for predatory prisoners to harm vulnerable prisoners, and vulnerable prisoners are provided protection by virtue of single-celling. Thus, according to the August 4, 2014 FAQ, Standard 115.141 is not applicable to this entity.</p>

115.151	<b>Detainee reporting</b>
	<p data-bbox="252 170 1011 203"><b>Auditor Overall Determination:</b> Does Not Meet Standard</p> <p data-bbox="252 248 523 282"><b>Auditor Discussion</b></p> <p data-bbox="252 327 1465 741">The agency does provide multiple ways for a prisoner to report, several of them private. S/he can tell the Booking Officer or a lieutenant during booking or when either of them makes routine rounds of the cells. Unfortunately, one interviewed officer said he makes it a general practice to discourage prisoners wanting to complain to him, which can have the unintended effect of suggesting that PREA complaints, too, are unwelcome. A prisoner may also tell a Booking Officer or lieutenant at other times by calling out a request to talk. The auditor observed that such an attempt is both seen and heard through the camera monitoring, and a staff member could respond to discuss the concern in person. The prisoner may also tell a detective when being interviewed about the subject of the arrest, and can tell Transport Officers or court personnel when taken to court.</p> <p data-bbox="252 797 1469 999">For a complaint in writing, the prisoner is not permitted writing material while locked up, but reportedly the head of Professional Standards would sit with him or her and take a statement. It would be necessary to use the attorney visit room for any of the above in-custody interactions to be private, as other rooms are on camera and can be heard by monitoring officers.</p> <p data-bbox="252 1055 1469 1301">Once released, the prisoner may submit a written complaint by using an online or hard copy general citizen complaint form, which can be submitted by email, in the mail, or dropped off in person. A prisoner can also call the facility. If s/he is not incarcerated elsewhere, dispatch reportedly will send police officers to take a statement as with any other complaint or crime; if s/he is incarcerated, the head of Professional Standards reportedly would take a statement at that facility and begin an investigation.</p> <p data-bbox="252 1357 1485 1906">Staff arranged with the Suffolk County District Attorney's office for its Domestic Violence/Sexual Assault Unit to serve as a third party entity who will receive and forward PREA complaints, according to staff and as substantiated in an email agreement provided to the auditor. The auditor observed that that information is well-publicized, appearing on the brochure that prisoners receive; posters throughout the Booking Unit, including by the phone used by prisoners; and on the MBTA Police website. Five staff said they can be flexible about letting prisoners out for additional phone calls, and have time to do so, so a prisoner could make this third party report while in custody. On the other hand, a Booking Officer said he stands a few feet behind the prisoner for safety reasons throughout all phone calls, which would disincentivize these private calls. Additionally, when the auditor called the third party office, two staff were unaware of the arrangement and advised the caller to make a report at an MBTA Police station. Thus, key pieces are in place for 115.151 (b), but more is needed to solidify the arrangement and the agency does not meet standard at this time.</p> <p data-bbox="252 1962 1465 2119">Interviewed staff agreed that they could take complaints orally or in writing. Law enforcement staff had mixed views about whether oral complaints would be documented; some pictured using a document routinely used for unusual occurrences, while others thought they would only forward the concern up the chain of command orally.</p>

Civilian dispatch staff were open to receiving complaints from third parties, who have several of the same options: calling or submitting the citizen complaint form by email, FAX, mail, or dropped off in the lobby. These options are memorialized in MBTA Police Manual Chapter 182, as well. To make a complaint anonymous, the person could call, or mail or drop off the form without identifying information on the envelope.

As to all the methods in the subsections discussed, not all key staff were aware of these methods, undermining the potential effectiveness. In particular, the lieutenants said they were only aware that a prisoner could tell a staff member face to face while in custody and a few staff thought of the citizen complaint form. While setting up these methods has been beneficial, more staff awareness will be needed for these reporting options to truly be in force. For these reasons, the agency does not yet meet standard for 115.151 (a) and (c).

All interviewed staff knew they are expected to report knowledge of sexual abuse and sexual harassment. They believe the only method available is to tell their supervisors; it is unclear how private this option may be, so the agency does not meet standard for 115.151 (d) at this time.

Thus, the agency had taken substantial steps toward providing multiple reporting methods, but does not meet standard for 115.151 as a whole.

Corrective action: to reach full compliance, the agency must:

- increase awareness among staff of the various reporting options
- communicate the requirement for staff to document all PREA complaints received orally
- work with the Suffolk County District Attorney's office to ensure that staff will take and immediately convey PREA-related complaints
- create an alternative for staff to report PREA-related information that is more private than discussing it with an immediate supervisor may be

#### CORRECTIVE ACTION IMPLEMENTATION:

While a key staff member with perhaps the most prisoner contact did not express knowledge of multiple reporting methods, all other interviewed staff volunteered the acceptability of receiving complaints in person; by asking for supervisors; by phone, email, or online form; by contacting the local District Attorney's office; from third parties; and/or from persons wishing to remain anonymous. Supervisors, in particular, seemed very knowledgeable about these options, and could therefore supplement the knowledge of line staff. Similarly, all but one interviewed staff were aware of the obligation to document oral complaints, and they specified the documentation methods they would use. Good progress was made on these two corrective actions.

Despite significant efforts by staff, an option for an office outside the agency to receive and forward complaints is not yet functional. As described above, the agency made an agreement with a unit of the District Attorney's office for this purpose in 2018. When the auditor called that District Attorney's unit during the Audit stage, unit staff were unaware of that role and turned away the request to make a complaint. The MBTA PREA Manager reportedly followed up multiple times by phone, and in emails provided to the auditor, to confirm the arrangement and to encourage District Attorney staff education about this role. The auditor called five more times to verify a change in practice. In the first call, District Attorney staff were still unaware of

the arrangement. In two more calls, there was no answer. When another call was unanswered, the auditor left a message stating the inquiry, and the call was not returned. In a final call, the first staff member remained unaware, but another staff member corrected her, confirming that they do take such complaints. There was, however, no understanding that they must immediately forward the complaints to the agency, as required by Standard 115.151(b), and staff intended to retain the complaints for the District Attorney's standard investigative practice. Thus, there is not yet a functional option to report outside MBTA, consistent with this standard.

It remained the case that leaders strongly expect staff to report any PREA-related observations, and staff universally expressed understanding that this is expected, but it was unclear from the staff interviews at both the Audit and Corrective Action stages whether they may do so privately.

There was significant progress on this Standard during the Corrective Action stage but the agency does not yet meet the standard.

115.154	Third-party reporting
	<b>Auditor Overall Determination:</b> Meets Standard
	<p data-bbox="248 1032 523 1066"><b>Auditor Discussion</b></p> <p data-bbox="248 1111 1490 1357">MBTA Police Manual Chapter 182 establishes multiple ways that the department accepts complaints from the public about crime or incidents, which would include PREA-related complaints. Complaints from third parties would most likely reach civilian dispatch staff first, who were aware that a complaint could come in by phone or submitting a citizen complaint form by email, FAX, mail, or dropped off in the lobby. Policy also allows complaints to be made through social media accounts.</p> <p data-bbox="248 1413 1490 1615">The auditor observed that the MBTA Police website provides phone numbers for third parties to call at the agency or at the Suffolk County District Attorney's office to discuss PREA concerns. The agency has also made available the prisoner brochures at the lobby window. These contain the contact information and the fact that third parties can make the report. Staff are able to give out this information to lobby visitors on request.</p> <p data-bbox="248 1671 1490 1783">The agency has mechanisms for third parties to make reports, key staff are aware and able to act on them, and the options have been publicized. Thus, the agency is in compliance with 115.152.</p>

115.161	<b>Staff and agency reporting duties</b>
	<p data-bbox="252 170 896 203"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="252 248 523 282"><b>Auditor Discussion</b></p> <p data-bbox="252 327 1469 913">Agency policy does require each of the elements of this standard by incorporating this standard verbatim in MBTA Police Manual Chapter 237-9, and reporting requirements are reinforced as part of the Coordinated Response Plan found at Chapter 237-6. Elements of MBTA Police Manual Chapter 182 are also consistent with this, requiring staff to report on the job rape, sexual assault, "any crime where serious bodily injury has occurred," "serious injury to a prisoner whether self-inflicted or otherwise," "any incident that would tend to tarnish the reputation or professional integrity of the Department or Authority" and "violations of Department policy that are inconsistent with the core values of the Department." All interviewed law enforcement and civilian staff, and supervisors, knew they were required to report all prisoner PREA complaints and anything they personally observed, so this has been clearly established as policy. It is logical that this would also extend to concerns about retaliation and staff contribution to any PREA incident, but staff did not expressly note these in interviews. It would be beneficial for the agency to reinforce its expectations for reporting these elements. It is not clear that the agency is in compliance with 115.161(a).</p> <p data-bbox="252 969 1469 1473">Some staff thought they would report only orally; others would record it in standard forms for recording unusual occurrences that is emailed. To the extent anything is put in writing, staff said that each employee has a local drive that can only be accessed with his or her own password. Recipients of that email are at the sender's discretion and all staff believed that PREA information should only be shared with one's own supervisor(s), Command Staff, the PREA Coordinator and Manager, and/or the lead investigator. If the complaint is in hard copy, staff reportedly would put it in an envelope and walk it to Professional Standards, which is responsible for PREA investigations. Once complaints have reached Professional Standards, that office reportedly maintains its online material in Internal Affairs software that only that office can access. As for its physical files, leaders said those offices can only be accessed with an electronic badge possessed by that staff or Command Staff. These systems are sufficient protection for confidentiality to consider the agency in compliance with 115.161(b).</p> <p data-bbox="252 1529 1469 1731">Leaders acknowledged that they and their staff are mandatory reporters under Massachusetts law, are familiar with accomplishing that, and see no barriers to fulfilling that duty. There have been no PREA complaints by juveniles, so it has not been established whether mandatory reporting has taken place for them, but the system appears sufficient to reliably support such reporting. The agency is in compliance with 115.161(c).</p> <p data-bbox="252 1787 1469 1899">In addition to the policy language requiring referral to investigations, all interviewed staff volunteered their understanding that all PREA-related reports they make will be forwarded to Professional Standards for investigation. The agency is in compliance with 115.161(d).</p> <p data-bbox="252 1955 1342 1989">The agency is approaching compliance but does not yet meet standard for 115.161.</p> <p data-bbox="252 2045 1469 2157">Corrective action: to reach full compliance, the agency must ensure that staff are aware they are required to report retaliation against detainees or staff who reported a PREA incident, as well as any staff neglect or violation of responsibilities that may have contributed to an incident</p>

or retaliation.

**CORRECTIVE ACTION IMPLEMENTATION:**

In an August site review, the auditor interviewed all staff on two shifts who have responsibilities toward the prisoners. All supervisors, and all but one line staff, expressed awareness that their reporting responsibility encompasses information regarding sexual abuse or harassment, retaliation against detainees or staff who reported such an incident, and staff actions or neglect that may have contributed. The agency is in substantial compliance with this standard.



115.162	<b>Agency protection duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Agency policy sets out its expectation for protecting prisoners at imminent risk by incorporating this standard verbatim in MBTA Police Manual Chapter 237-9. The Deputy Chief said he sees prisoner safety as the central role of all lieutenants, which would tend to support the implementation of this policy.</p> <p>There have been no such cases and there has not yet been a period of performance sufficient to test the application of this policy.</p> <p>Thus, the agency does not yet meet standard for 115.162.</p> <p>Corrective action: there must be a period of performance during which there may be an opportunity for the agency to act to protect vulnerable prisoners from imminent harm.</p> <p><b>CORRECTIVE ACTION IMPLEMENTATION:</b>  Staff have indicated that the facility has never received a complaint of sexual abuse or harassment of a prisoner. During the Corrective Action stage, the PREA Investigator established a routine of monitoring quarterly for various PREA requirements. He produced three reports documenting that he would be the principal point of contact for any complaints, and he had checked his tracking source for the preceding quarter (or, for one report, it covered the preceding month), all of which substantiated that no complaints were recorded in 2019 as well.</p> <p>Agency leadership strongly asserts a commitment to prisoner safety. The practices that never leave prisoners alone with other prisoners, do not allow non-law enforcement staff or contractors to have prisoner contact, and monitor all likely staff-prisoner contact on camera, are consistent with that commitment. A key policy requires staff to take immediate action to protect prisoners at substantial risk of imminent sexual abuse. The PREA Investigator and PREA Manager have a system for monitoring PREA-related issues. While there has been no opportunity to test whether staff act immediately in response to risk, the aforementioned factors illustrate a system that gives the auditor confidence that the staff would do so. The agency is in substantial compliance with this standard.</p>

115.163	<b>Reporting to other confinement facilities</b>
	<b>Auditor Overall Determination:</b> Does Not Meet Standard
	<b>Auditor Discussion</b>
	<p>MBTA Police Manual Chapter 237-9 incorporates this Standard, modified slightly for the specifics of this agency.</p> <p>Leaders said that, while the agency has not ever learned that a prisoner was abused at another facility, any such report would be conveyed up the MBTA Police chain of command and Command Staff would notify that other agency. Leaders said they have good rapport with local and state agencies to make such a notification, and do not see legal barriers to doing so. Leaders said they would facilitate the other agency's access into MBTA's Booking Unit to further their investigation. Since no such complaints have come to MBTA Police attention, it is not possible to determine the length of time for notice and whether it is made in writing. (115.163 (a)-(c))</p> <p>MBTA Police has one lockup facility. In that context, it could never be the agency making and receiving the notification described in this standard. Once staff learn of a PREA incident in another facility, they could notify the other agency but could not also be responsible for investigation as described in 115.163(d). In a different scenario, in which another agency notifies MBTA Police that an incident had occurred in MBTA's lockup, leaders said that other agencies know to contact the Deputy Chief, Professional Standards, and the Duty Supervisor concurrently for all important issues, and it is standard practice to then notify the Command Staff. Consistent with all other PREA-related reports, leaders said they would ensure that Professional Standards initiates an investigation. (115.163(d))</p> <p>The agency does not yet meet standard for 115.163.</p> <p>Corrective action: there must be a period of performance during which there may be an opportunity for the agency to make notifications according to the requirements of this standard, and/or to act upon any notifications it receives from other agencies.</p> <p><b>CORRECTIVE ACTION IMPLEMENTATION:</b></p> <p>The PREA Investigator has established a routine of monitoring quarterly for various PREA requirements, including whether the agency has been notified of PREA-related complaints involving another agency. During the Corrective Action stage, the investigator produced three reports documenting that he had checked this tracking source for the preceding quarter (or, for one report, it covered the preceding month) and determined that no complaints involving other agencies were recorded.</p> <p>The description by leadership of their routine communications with other agencies lends credibility to the leadership's assertions that they would also communicate about PREA complaints. There is, however, no basis on which to determine the timelines in which that communication would take place, nor whether it would be documented.</p> <p>Under current circumstances, it is not possible to determine that the agency is, or would be, in substantial compliance. The original finding remains in place.</p>



<b>115.164</b>	<b>Staff first responder duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>MBTA Police Manual Chapter 237-6 incorporates this Standard into the agency's Coordinated Response Plan. The policy employs the Standard's language nearly verbatim, modified slightly for the specifics of this agency. Among interviewed staff, half knew these responsibilities should they find themselves as the first responder but others, including a lieutenant, did not. This is particularly concerning because the Coordinated Response Plan expects the lieutenants to serve as the first responders. (115.164(a))</p> <p>MBTA Police prohibits non-law enforcement staff from having contact with prisoners and reportedly there are no job responsibilities that take non-law enforcement staff into the Booking Unit. Therefore, Standard 115.164(b) is not applicable to this agency.</p> <p>The agency does not meet standard for 115.164.</p> <p>Corrective action: to reach full compliance, the agency must ensure that staff--particularly those with responsibilities in the Booking Unit--are aware of first responder responsibilities.</p> <p><b>CORRECTIVE ACTION IMPLEMENTATION:</b>  All of the requirements of 115.164 are incorporated as first responder requirements in the agency's Coordinated Response Plan and are also memorialized in a checklist for staff use. During an August site review, a booking officer had easy access to the checklist and described how it would guide his actions. The most likely first responders are the PREA Investigator or a lieutenant. All three men interviewed (the investigator and the lieutenants on both shifts) detailed the steps they would take to separate the people involved, preserve the potential crime scene and its evidence, and offer medical care. Some staff also described some or all of these actions as required of first responders.</p> <p>With necessary policies and decision support in place, and the most likely first responders being knowledgeable about their responsibilities, the agency has progressed on this standard sufficient to be found in substantial compliance.</p>

<b>115.165</b>	<b>Coordinated response</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The auditor reviewed MBTA Police Manual Chapter 237-6 - 237-7, which details a well-designed Coordinated Response Plan to guide all of staff's actions. It incorporates verbatim the First Responder duties of Standard 115.164, the medical referral procedures and victim advocacy and victim services notices of Standard 115.121, and notice to a receiving facility as per Standard 115.165. It outlines internal notifications to be made, written report responsibilities, investigation steps, administrative review, and preparation for a potential criminal investigation. It assigns responsibility for each task to the first responder, duty supervisor, PREA Coordinator, investigator, and agency leadership, as appropriate. The agency does not have medical or mental health professionals it can direct, but the Plan instructs key staff to arrange for access to those professionals at a nearby hospital, as is usual practice. The agency meets standard for 115.165(a).</p> <p>Agency and PREA leadership asserted that they would notify a receiving facility of the incident and the potential need for medical and social services if an involved prisoner transferred to another incarceration setting, unless the prisoner did not want that notification made. Leaders said they believe there are no legal barriers to such notices and they have good access and rapport with area agencies. It was not possible for the auditor to gain additional verification as there have been no PREA complaints. Nevertheless, based on leadership's detailed descriptions of the actions they would take and their relationships with potential receiving agencies, and the ease and familiarity with which they discussed these topics, the auditor finds that the relevant staff are knowledgeable about the requirement and how to implement it, and she finds credible their statements of commitment to do so. The agency meets standard for 115.165(b).</p> <p>The agency meets standard for 115.165.</p>

<b>115.166</b>	<b>Preservation of ability to protect detainees from contact with abusers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The auditor reviewed the collective bargaining agreements for the MBTA Police Association, the MBTA Police Sergeants' Association, and the MBTA Police Superior Officers' Association. None prohibits removing an accused officer from contact with prisoners while an investigation is underway or during disciplinary decisionmaking. The agency meets standard for 115.166.</p>

115.167	<b>Agency protection against retaliation</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>MBTA Police Manual Chapter 237-10 makes a policy statement in favor of protecting against retaliation by incorporating this Standard's language verbatim. As such it contains the requirement to establish methods; such a policy, however, should actually lay out which posts or units are responsible for monitoring and what protection methods are available. As of the site visit, interviewed staff were also not familiar with the agency's obligations to protect against retaliation. The auditor was not made aware of any staff designated to monitor potential retaliation. The agency does not meet standard as to 115.167(a).</p> <p>Leaders outlined multiple forms of protection they would offer, and said these would be equally available to persons who reported or who cooperated with an investigation. They said they would work toward getting the prisoner released, either through a bail hearing or a transfer to another facility, to remove him or her from the environment. They said they would remove key staff from the situation, including putting them on leave where appropriate, and reassign cliques to different shifts if they appeared to be jointly retaliating. They said they would attempt to keep investigatory interviews confidential, to reduce exposure, while understanding that that possibility is limited. If the claims of retaliation were substantiated, the leadership said they would terminate those who were retaliating and bring charges if applicable. Leaders noted their track record of dismissals in recent years as evidence of their commitment to protecting the integrity of the department, which they said would extend to preventing and stopping retaliation as well. The agency meets standard for 115.167(b).</p> <p>The agency has not had reports of sexual abuse, so has not been in a position to monitor those who have made such reports, unless and until any report is determined unfounded, nor to provide protection for a cooperating witness who expresses fear. To the auditor's knowledge, there is also no plan developed for such situations. Under the circumstances, the agency has not been called upon to act promptly to remediate retaliation. The agency does not meet standard for 115.167 (c),(d),(e).</p> <p>The agency does not meet standard for 115.167 as a whole.</p> <p>Corrective action: to reach full compliance, the agency must:</p> <ul style="list-style-type: none"> <li>- expand its policy to describe how it will monitor for potential retaliation, including designating responsibility to key person(s) or department(s), and the protection methods it will provide</li> <li>- to the extent prisoners or staff report sexual abuse, monitor the conduct and treatment of those who have reported for signs of being subject to retaliation</li> <li>- if witnesses cooperate with a sexual abuse investigation and express fear of retaliation, provide protection to them, and to those who reported if applicable</li> </ul> <p><b>CORRECTIVE ACTION IMPLEMENTATION:</b></p> <p>During an August site review, the auditor interviewed all onsite staff who have responsibility for the prisoners, and more of them were aware that PREA and agency policy prohibit retaliation against prisoners or staff who report PREA concerns or cooperate with an investigation. Interviewed staff were educated that they are expected to report such retaliation.</p>

Staff have indicated that the facility has never received a complaint of sexual abuse or harassment of a prisoner, so it is not possible to directly verify the handling of any subsequent concerns about retaliation. The PREA Investigator has been given the responsibility of monitoring for PREA-related retaliation. The investigator has lengthy law enforcement experience, which was reflected in his comments about the likelihood of retaliation, the forms it could take, and the methods he would use to support the reporters and detect ill effects while trying to minimize any further retaliation toward those persons.

The designation of the PREA Investigator as the person responsible for monitoring, and the methods for monitoring and protection, have been integrated into revised agency policy, Chapter 237 at Section 23.0.

As described elsewhere in this report, the PREA Investigator has established a routine of monitoring quarterly for various PREA requirements. His reviews substantiated that no PREA complaints were recorded in 2019, so it is not possible to directly verify the handling of any related retaliation fears or reports that could arise. However, the above-described factors give the auditor confidence that a system is in place that would support effective response. The agency meets standard for Standard 115.167.

115.171	<b>Criminal and administrative agency investigations</b>
	<b>Auditor Overall Determination:</b> Does Not Meet Standard
	<b>Auditor Discussion</b>
	<p>MBTA Police Manual Chapter 237-10 - 237-11 incorporates the Standard verbatim, modifying only to say that the department does conduct its own criminal investigations. The head of Professional Standards received specialized PREA investigation training and will conduct all investigations. (115.171(b)) If there were investigations he could not complete, the Deputy Chief of Administrative Services or the Superintendent would conduct the investigation. All are experienced in investigations of staff conduct. There have been no PREA complaints to date, so while staff endorse and appear knowledgeable about many of the required practices, those principles have not yet been put to the test, so most provisions cannot yet meet standard.</p> <p>The lead investigator agreed he would investigate complaints coming from third parties or anonymously. He noted that interviews can be conducted by phone and an investigation could be built on a few key details, such as timeframe, so that he can review the video, identify others involved, and so on. 115.171 (a)</p> <p>The lead investigator and the Deputy Chief described in detail the expected procedures for preserving DNA, clothing, and other evidence. They described interviewing the victim, the alleged abuser(s), and all staff and prisoners who might have seen portions, as well as reviewing radio logs, phone logs, and video. Video reportedly is kept 1 year routinely, and longer if an investigation is opened. They did not mention reviewing prior complaints about the accused. (115.171 (c))</p> <p>The lead investigator endorsed making referrals for prosecution, but did not appear familiar with conferring with prosecutors about compelled interviews. (115.171 (d))</p> <p>The lead investigator described his style as making individualized assessments of credibility, offering several factors as examples. Massachusetts General Law Title XXI Chapter 149 Section 19B makes the use of polygraph unlawful under some circumstances, so the lead investigator said he never uses them and would not require it within PREA investigations. (115.171 (e))</p> <p>Neither had administrative investigations of PREA complaints yet been undertaken, but staff endorse that they will include an assessment of the role of staff. Staff say that both administrative and criminal investigations will result in written reports with the elements specified in 115.171 (f) and (g) respectively. The length of time these would be retained is as yet unknown. (115.171(i))</p> <p>Both the lead investigator and the Deputy Chief asserted that they would refer for prosecution any cases where there is probable cause that a crime was committed. (115.171(h))</p> <p>The lead investigator noted that the investigation would continue when the involved prisoner(s) leave the facility--by obtaining their contact information and following up--and on staff departure. Further, he asserted that if the accused staff leaves the facility, "it is incumbent on us" to tell a new employer that the former staff is under investigation.</p>



(115.171(j))

Subsections (k) and (l) do not apply as the agency conducts its own investigations.

Thus, since most of these ideals and practices are unproven, the agency does not meet standard for 115.171 as a whole.

Corrective action: to reach full compliance, the agency must:

- have a period of performance in which the practices in subsections (a) through (j) can be demonstrated.
- ensure that reviewing previous complaints about the accused abuser(s) are part of routine practice
- ensure that, when considering compelled interviews, investigators first confer with prosecutors about the potential effect on prosecution
- establish a policy for retaining PREA-related administrative and criminal investigation reports consistent with the requirements of 115.171(i)

**CORRECTIVE ACTION IMPLEMENTATION:**

As described elsewhere in this report, internal monitoring appeared to demonstrate that no PREA-related complaints were made in 2019, so there has been no opportunity to implement investigations. An experienced investigator is assigned to PREA-related investigations and he is supported by leadership who have similar experience. Policy integrates all of the language of Standard 115.171 as agency requirements. The PREA Investigator has taken the required specialized training; is aware of the requirement to investigate all PREA complaints; and describes intended investigation techniques that appear sound, including gathering the physical, DNA, and interview evidence expected under Standard 115.171(c).

At the same time, the requirements for effective investigations are essential and complex. While many factors are in place that will likely support good practice, this is a requirement that should be demonstrated before a finding of substantial compliance can be reached. The agency has not had the opportunity to demonstrate its ability to comply, so the original finding will remain in place.

115.172	<b>Evidentiary standard for administrative investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	The head of Professional Standards and the Deputy Chief each confirmed that preponderance of the evidence is the standard they will use for determining whether allegations are substantiated. The agency meets standard for 115.172.

115.176	<b>Disciplinary sanctions for staff</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>MBTA Police Manual Chapter 237-11 incorporates this Standard verbatim. Moreover, the approach to discipline outlined in Standard 115.176 is consistent with that described by agency and PREA leadership as the agency's general approach to discipline. That is, MBTA Police Manual Chapter 125, which the auditor also reviewed, details the steps available for progressive discipline for all types of alleged misconduct. Staff noted that the steps are a useful structure, but that the nature and seriousness of the allegation, disciplinary history, and other factors could justify modifying the steps, particularly to advance to measures such as leave pending investigation. Termination is an option for substantiated sexual abuse and other serious actions, and leaders affirmed that it would be the presumptive measure.</p> <p>As discussed elsewhere in this report, agency leaders consider sexual harassment and sexual crime disqualifying for a potential employee, leaders consider their role as centering on protecting the integrity of the department, and they cite a history of executing serious disciplinary actions including terminations. These would tend to support the likelihood of implementing this Standard. The auditor considers the agency to meet standard as to 115.176 (a),(b),(c).</p> <p>Leaders also expressed commitment to referring for prosecution any case of sexual abuse for which there is probable cause. Referring to licensing bodies was not discussed. As there reportedly have been no complaints of sexual abuse to date, there is not proof of practice, so the agency does not yet meet standard as to 115.176(d)</p> <p>While several key components are in place and appear to be compliant, the agency does not meet standard as to 115.176 as a whole.</p> <p>Corrective action: to reach full compliance:</p> <ul style="list-style-type: none"> <li>- the agency must verify that staff will notify licensing bodies, as well as prosecutors, in the event of substantiated sexual abuse</li> <li>- there must be a period of performance during which there may be an opportunity for the agency to respond to any sexual abuse or harassment allegations consistent with the requirements in Standard 115.176</li> </ul> <p><b>CORRECTIVE ACTION IMPLEMENTATION:</b></p> <p>During the Corrective Action stage, interviewed leaders verified that the terminations and resignations referenced in Standard 115.176(d) would be reported to licensing bodies, and the main PREA policy, Chapter 237, has been revised to reflect that (in Section 25.0).</p> <p>As described elsewhere in this report, internal monitoring demonstrates that there were no PREA-related complaints in 2019, so it is not possible to show proof of practice for the agency's intended disciplinary response to such complaints. However, the agency has demonstrated its extensive background check system that is effectively designed to prevent the hiring of potential perpetrators of sexual abuse, and the culture of reporting officer misconduct was strongly and repeatedly mentioned by leaders and endorsed in all staff</p>

interviews. The PREA Investigator also heads the office responsible for investigating employee misconduct. These are indications of the agency's approach to employee management and discipline generally, and appear to reflect a sensibility consistent with Standard 115.171 and a system sufficient to carry it out. The agency is found to meet this standard.

115.177	<b>Corrective action for contractors and volunteers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Agency policy prohibits contractors from having any contact with prisoners in all circumstances, and requires all movement by contractors to be accompanied by a law enforcement officer. Under those conditions, staff assert that it is impossible for contractors to engage in sexual abuse or harassment of prisoners. No statements were offered as to notifying other law enforcement and licensing bodies, nor remedial measures.</p> <p>The agency does not meet standard as to 115.177.</p> <p>Corrective action: to reach full compliance:</p> <ul style="list-style-type: none"> <li>- the agency must make a commitment to reporting a contractor to relevant licensing bodies, and to law enforcement unless the activity is not criminal, if the contractor has been found to have engaged in sexual abuse</li> <li>- the agency must identify measures it would take to remediate a contractor's behavior if he or she is found to have violated agency sexual abuse or sexual harassment policies</li> </ul> <p><b>CORRECTIVE ACTION IMPLEMENTATION:</b></p> <p>Since contractors are prohibited from contact with prisoners, and do not have the ability to access prisoners without an officer providing it and being on video monitoring, potential PREA violations by contractors seem next to impossible. However, during the Corrective Action stage, staff committed to reporting to law enforcement and licensing bodies any contractor who is found to have engaged in sexual abuse of a prisoner, and the main PREA policy, Chapter 237, was revised to that effect. Additionally, staff asserted that any contractor found to have violated PREA-related policy would not be permitted to return to the facility.</p> <p>The agency meets standard for Standard 115.177.</p>

115.178	<b>Referral for prosecution for detainee-on-detainee sexual abuse</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Agency leadership said it is committed to referring for prosecution anyone for whom there is probable cause to believe he or she has committed criminal sexual abuse.</p> <p>As discussed elsewhere in this report, if prisoners are in each other's presence at all, it is before booking when they are handcuffed to poles and supervised by one or more officers. After that, prisoners are always single-celled. All prisoner movement is on camera. Although the agency has not received complaints of prisoners being responsible for sexual abuse of other prisoners, under these conditions, it is extremely unlikely and a period of performance is unnecessary. The agency meets standard as to 115.178(a).</p> <p>Subsections 115.178(b) and (c) are not applicable as the agency conducts its own investigations.</p> <p>The agency meets standard as to 115.178 as a whole.</p>

115.182	<b>Access to emergency medical and mental health services</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>MBTA Police Manual Chapter 237-11, using the Standard language verbatim, does require that prisoners be offered and provided emergency medical care without charge and without regard to naming the abuser or cooperating with an investigation. Interviewed staff were familiar with the requirement to transport for medical care. Staff say they have been instructed to immediately refer complaints up the chain of command and to Professional Standards, so they would not be involved in the investigation and would not know the extent of a prisoner's cooperation.</p> <p>Many staff expressed that it is well-accepted practice to take prisoners to Boston Medical Center for urgent medical needs. Staff described easily the process for calling EMTs, quick response times, and the procedure for transfers, and they seemed well accustomed to it. The Deputy Chief said there are MOUs with private EMS companies as a backup transport mechanism.</p> <p>There have been no PREA complaints requiring medical care to date. Although this PREA requirement has not been tested, the medical transfer system supporting it has been tested and is well-established.</p> <p>For these reasons, the auditor determines that the agency has a system in compliance with Standard 115.182.</p>

115.186	<b>Sexual abuse incident reviews</b>
	<b>Auditor Overall Determination:</b> Does Not Meet Standard
	<b>Auditor Discussion</b>
	<p>MBTA Police Manual Chapter 237-11 - 237-12 incorporates the Standard verbatim, including subsections (a) through (e) and the 5 required points for review team consideration contained therein. There have been no PREA complaints, so therefore no incident reviews. Staff report that a review team has been identified to serve when the time comes. It is composed of the full Command Staff, the head of Professional Standards, and the PREA Coordinator or Manager. They say they may call on line staff or supervisors for input as needed. The auditor is not aware of staff having designed any templates to guide their analysis or reporting.</p> <p>The agency has not had the opportunity for proof of practice and thus does not meet standard at this time.</p> <p>Corrective action: for the agency to reach full compliance, there must be a period of performance in which there may be an opportunity for the agency to conduct a review of PREA incidents, if they are reported</p> <p><b>CORRECTIVE ACTION IMPLEMENTATION:</b>  During the Corrective Action stage, the PREA Investigator established a routine of monitoring quarterly for various PREA requirements. He produced three reports documenting that he had checked this tracking source for the preceding quarter (or, for one report, it covered the preceding month) and determined that no complaints were recorded. Thus, with no complaints, the agency is not in a position to provide proof of practice of convening to review such incidents.</p> <p>While potentially effective plans are in place to conduct such reviews, such an activity appears to be a substantially new undertaking for the agency. As such, this new practice should be demonstrated before a finding of "meets standard" can be reached. The original finding will remain in place.</p>

115.187	<b>Data collection</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The agency has not received any PREA-related complaints and has not begun data collection. The agency does not meet standard at this time.</p> <p>Corrective action: to reach full compliance</p> <ul style="list-style-type: none"> <li>- the agency must design methods of data collection</li> <li>- there must be a period of performance in which there may be an opportunity for the agency to collect and analyze data concerning PREA incidents</li> </ul> <p><b>CORRECTIVE ACTION IMPLEMENTATION:</b></p> <p>During the Corrective Action stage, staff designed and provided to the auditor a tracking mechanism with fields for 24 data points relevant to PREA complaints, including demographics; officers involved; relevant dates including those for investigation; the type of complaint; and whether it was referred for prosecution, subject to mandatory reporting, and reported to a receiving facility. Staff are to record whether ADA accommodation was provided, whether retaliation was claimed and investigated, the dates of administrative review of the incident, and corrective action. The auditor compared the tool to the Local Jail Jurisdictions Survey of Sexual Violence conducted by the Department of Justice, and determined that all fields from the survey have been included in MBTA's tracking. The tool also includes definitions.</p> <p>This is an effective tool for project management and to support implementation of many of the PREA standards, as well as tracking and analyzing data. Once the PREA Manager or PREA Investigator learns of a complaint, the PREA Manager intends to employ this tool to track events and populate the data fields. While internal monitoring has determined that there have been no complaints to record to date, this system is well-designed to support agency compliance with Standard 115.187. The agency is found to be in substantial compliance.</p>



<b>115.188</b>	<b>Data review for corrective action</b>
	<b>Auditor Overall Determination:</b> Does Not Meet Standard
	<b>Auditor Discussion</b>
	<p>The agency has not received PREA complaints and has not begun data collection, so is unable to satisfy these requirements concerning data analysis and report writing. The agency does not meet standard at this time.</p> <p>Corrective action: to reach full compliance, there must be a period of performance, which may provide an opportunity for the agency to collect and analyze data.</p> <p><b>CORRECTIVE ACTION IMPLEMENTATION:</b>  As described elsewhere in this report, the agency has designed an effective data collection method but to date there have been no incidents to record. In interviews, and by its actions throughout the Corrective Action stage of the PREA audit, leadership has demonstrated an interest in analyzing and remedying concerns through corrective action.</p> <p>While potentially effective plans are in place to conduct such reviews, such an activity appears to be a substantially new undertaking for the agency. As such, this new practice should be demonstrated before a finding of "meets standard" can be reached. The original finding will remain in place.</p>

<b>115.189</b>	<b>Data storage, publication, and destruction</b>
	<b>Auditor Overall Determination:</b> Does Not Meet Standard
	<b>Auditor Discussion</b>
	<p>The agency has not received any PREA complaints and has not begun data collection efforts, so is unable to satisfy these requirements concerning data handling and sharing. The agency does not meet standard.</p> <p>Corrective action: to reach full compliance, there must be a period of performance, which may provide an opportunity for the agency to collect data and handle it securely.</p> <p><b>CORRECTIVE ACTION IMPLEMENTATION:</b>  As described elsewhere in this report, the agency has designed an effective data collection method but to date there have been no incidents to record. Data retention, and publication of aggregate data without identifiers, appears to be a substantially new undertaking for the agency. As such, this new practice should be demonstrated before a finding of "meets standard" can be reached. The original finding will remain in place.</p>

<b>115.401</b>	<b>Frequency and scope of audits</b>
	<b>Auditor Overall Determination:</b> Does Not Meet Standard
	<b>Auditor Discussion</b>
	<p>The audit described in this report is reportedly the first PREA audit for the agency. The agency is not in compliance with 115.401(a).</p> <p>This being the first year of an audit cycle, the agency is in compliance with 115.401(b).</p> <p>The agency gave the auditor access to, and the ability to observe, all areas of the audited facility. Agency staff provided extensive documentation and responded quickly and effectively to all of the auditor's requests for information and documents. The agency permitted the auditor to conduct prisoner interviews and facilitated access to a private setting for that purpose, though the prisoner refused. The agency is in compliance with 115.401 (h), (i) and (m).</p> <p>The agency provided photos verifying that staff timely posted notices of the upcoming audit, which included contact information for the auditor, in various locations in the Booking Unit and where staff congregate. Staff provided agency policy that does not permit prisoners to use mail for any purpose. While it thus did not meet standard for allowing prisoners to correspond with the auditor confidentially, this posed at most a delay of less than one day. Prisoners were then able to contact the auditor upon their release, typically one day later, as the contact information was available in public areas of the building. The agency is not in compliance with 115.401 (n).</p> <p>The agency was in compliance with key provisions governing the audit process. Because it missed the first audit cycles, however, it does not meet standard for 115.401 as a whole.</p> <p><b>CORRECTIVE ACTION IMPLEMENTATION:</b> The missing element cannot be remedied as the issue took place before this audit cycle. The original finding will remain in place.</p>

<b>115.403</b>	<b>Audit contents and findings</b>
	<b>Auditor Overall Determination:</b> Does Not Meet Standard
	<b>Auditor Discussion</b>
	<p>Reportedly, the audit described in this report is the first audit for the agency. As such, there are no prior reports to post on the website. The agency does not meet standard for 115.403.</p> <p><b>CORRECTIVE ACTION IMPLEMENTATION:</b> The missing element cannot be remedied as the issue took place before this audit cycle. The original finding will remain in place.</p>



## Appendix: Provision Findings

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

115.111 (b)	Zero tolerance of sexual abuse and sexual harassment	
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
	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 lockups?	yes

115.112 (a)	Contracting with other entities for the confinement of detainees	
	If this agency is law enforcement and it contracts for the confinement of its lockup detainees in lockups operated by private agencies or other entities, including other government agencies, has the agency included the entity's obligation to adopt and comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the law enforcement agency does not contract with private agencies or other entities for the confinement of detainees.)	na

115.112 (b)	Contracting with other entities for the confinement of detainees	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the law enforcement agency does not contract with private agencies or other entities for the confinement of detainees OR the response to 115.112(a)-1 is "NO".)	na

115.113 (a)	Supervision and monitoring	
	Does the agency ensure that it has developed for each lockup a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect detainees against sexual abuse?	yes
	Does the agency ensure that it has documented for each lockup a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect detainees against sexual abuse?	yes
	Does the agency ensure that it takes into consideration the 4 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The physical layout of each lockup?	yes
	Does the agency ensure that it takes into consideration the 4 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The composition of the detainee population?	yes
	Does the agency ensure that it takes into consideration the 4 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	Does the agency ensure that it takes into consideration the 4 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any other relevant factors?	yes

115.113 (b)	Supervision and monitoring	
	In circumstances where the staffing plan is not complied with, does the lockup document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	na

115.113 (c)	<b>Supervision and monitoring</b>	
	In the past 12 months, has the lockup assessed, determined, and documented whether adjustments are needed to: 1. The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the lockup assessed, determined, and documented whether adjustments are needed to: Prevailing staffing patterns?	yes
	In the past 12 months, has the lockup assessed, determined, and documented whether adjustments are needed to: The lockup's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the lockup assessed, determined, and documented whether adjustments are needed to: The resources the lockup has available to commit to ensure adequate staffing levels?	yes

115.113 (d)	<b>Supervision and monitoring</b>	
	If vulnerable detainees are identified pursuant to the screening required by § 115.141, does security staff provide such detainees with heightened protection, to include: Continuous direct sight and sound supervision?	no
	If vulnerable detainees are identified pursuant to the screening required by § 115.141, does security staff provide such detainees with heightened protection, to include: Single-cell housing or placement in a cell actively monitored on video by a staff member sufficiently proximate to intervene, unless no such option is determined to be feasible?	yes

115.114 (a)	<b>Juveniles and youthful detainees</b>	
	Are juveniles and youthful detainees held separately from adult detainees? (N/A if the facility does not hold juveniles or youthful detainees (detainees <18 years old).)	yes

115.115 (a)	<b>Limits to cross-gender viewing and searches</b>	
	Does the lockup always refrain from conducting any cross-gender strip searches or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes

<b>115.115 (b)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the lockup document all cross-gender strip searches and cross-gender visual body cavity searches?	yes

<b>115.115 (c)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the lockup implement policies and procedures that enable detainees 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 lockup require staff of the opposite gender to announce their presence when entering an area where detainees are likely to be showering, performing bodily functions, or changing clothing?	yes

<b>115.115 (d)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the lockup always refrain from searching or physically examining transgender or intersex detainees for the sole purpose of determining the detainee's genital status?	yes
	If a detainee's genital status is unknown, does the lockup determine genital status during conversations with the detainee, 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>115.115 (e)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the agency train law enforcement 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 agency train law enforcement staff in how to conduct searches of transgender and intersex detainees in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

<b>115.116 (a)</b>	<b>Detainees with disabilities and detainees who are limited English proficient</b>	
	Does the agency take appropriate steps to ensure that detainees with	yes

	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: Detainees who are deaf or hard of hearing?	
	Does the agency take appropriate steps to ensure that detainees 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: Detainees who are blind or have low vision?	no
	Does the agency take appropriate steps to ensure that detainees 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: Detainees who have intellectual disabilities?	yes
	Does the agency take appropriate steps to ensure that detainees 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: Detainees who have psychiatric disabilities?	no
	Does the agency take appropriate steps to ensure that detainees 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: Detainees who have speech disabilities?	no
	Does the agency take appropriate steps to ensure that detainees 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 the overall determination notes.)	no
	Do such steps include, when necessary, ensuring effective communication with detainees 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 with detainees with disabilities including detainees who: Have intellectual disabilities?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with detainees with disabilities including detainees who: Have limited reading skills?	no



	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with detainees with disabilities including detainees who: are blind or have low vision?	no
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<b>115.116 (b)</b>	<b>Detainees with disabilities and detainees 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 detainees 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>115.116 (c)</b>	<b>Detainees with disabilities and detainees who are limited English proficient</b>	
	Does the agency always refrain from relying on detainee interpreters, detainee readers, or other types of detainee assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the detainee's safety, the performance of first-response duties under §115.164, or the investigation of the detainee's allegations?	yes

115.117 (a)	<b>Hiring and promotion decisions</b>	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with detainees 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 detainees 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 may have contact with detainees who: Has been civilly or administratively adjudicated to have engaged in the activity described in the bullet immediately above?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with detainees who: o 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 detainees 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 detainees who: Has been civilly or administratively adjudicated to have engaged in the activity described in the bullet immediately above?	yes

115.117 (b)	<b>Hiring and promotion decisions</b>	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with detainees?	yes

115.117 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with detainees, does the agency: Perform a criminal background records check?	yes
	Before hiring new employees who may have contact with detainees, 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

115.117 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with detainees?	yes

115.117 (e)	Hiring and promotion decisions	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with detainees or have in place a system for otherwise capturing such information for current employees?	yes

115.117 (f)	Hiring and promotion decisions	
	Does the agency ask all applicants and employees who may have contact with detainees 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 detainees 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>115.117 (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>115.117 (h)</b>	<b>Hiring and promotion decisions</b>	
	Unless prohibited by law, 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>115.118 (a)</b>	<b>Upgrades to facilities and technologies</b>	
	If the agency designed or acquired any new lockup or planned any substantial expansion or modification of existing lockups, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect detainees 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>115.118 (b)</b>	<b>Upgrades to facilities and technologies</b>	
	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 detainees 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.)	na

115.121 (a)	<b>Evidence protocol and forensic medical examinations</b>	
	If the agency is responsible for investigating allegations of sexual abuse in its lockups, 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.)	no

115.121 (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.)	no
	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. )	no

115.121 (c)	<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
	Has the agency documented its efforts to provide SAFEs or SANEs?	yes

115.121 (d)	<b>Evidence protocol and forensic medical examinations</b>	
	If the detainee is transported for a forensic examination to an outside hospital that offers victim advocacy services, does the agency permit the detainee to use such services to the extent available, consistent with security needs?	yes

<b>115.121 (e)</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 entity follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting any form of criminal or administrative sexual abuse investigations.)	na

<b>115.122 (a)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	
	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>115.122 (b)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	
	If another law enforcement agency is responsible for conducting investigations of allegations of sexual abuse and sexual harassment in its lockups, does the agency have a policy in place to ensure that such allegations are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior? (N/A if agency is responsible for conducting administrative and criminal investigations of sexual abuse or sexual harassment. See 115.121(a).)	na
	Has the agency published such policy, including a description of responsibilities of both the agency and the investigating entity, on its website or, if it does not have one, made the policy available through other means? (N/A if agency is responsible for conducting administrative and criminal investigations of sexual abuse or sexual harassment. See 115.121(a).)	na
	Does the agency document all such referrals? (N/A if agency is responsible for conducting administrative and criminal investigations of sexual abuse or sexual harassment. See 115.121(a).)	na

115.131 (a)	Employee and volunteer training	
	Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: Its zero-tolerance policy and detainees' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: The dynamics of sexual abuse and sexual harassment in confinement, including which detainees are most vulnerable in lockup settings?	no
	Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: The right of detainees and employees to be free from retaliation for reporting sexual abuse or harassment?	yes
	Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: How to detect and respond to signs of threatened and actual sexual abuse?	no
	Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: How to communicate effectively and professionally with all detainees?	no
	Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	no

<b>115.131 (b)</b>	<b>Employee and volunteer training</b>	
	Have all current employees and volunteers who may have contact with detainees received such training?	no
	Does the agency provide each employee and volunteer with annual refresher information to ensure that they know the agency's current sexual abuse and sexual harassment policies and procedures?	no

<b>115.131 (c)</b>	<b>Employee and volunteer training</b>	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	no

<b>115.132 (a)</b>	<b>Detainee, contractor, and inmate worker notification of the agency's zero-tolerance policy</b>	
	During the intake process, do employees notify all detainees of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes

<b>115.132 (b)</b>	<b>Detainee, contractor, and inmate worker notification of the agency's zero-tolerance policy</b>	
	Does the agency ensure that, upon entering the lockup, all contractors and any inmates who work in the lockup are informed of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes

<b>115.134 (a)</b>	<b>Specialized training: Investigations</b>	
	In addition to the general training provided to all employees and volunteers pursuant to §115.131, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators have received 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 115.121(a).)	yes



115.134 (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 115.121(a).)	yes
	Does this specialized training include: Proper use of Miranda and Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.121(a).)	yes
	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 115.121(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 115.121(a).)	yes

115.134 (c)	<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 115.121(a).)	yes

115.141 (a)	<b>Screening for risk of victimization and abusiveness</b>	
	If the lockup is not utilized to house detainees overnight, before placing any detainees together in a holding cell do staff consider whether, based on the information before them, a detainee may be at a high risk of being sexually abused? (N/A if the lockup is utilized to house detainees overnight.)	na
	When appropriate, do staff take necessary steps to mitigate such danger to the detainee? (N/A if the lockup is utilized to house detainees overnight.)	na

115.141 (b)	<b>Screening for risk of victimization and abusiveness</b>	
	If the lockup is utilized to house detainees overnight, are all detainees screened to assess their risk of being sexually abused by other detainees or sexually abusive toward other detainees? (N/A if lockup is NOT used to house detainees overnight.)	na

115.141 (c)	Screening for risk of victimization and abusiveness	
	In lockups described in paragraph (b) of this section, do staff always ask the detainee about his or her own perception of vulnerability? (N/A if lockup is NOT used to house detainees overnight.)	na

115.141 (d)	Screening for risk of victimization and abusiveness	
	Does the screening process in the lockups described in paragraph (b) of this section consider, to the extent that the information is available, the following criteria to screen detainees for risk of sexual victimization: Whether the detainee has a mental, physical, or developmental disability. (N/A if lockup is NOT used to house detainees overnight.)	na
	Does the screening process in the lockups described in paragraph (b) of this section consider, to the extent that the information is available, the following criteria to screen detainees for risk of sexual victimization: The age of the detainee? (N/A if lockup is NOT used to house detainees overnight.)	na
	Does the screening process in the lockups described in paragraph (b) of this section consider, to the extent that the information is available, the following criteria to screen detainees for risk of sexual victimization: The physical build and appearance of the detainee? (N/A if lockup is NOT used to house detainees overnight.)	na
	Does the screening process in the lockups described in paragraph (b) of this section consider, to the extent that the information is available, the following criteria to screen detainees for risk of sexual victimization: Whether the detainee has previously been incarcerated? (N/A if lockup is NOT used to house detainees overnight.)	na
	Does the screening process in the lockups described in paragraph (b) of this section consider, to the extent that the information is available, the following criteria to screen detainees for risk of sexual victimization: The nature of the detainee's alleged offense and criminal history? (N/A if lockup is NOT used to house detainees overnight.)	na

<b>115.151 (a)</b>	<b>Detainee reporting</b>	
	Does the agency provide multiple ways for detainees to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple ways for detainees to privately report: Retaliation by other detainees or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple ways for detainees to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes

<b>115.151 (b)</b>	<b>Detainee reporting</b>	
	Does the agency also provide at least one way for idetainees 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 entity or office able to receive and immediately forward detainee reports of sexual abuse and sexual harassment to agency officials?	no
	Does that private entity or office allow the detainee to remain anonymous upon request?	no

<b>115.151 (c)</b>	<b>Detainee reporting</b>	
	Do staff members accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Do staff members promptly document any verbal reports of sexual abuse and sexual harassment ?	yes

<b>115.151 (d)</b>	<b>Detainee reporting</b>	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of detainees?	no

<b>115.154 (a)</b>	<b>Third-party reporting</b>	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment in its lockups?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of a detainee?	yes

<b>115.161 (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 an agency lockup?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against detainees or staff who reported such an incident?	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 abuse or sexual harassment or retaliation?	yes

<b>115.161 (b)</b>	<b>Staff and agency reporting duties</b>	
	Apart from reporting to designated supervisors or officials, do 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, and investigation decisions?	yes

<b>115.161 (c)</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>115.161 (d)</b>	<b>Staff and agency reporting duties</b>	
	Does the agency report all allegations of sexual abuse, including third-party and anonymous reports, to the agency's designated investigators?	yes

<b>115.162 (a)</b>	<b>Agency protection duties</b>	
	When the agency learns that a detainee is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the detainee?	yes

<b>115.163 (a)</b>	<b>Reporting to other confinement facilities</b>	
	Upon receiving an allegation that a detainee 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?	no

<b>115.163 (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?	no

<b>115.163 (c)</b>	<b>Reporting to other confinement facilities</b>	
	Does the agency document that it has provided such notification?	no

<b>115.163 (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

115.164 (a)	<b>Staff first responder duties</b>	
	Upon learning of an allegation that a detainee was sexually abused, is the first law enforcement staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that a detainee was sexually abused, is the first law enforcement 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 a detainee was sexually abused, is the first law enforcement 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 a detainee was sexually abused, is the first law enforcement 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

115.164 (b)	<b>Staff first responder duties</b>	
	If the first staff responder is not a law enforcement staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify law enforcement staff?	no

115.165 (a)	<b>Coordinated response</b>	
	Has the agency developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to a lockup incident of sexual abuse?	yes
	If a victim is transferred from the lockup to a jail, prison, or medical facility, does the agency, as permitted by law and unless the victim requests otherwise, inform the receiving facility of the incident and the victim's potential need for medical or social services?	yes

115.165 (b)	<b>Coordinated response</b>	
	If a victim is transferred from the lockup to a jail, prison, or medical facility, does the agency, as permitted by law, inform the receiving facility of the incident unless the victim requests otherwise? (N/A if the agency is not permitted by law to inform a receiving facility, where a victim is transferred from the lockup to a jail, prison, or medical facility as a result of an allegation of sexual abuse of the incident and the victim's potential need for medical or social services.)	yes
	If a victim is transferred from the lockup to a jail, prison, or medical facility, does the agency, as permitted by law, inform the receiving facility of the victim's potential need for medical or social services unless the victim requests otherwise? (N/A if the agency is not permitted by law to inform a receiving facility, where a victim is transferred from the lockup to a jail, prison, or medical facility as a result of an allegation of sexual abuse of the incident and the victim's potential need for medical or social services.)	yes

115.166 (a)	<b>Preservation of ability to protect detainees 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 limits the agency's ability to remove alleged staff sexual abusers from contact with detainees pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes

115.167 (a)	<b>Agency protection against retaliation</b>	
	Has the agency established a policy to protect all detainees and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other detainees or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes

115.167 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures, such as housing changes or transfers for detainee victims or abusers, removal of alleged staff or detainee abusers from contact with victims, and emotional support services for detainees or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes

115.167 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, does the agency: Monitor the conduct and treatment of detainees or staff who have reported sexual abuse?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, does the agency: Monitor the conduct and treatment of detainees who were reported to have suffered sexual abuse?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, does the agency: Act promptly to remedy any such retaliation?	yes

115.167 (d)	Agency protection against retaliation	
	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

115.171 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations 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 115.121(a).)	no
	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 115.121(a).)	yes



<b>115.171 (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 115.134?	yes

<b>115.171 (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>115.171 (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?	no

<b>115.171 (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 detainee or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring a detainee who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes

<b>115.171 (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?	no
	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?	no

<b>115.171 (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?	no

<b>115.171 (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>115.171 (i)</b>	<b>Criminal and administrative agency investigations</b>	
	Does the agency retain all written reports referenced in 115.171(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	no

<b>115.171 (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 lockup or agency does not provide a basis for terminating an investigation?	yes

<b>115.171 (l)</b>	<b>Criminal and administrative agency investigations</b>	
	When outside agencies investigate sexual abuse, does the agency 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 115.121(a). )	na

<b>115.172 (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>115.176 (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>115.176 (b)</b>	<b>Disciplinary sanctions for staff</b>	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes

<b>115.176 (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

115.176 (d)	<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: o 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

115.177 (a)	<b>Corrective action for contractors and volunteers</b>	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with detainees?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies(unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes

115.177 (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 detainees?	yes

115.178 (a)	<b>Referral for prosecution for detainee-on-detainee sexual abuse</b>	
	When there is probable cause to believe that a detainee sexually abused another detainee in a lockup, does the agency refer the matter to the appropriate prosecuting authority?	yes

115.178 (b)	<b>Referral for prosecution for detainee-on-detainee sexual abuse</b>	
	If the agency itself is not responsible for investigating allegations of sexual abuse, does the agency inform the investigating entity of this policy? (N/A if the agency/facility is responsible for administrative and criminal investigations. See 115.121(a).)	na

<b>115.182 (a)</b>	<b>Access to emergency medical and mental health services</b>	
	Do detainee victims of sexual abuse in lockups receive timely, unimpeded access to emergency medical treatment?	yes

<b>115.182 (b)</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>115.186 (a)</b>	<b>Sexual abuse incident reviews</b>	
	Does the lockup 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?	no

<b>115.186 (b)</b>	<b>Sexual abuse incident reviews</b>	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	no

<b>115.186 (c)</b>	<b>Sexual abuse incident reviews</b>	
	Does the review team include upper-level management officials, with input from line supervisors and investigators?	yes

115.186 (d)	Sexual abuse incident reviews	
	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?	no
	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 was motivated or otherwise caused by other group dynamics at the lockup?	no
	Does the review team: Examine the area in the lockup where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	no
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	no
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	no
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.186(d) (1)-(d)(5), and any recommendations for improvement and submit such report to the lockup head and agency PREA coordinator?	no

115.186 (e)	Sexual abuse incident reviews	
	Does the lockup implement the recommendations for improvement, or document its reasons for not doing so?	no

115.187 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at lockups under its direct control using a standardized instrument and set of definitions?	yes

115.187 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	no

<b>115.187 (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 Local Jail Jurisdictions Survey of Sexual Violence conducted by the Department of Justice, or any subsequent form developed by the Department of Justice and designated for lockups?	yes

<b>115.187 (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?	no

<b>115.187 (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 detainees? (N/A if the agency does not contract for the confinement of its detainees.)	na

<b>115.187 (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.)	na

115.188 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.187 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?	no
	Does the agency review data collected and aggregated pursuant to § 115.187 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?	no
	Does the agency review data collected and aggregated pursuant to § 115.187 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 lockup, as well as the agency as a whole?	no

115.188 (b)	Data review for corrective action	
	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?	no

115.188 (c)	Data review for corrective action	
	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?	no

115.188 (d)	Data review for corrective action	
	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 lockup?	no

115.189 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.187 are securely retained?	no



<b>115.189 (b)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency make all aggregated sexual abuse data, from lockups under its direct control and any private agencies 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?	no

<b>115.189 (c)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	no

<b>115.189 (d)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency maintain sexual abuse data collected pursuant to § 115.187 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	no

<b>115.401 (a)</b>	<b>Frequency and scope of audits</b>	
	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.)	no

115.401 (b)	Frequency and scope of audits	
	Is this the first year of the current audit cycle? (Note: a “no” response does not impact overall compliance with this standard.)	yes
	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.)	na
	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.)	na

115.401 (h)	Frequency and scope of audits	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes

115.401 (i)	Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes

115.401 (m)	Frequency and scope of audits	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes

115.401 (n)	Frequency and scope of audits	
	Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	no

115.403 (f)	Audit contents and findings	
	<p>The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports within 90 days of issuance by auditor. The review period is for prior audits completed during the past three years PRECEDING THIS AGENCY AUDIT. In the case of single facility agencies, the auditor shall ensure that the facility's last audit report was published. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A only if there have been no Final Audit Reports issued in the past three years, or in the case of single facility agencies that there has never been a Final Audit Report issued.)</p>	na