

VICTORIA REGIONAL JUVENILE JUSTICE CENTER	Policy No: 14.5	Pages: 18
Chapter: Resident's Rights	Related Standards:	
Subject: Prison Rape Elimination Act (PREA)	PREA 115.311, .313, .314, .315, .316, .317, .321, .322, .331, .332, .333, .334, .335, .341, .342, .351, .352, .353, .354, .361, .362, .363, .364, .365, .367, .368, .371, .372, .373, .376, .377, .378, .381, .382, .383, .386, .387	

I. POLICY: 115.311

Prison Rape Elimination Act (PREA) was created in 2003 to establish a Zero Tolerance Policy for the elimination, reduction and prevention of sexual abuse and sexual harassment within corrections systems.

Victoria County Juvenile Justice Center (VCJJC) is committed to abiding by this law and the VRJJC has a zero tolerance policy regarding sexual abuse and sexual harassment. To help achieve the agency's zero tolerance goal, the facility has implemented prevention planning, responsive plans, training, and education for both residents and staff, screening processes, reporting procedures, official response policies, trained investigators and trained medical and mental health practitioners. Combined, these efforts will ensure that all residents of this facility, have the right to be free from sexual abuse, sexual harassment, neglect, and exploitation. This includes not being subjected to sexually assaultive, abusive, and/or harassing behavior from staff and other residents. VCJJC is a secure facility and there is NO such thing as consensual sex, meaning no person regardless of age can "agree" to have sex or sexual contact with staff or another resident. If the facility learns a resident is subject to a substantial risk of imminent sexual abuse, the facility shall take immediate action to protect the resident. Within this policy all references to sexual abuse will also include sexual harassment, as appropriate.

PREA Coordinator

The VCJJC Compliance Officer is the designated PREA Coordinator for the pre-adjudicated residents, post adjudicated residents and the probation department. The PREA coordinator shall have sufficient time and authority to develop, implement, and oversee efforts to comply with the PREA standards.

Residents with disabilities are afforded the same rights and will be provided access to interpreters, presented material to effectively communicate with those residents with disabilities, (including, deaf or hard of hearing, low vision or blind, intellectual, psychiatric or speech disabilities). Residents will have access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary. Interpreters will be provided through local community resources. Residents will be provided materials in formats or through methods that ensure effective communication with the above residents. Residents with disabilities have equal opportunity to participate in and benefit from all aspects of VCJJC's efforts to prevent, detect, and respond to sexual abuse and sexual harassment.

VRJJC will not rely upon resident interpreters, resident readers, or other types of resident assistants except in limited circumstances where an extended delay in obtaining an interpreter could compromise the residents safety, the performance of first response duties or the investigation of the resident's allegations.

NONDISCRIMINATION

All youth in the facility, shall be free from physical, sexual, verbal, or emotional abuse or harassment by staff, volunteers, contractors, or other youth. Fair and equal treatment shall be provided to all youth, irrespective of gender identity, gender expression, and sex characteristics, and shall ensure all youth have equal access to available services, care and treatment. Staff shall intervene promptly and consistently to stop any adult or youth that bullies, name-calls, harasses, demeans, mistreats, or abuses a youth.

II. **DEFINITIONS: 115.5 & 115.6**

The following definitions shall apply:

Texas Juvenile Justice Department – referred to hereafter as TJJD.

Exigent circumstances – any set of temporary and unforeseen circumstances that require immediate action in order to combat a threat to the security or institutional order of a facility.

LGBTQQI; Acronym that refers to individuals who identify as lesbian, gay, bisexual, transgender, queer, questioning, or intersex.

Gender Norms: A behavior or characteristic that society attributes to a particular gender. Gender norms vary between cultures and often change over time.

Gender Nonconforming: A person whose appearance or manner does not conform to traditional gender stereotypes. Includes youth who identify as “non-binary,” meaning that their gender identity is neither man/boy nor woman/girl.

Gender Transition: A process by which transgender people align their anatomy (medical transition), identity documents (legal transition) or gender expression (social transition) with their gender identity.

Lesbian: Describes a woman who is attracted to women.

Gay: Describes a person who is attracted to people of the same gender (men attracted to men, or women attracted to women).

Bisexual: Describes a person who is attracted to both men and women.

Transgender: Describes a person whose gender identity is different from their assigned sex and who lives, or desires to live, in accord with their gender identity.

Transgender man: A person who was assigned female at birth, but identifies as, and desires to live as, a man.

Transgender Woman: A person who was assigned male at birth, but identifies as and desires to live as a woman.

Questioning: Describes people who are unsure of, or in the process of discovering, their sexual orientation or gender identity.

Queer: A person who does not identify as straight or cisgender.

Intersex.: A person who’s sexual or reproductive anatomy or chromosomal pattern does not seem to fit typical definitions of male or female. Variations may appear in a person’s chromosomes, genitals, or reproductive organs like testes or ovaries. Some characteristics are discovered at birth while others may not be discovered until puberty or late in life. Intersex medical conditions are sometimes referred to as disorders of sex development.

Sexual Orientation: An attraction to others that ranges from attraction to only men or only women, to varying degrees of attraction to both men and women, to attraction to neither men nor women.

Abuse Related Definitions 115.311

1. **Sexual abuse includes:**
 - a. Sexual abuse of a resident by another resident; and
 - b. Sexual abuse of a resident by a staff member, contractor, or volunteer.

2. **Sexual abuse by another resident includes any of the following acts, if the victim is coerced into such act by overt or implied threats of violence, or is unable to consent or refuse;**
 - a. Contact between the penis and the vulva or the penis and the anus, including penetration, however slight;
 - b. Contact between the mouth and the penis, vulva, or anus;
 - c. Penetration of the anal or genital opening of another person, however slight, by a hand, finger, object, or other instrument; and
 - d. Abusive Sexual Contact (less severe) includes: Any other intentional touching, either directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or the buttocks of any person, excluding contact incidental to a physical altercation.

3. **Sexual abuse by a staff member, contractor or volunteer includes:**
 - a. Contact between the penis and the vulva or the penis and the anus, including penetration, however slight;
 - b. Contact between the mouth and the penis, vulva, or anus;
 - c. Contact between the mouth and any body part where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
 - d. Penetration of the anal or genital opening, however slight, by a hand, finger, object, or other instrument, that is unrelated to official duties or where the staff member, contractor or volunteer has the intent to abuse, arouse, or gratify sexual desire;
 - e. Any other intentional contact, either directly or through the clothing, of or with the genitalia, anus, groin, breasts, inner thigh, or the buttocks, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
 - f. Any attempt, threat, or request by staff, contractor, or volunteer to engage in the activities described in paragraphs (a)-(e) of this section;
 - g. Any display by a staff member, contractor, or volunteer of his or her uncovered genitalia, buttocks, or breast in the presence of a resident; and
 - h. Voyeurism by a staff member, contractor, or volunteer.

4. **Sexual harassment includes:**
 - a. Repeated and unwelcome sexual advances, requests for sexual favors, or verbal comments, gestures, or actions of a derogatory or offensive sexual nature by a resident directed toward another.
 - b. Repeated verbal comments or gestures of a sexual nature to a resident by a staff member, contractor, or volunteer, including demeaning references to gender, sexually suggestive or derogatory comments about body or clothing or obscene language or gestures.

5. **Sexual Misconduct:**

Grooming behavior or inappropriate sexual behavior that does not reach the level of sexual harassment or Sexual Abuse.

6. **Voyeurism by a staff member, contractor, or volunteer means;**
 - a. An invasion of privacy of a resident by staff for reasons unrelated to official duties, such as peering at a resident who is using a toilet in the cell to perform bodily functions.
 - b. Requiring a resident to expose his or her buttocks, genitals, or breasts.
 - c. Taking images of all or part of a resident's naked body or of a resident performing bodily functions.

7. **Indecent Exposure by a staff, contractor, or volunteer includes;**

Any display of his or her genitalia, buttocks, or breast in the presence of a youth.

III. PROCEDURES:

1. **Hiring and Promotion 115.317**
 - a. TJJJD Standards will be followed as outlined in policies 1.6 Consultants, Contract Employees and other Agencies, 3.1 Employment, and 20.1 Volunteers.
 - b. The agency or facility shall not hire or promote anyone who may have contact with residents and shall not enlist the services of any contractor who may have contact with residents who—
 - (1) 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);
 - (2) Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or

- (3) Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (b) (2) of this section.
- c. VRJJC shall 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 the residents.
- d. Prior to hiring new employees who may have contact with residents, the staff services coordinator shall:
 - (1) Perform a criminal background records check using the State of Texas Department of Public Safety fingerprint system (FAST system). The system will notify the staff services coordinator of any arrest for criminal activity of current employees, contractors and volunteers/interns who may have contact with residents.
 - (2) Consult the child abuse registry maintained by the Texas Department of Family and Protective Services Centralized Background Check system.
 - (3) Consistent with Federal, State, and local law, the JSO hiring supervisor shall make the best effort 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.
- e. Criminal background records check,(FAST) system using the DPS and FBI databases and child abuse registries will be conducted prior to enlisting the services of any contractor who may have contact with residents by the staff services coordinator.
- f. These checks will notify the staff services coordinator of arrest for criminal activity of employees/contractors/interns who may have contact with residents.
- g. All applicants and employees who may have contact with residents directly shall be asked by the staff services coordinator about previous misconduct described in paragraph (b) of this section in written applications or interviews for hiring or promotions and in any interviews or written self-evaluations conducted as part of reviews of current employees. VRJJC requires that all employees, contractors, interns and volunteers immediately (within 24-hours) disclose, in written and verbal form, to their immediate supervisor, or his/her designee in the supervisors' absence, any misconduct.
- h. Material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination.
- i. Unless prohibited by law, the facility administrator shall provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work.
- j. Background checks using the FAST system will be conducted every 2 years on employees, contractors and interns.
- k. The DFPS Child Registry check will be conducted before hiring new employees and before enlisting the services of any contractors, interns and volunteers who may have direct contact with residents. The Child Registry check will be conducted every 5 years from the initial registry check or upon an employee promoting to a supervisory position (change in job responsibilities/duties).

2. **Supervision and Monitoring 115.313**

- a. Staffing requirements will meet Standards:
 - 1. A Juvenile Supervision officer (JSO) will be in the line of sight and sound of the residents (actively supervising).
 - 2. One JSO to every 8 residents during waking hours. More than 8 residents in a unit will require an additional security staff.
 - 3. One JSO to every 16 residents during sleeping hours. During sleeping hours a JSO may provide supervision for 2 units (16 residents total), if the units are directly across from each other and the doors remain open allowing for line of sight and sound.
 - 4. The JSO cannot leave the area unless relieved by a JSO taking responsibility for the supervision of the residents.

- b. Supervisors will conduct and document unannounced rounds at least once weekly on the AM (6:00AM-6:00PM) and PM (6:00PM-6:00AM) shift to identify and deter staff sexual abuse and harassment. Staff will not be alerted to the unannounced unscheduled rounds occurring by other employees, contractors or volunteers. The shift Juvenile Supervision Officer (JSO) Supervisor or JSO III will document the unannounced rounds on the supervisor unit check log to be maintained in the JSO supervisor's office. These rounds are to deter staff sexual abuse and sexual harassment. These forms will be turned in to the PREA coordinator on the 20th of each month.
- c. The facility utilizes video monitoring systems throughout the facility. Whenever necessary, but no less frequently than once each year, in consultation with the PREA Coordinator, the facility shall assess, determine, and document whether adjustments are needed to:
 - 1. The staffing plan;
 - 2. Prevailing staffing patterns;
 - 3. The deployment of video monitoring systems and other monitoring technologies; and
 - 4. The resources available to commit to ensure adherence to the staffing plan.
 - 5. Digital surveillance files will be retained for 15 days.
- d. Unless there is an exigent circumstance staff of the opposite gender entering a unit will announce their presence when entering an area where residents are likely to be showering, performing bodily functions, or changing clothing. Staff will document on the unit log if an exigent circumstance occurred.
- e. Residents can shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breast, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks.

3. Training 115.331, 115.332, 115.335

- a. Prior to having contact with the residents all staff, teachers, counselors, contractors, volunteers and interns who have contact with the residents will be trained on:
 - 1. The facility Zero Tolerance Policy for sexual abuse and sexual harassment;
 - 2. How to fulfill their responsibilities under the facility sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures;
 - 3. Residents' right to be free from sexual abuse and sexual harassment;
 - 4. The right of residents and employees to be free from retaliation for reporting sexual abuse and sexual harassment;
 - 5. The dynamics of sexual abuse and sexual harassment juvenile facilities;
 - 6. The common reactions of juvenile victims of sexual abuse and sexual harassment;
 - 7. How to detect and respond to signs of threatened and actual sexual abuse and how to distinguish between consensual sexual contact and sexual abuse between residents;
 - 8. How to avoid inappropriate relationships with residents;
 - 9. How to communicate effectively and professionally with residents, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming residents;
 - 10. How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities; and
 - 11. Relevant laws regarding the applicable age of consent.
 - 12. Refresher training will be conducted every year. The training agenda sheet will be maintained listing topics covered relating to sexual abuse or sexual harassment. A sign in sheet of attendees will be maintained for each training provided including the dates, times and duration of training. A post test will be given to ensure the staff, volunteers, and contractors understand the training received. Following training, staff, volunteers, and contractors will sign an acknowledgement that they understood the training provided.

- b. In addition to the facility Zero Tolerance Policy, all full and part time medical and mental health care practitioners will be trained in the following:
 1. How to detect and assess signs of sexual abuse and sexual harassment.
 2. How to preserve physical evidence of sexual abuse.
 3. How to respond effectively and professionally to juvenile victims of sexual abuse and sexual harassment.
 4. How and to whom to report allegations or suspicions of sexual abuse and sexual harassment.
 5. Medical and mental health practitioners are required by mandatory reporting laws to report sexual abuse to the local Sheriff Department, Texas Family and Protective Services, Texas Juvenile Justice Department and the Facility Administrator.
 6. Medical and mental health practitioners shall inform residents at the initiation of services of their duty to report and the limitations of confidentiality regarding sexual abuse.
 7. All training will be maintained in the individual's personnel/training file.
 8. VRJJC medical health staff shall not conduct forensic investigations but will assist and cooperate with the local law enforcement agency in conducting the investigation.

IV. SEARCHES: 115.315 See Policy 10.13

Cross gender strip or pat searches will be conducted **only** in exigent circumstances (documented and justified) or when performed by LVN/Physician/Physician's Assistant. Staff will be trained to conduct cross-gender pat-down searches, and searches of transgender and intersex residents, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs.

1. All residents are able to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their genitals, buttocks, breasts (female), except in the case of an emergency, by accident, or performing routine cell or room checks.
2. Staff shall not search or physically examine a transgender or intersex resident for the sole purpose of determining the resident's genital status. If the resident's genital status is unknown, it may be determined during conversations with the resident, by reviewing medical records, or, if necessary by learning that information as part of a broader medical exam conducted in private by a medical practitioner.
3. Body Cavity Search: An anal or genital body cavity search is the physical probing search of the resident's rectum and/or vagina. An anal or genital body cavity search shall be conducted only if there is **probable cause** to believe that a resident is concealing contraband. The search shall only be conducted by a licensed physician in a private room or setting. (taken from 10.13)

V. OBTAINING INFORMATION 115.341(2)(d), 115.342

Immediately upon intake (within 2 hours) and periodically throughout a resident's confinement, information will be obtained and used about the residents' personal history and behavior to reduce the risk of sexual abuse by or upon a resident through the following forms:

- a. Pre - the facility objective risk assessment (intake behavioral screening), intake behavioral screening follow-up questionnaire, and medical health screening forms.
 - b. Post – in addition to the above forms: the interagency common application, social history report, court orders or the referral information form.
1. Residents will be screened by the intake officer for the risk of sexual victimization and abusiveness using the facility objective behavioral screening and medical health screening forms.
 2. Information will be obtained through conversations with the resident, medical and mental health screenings, during classification assessments, and by reviewing court records,

case files, facility behavioral records and other relevant documentation from the resident's files.

3. The intake staff will provide this information to the supervisor on duty for review to determine if the information indicates a heightened need for supervision, additional safety precautions, or separation from certain other residents.
4. Sensitive information obtained will not be exploited to the resident's detriment by staff or other residents. All staff will follow appropriate confidentiality when dealing with sensitive information. Information obtained will only be used to make housing, bed, program, and education assignments with the goal to keep all residents safe and free from sexual abuse and to reduce the risk of victimization.
5. Periodically throughout the resident's confinement information will be obtained about the residents' personal history and behavior to reduce the risk of sexual abuse by or upon a resident. The intake officer will conduct the Behavioral Reassessment Screening for the Pre-adjudication residents every 30 days. The case managers will conduct the Behavioral Screening on the Post-adjudicated residents every 90 days. This information will be placed in the resident's file and relayed to the supervisor on duty. If warranted, the supervisor will notify the Facility Administrator to determine if further action is necessary.
6. Medical and mental health practitioners shall inform residents at the initiation of services of their duty to report and the limitations of confidentiality regarding information gathered.

VI. Placement of Residents in Housing, Bed, Program, and Education 115.342

1. All information obtained upon intake and periodically throughout the residents' confinement will be used to make housing, bed, program, and education assignments with the goal of keeping all residents safe and free from sexual abuse.
2. A resident may be isolated only as a last resort when less restrictive measure are inadequate to keep them and other residents safe, and then only until an alternative means of keeping all residents safe can be arranged. If a resident is isolated the facility shall clearly document:
 - a. The basis for the facility's concern for the resident's safety.
 - b. The reason why no alternative means of separation can be arranged.
3. During any period of isolation residents shall not be denied large-muscle exercise, educational programming, special education services and other programs to the extent possible. Residents in isolation shall receive daily visits from a medical or mental health care clinician.
4. Lesbian, gay, bisexual, transgender, or intersex (LGBTI) residents shall not be placed in particular housing, bed, or other assignments solely on the basis of such identification or status, nor shall agencies consider LGBTI identification or status as an indicator of likelihood of being sexually abusive.
5. In deciding to assign a transgender or intersex resident to a facility for male or female residents, and in making other housing and programming assignments, the facility shall consider on a case-by-case basis whether a placement would ensure the resident's health and safety, and whether the placement would present management or security problems.
6. Placement and programming assignments for each transgender or intersex resident shall be reassessed by the Administrator and PREA Coordinator at least twice each year to review any threats to safety experienced by the resident.
7. A transgender or intersex resident's own view with respect to his/her own safety shall be given serious consideration.
8. Transgender or intersex residents shall be given the opportunity to shower separately from other residents.
9. A review will be held every 30 days by the administrator and supervisor to determine whether there is a continuing need for separation from the general population.

VII. RESIDENT EDUCATION 115.316, 115.333

1. Residents shall receive information explaining the agency's zero tolerance policy in an age appropriate fashion including how to report incidents or suspicions of sexual abuse or sexual harassment in the following manner:

- a. Pre - by the officer conducting the intake process (upon arrival) verbally and will be provided the zero tolerance pamphlet.
 - b. Post – by the case manager assigned to the youth verbally and provided the zero tolerance pamphlet within 12 hours of arrival.
2. Additional comprehensive age appropriate education shall be provided within 10 days of intake in the unit as scheduled every weekend. The JSO assigned the unit will ensure that the youth watch the comprehensive video. The comprehensive education will be in a format accessible to all residents, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled as well as to the residents who have limited reading skills. If the youth reports a deficiency or the staff are aware of a deficiency in any of these areas they will report to the supervisor the need for additional resources. The supervisor will notify the facility administrator who will contact the appropriate community resource services. Arrangements will be made for an interpreter who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary, when necessary. In all circumstances this facility will not rely on resident interpreters.
3. The education will include the youth's rights to be free from sexual abuse and sexual harassment and to be free from retaliation from reporting such incidents, and regarding agency policies and procedures for responding to such incidents.
4. Upon conclusion of the video the JSO assigned the unit will ensure the resident signs the PREA unit orientation form acknowledging participation in this education. The form will be turned in to the supervisor on duty to be maintained in the resident's individual file in the supervisor's office or to the case manager for the post residents.
5. PREA information will be continuously and readily available in the unit, the resident handbook and posted in the unit.

VIII. Responsive Planning – When a resident is subject to a substantial risk of imminent sexual abuse, immediate action will be taken to protect the resident. 115.322, 115.351, 115.371

VCJJC does not detain residents solely for civil immigration purposes. 115.351, 115.353

1. As a resident of the facility, there are some things resident's can do to minimize the risk of becoming a victim of sexual assault, abuse, or harassment:
 - Avoid isolated or secluded areas of the facility.
 - Never share personal information with another resident.
 - Never accept gifts or favors from another resident.
 - Never give gifts to or do favors for another resident.
 - Be cautious of residents who attempt to be overly friendly, tries to isolate you from interacting with other residents or staff, or repeatedly shows interest in your personal matters.
 - Report all incidents of actual or attempted sexual contact, threats against you or your family, intimidation, or sexual conversations.
2. Resident's have the right to privately report sexual assault, abuse, harassment or retaliation by other residents or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents to any of the following:

Juvenile Probation Officer, Juvenile Supervision Officer, Counselor, Volunteer, Intern, Shift Supervisor, Case Manager, Compliance Officer/PREA Coordinator, Facility Administrator, or by using the facility's grievance process. JSO's will ensure copies of blank grievances are available in the unit at all times. Resident's shall have access to a grievance copy at all times. Upon completion, the resident may turn the grievance in to the supervisor on duty.

3. Resident's may also privately and anonymously report sexual assault, abuse, or harassment directly to the Texas Juvenile Justice Department (TJJD) at 1-877-STOP Abuse Neglect & Exploitation (ANE) at 1-877-786-7263 **or the Victoria County Sheriff Department 361-575-0651.**
 - a. Youth may request to be taken to the phone to make the report confidentially; or
 - b. Youth may use the phone in the unit to make a report.
4. Staff shall accept reports made verbally, in writing, anonymously, and from third parties and shall promptly document any verbal reports on a witness statement. Staff will then follow the mandatory reporting duties. The witness statement will be turned in to the supervisor on duty to follow the mandatory reporting duties.
5. Staff may privately report sexual abuse and sexual harassment of residents to their local law enforcement, state reporting agency, TJJD, direct supervisor, facility administrator or the PREA coordinator. Staff must report sexual abuse and sexual harassment immediately to the Administrator.
6. Any report of sexual assault, abuse, or harassment alleged to have occurred within the facility will be investigated to the fullest extent by the PREA Coordinator or Intake Officer and will be reported to the Victoria County Sheriff's Department for possible criminal investigation and prosecution. The PREA coordinator/Intake Officer will follow up on all investigations with the sheriff office and/or TJJD until completion of the investigation.

IX. Medical and Mental Health Care 115.381, 115.382

1. If any of the intake screening forms indicates a resident has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, the intake officer shall document the information on the behavior health screening or medical health screening form and provide a copy of the form(s) to the following:
 - a. Pre – mental health care practitioner
 - b. Post – the case managerIf required, a follow up meeting with the mental health care practitioner will be held within 14 days of the intake screening.
2. If the behavior screening indicates the resident has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, staff shall ensure the resident is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening following the above steps
3. If the mental health practitioner determines through the follow-up that treatment is not warranted, the facility need not provide services.
4. Any information related to sexual victimization or abuse that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners and other staff, as necessary, to develop treatment plans and security and management decisions, including housing, bedding, education, and program assignments, or as otherwise required by Federal, State, or Local law.

X. Ongoing Medical and Mental Health Care for Sexual Abuse Victims and Abusers 115.383

1. The facility shall offer medical and mental health evaluation and, as appropriate, treatment to all resident's who have been victimized or have been a perpetrator of sexual abuse in a juvenile facility (substantiated investigations).
2. The evaluation and treatment shall include, as appropriate, follow-up services, treatment plans, and when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody.
3. Medical and mental health services shall be provided to the victims consistent with the community level of care.
4. Resident victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests.

5. If pregnancy results from the abuse, the victim shall receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services.
6. Resident victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections as medically appropriate.
7. Treatment services shall be provided to the victim without financial cost and regardless if the victim names the abuser or cooperates with any investigation of the incident.
8. The facility shall attempt to conduct a mental health evaluation of all known resident-on-resident abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners.
9. The facility mental health practitioners will determine the length of treatment needed.

XI. Mandatory Reporting 115.321, 115.322, 115.352, 115.353, 115.354, 115.361, 115.362, 115.367, 115.368

1. All staff (including medical and mental health practitioners) shall report sexual abuse to the FA, PREA Coordinator, Sheriff's department and TJJJ and also shall comply with all mandatory child abuse reporting laws.
2. All allegations of sexual abuse/sexual harassment and staff neglect or violation of responsibilities that may have contributed to such incidents will be investigated either criminally or administratively.
3. Residents and staff shall immediately report sexual abuse or sexual harassment, staff neglect or violation of staff responsibilities, or retaliation to any employee, to TJJJ (1-877-786-7263) or by using the facility grievance process. There will be no time limit on when an allegation of sexual abuse can be reported.
4. TJJJ will inform the Facility Administrator of all reports made to TJJJ to ensure they are properly investigated. The facility administrator will notify the Sheriff Department and the PREA Coordinator to initiate the investigation. The administrator will take steps to separate the alleged victim from the alleged perpetrator.
5. If the Sheriff's department chooses not to conduct an investigation, TJJJ peace officers may conduct a criminal investigation.
6. Staff shall accept reports made verbally, in writing, anonymously, and from third parties and shall promptly document any verbal reports on an informative incident report.
7. Staff shall report immediately to the Administrator, Supervisor on duty, PREA Coordinator and Sheriff Department of any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurred in the facility, whether or not it is part of the agency; retaliation against residents or staff who reported such an incident and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.
8. Apart from reporting to the above, staff shall keep confidential any information related to the sexual abuse report to anyone other than to the extent necessary, to make treatment, investigation and other security and management decisions.
9. Residents are not required to use the informal grievance process or attempt to resolve with staff, an alleged incident of sexual abuse.
10. A resident may submit a grievance alleging sexual abuse without submitting it to the staff who is the subject of the complaint.
11. If a resident who alleges sexual abuse or sexual harassment submits a grievance, the grievance clerk shall ensure that the grievance is not referred to the staff member who is the subject of the complaint.
12. Grievances related to sexual abuse or allegations of sexual abuse (i.e., allegations of sexual abuse, a fear of sexual abuse, or allegations of mishandling of an incident or sexual abuse) are immediately converted to investigations that are outside of the facility's administrative remedies process, and are not considered by the facility to be grievances.
13. Upon receipt of an emergency grievance alleging a resident is subject to a substantial risk of imminent sexual abuse immediate corrective action shall be taken which shall include the following :
 - a. Ensure the resident is safe and in a safe location,
 - b. Notify the Supervisor on duty, or

- c. Initiate an investigation.
14. The following additional steps may be taken:
 - a. Make a unit change to remove the alleged victim from the alleged perpetrator,
 - b. Assign additional staff to monitor the resident activities, or
 - c. Place the staff on administrative leave until the completion of an investigation.
15. An initial response will be provided within 48 hours and a completed final agency decision within 5 calendar days. The initial response and final decision shall document the determination whether the resident is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance.
16. A final decision on a grievance alleging sexual abuse must be made within 90 days of the initial filing of the grievance. This time period shall not include time consumed by residents in preparing any administrative appeal. Following the investigation of the report alleging sexual abuse the facility administrator will review the investigation and make a final decision on the grievance. The PREA Coordinator/Investigator will inform the resident of the final decision.
17. An extension of time to respond up to 70 days may be claimed if the time allowed is insufficient to make an appropriate decision. The resident will be notified in writing of any extension and provided with a date by which a decision will be made.
18. At any level of the administrative process, including the final level, if the resident does not receive a response within the time allotted for reply, including any properly noticed extension, the resident may consider the absence of a response to be a denial at that level.
19. Third parties, including fellow residents, staff members, family members, attorneys, and outside advocates shall be permitted to assist residents in filing requests for administrative remedies relating to allegations of sexual abuse, and shall also be permitted to file such requests on behalf of the residents.
20. If a resident declines to have third-party assistance in filing a grievance alleging sexual abuse, the residents' decision to decline will be documented.
21. If a third party, other than a parent or legal guardian, files a request on behalf of a resident and the alleged victim does not want to pursue charges on his or her behalf, the refusal will be documented within the investigation. The facility will follow subsequent steps in the administrative remedy process.
22. A parent or legal guardian shall be allowed to file a grievance regarding allegations of sexual abuse, including appeals, on behalf of the resident without the resident agreeing to have the request filed on his or her behalf.
 - a. A third party grievance form is available on www.victoriacountytx.org. Go to the County Department link
 - b. Click on Juvenile Services link
 - c. To Report Abuse link, and
 - d. The Community Grievance Form.
 - e. Print the form and mail or deliver to:
97 Foster Field,
Victoria TX. 77904
Attention: PREA Coordinator
23. Residents may use the emergency grievance process (Policy 14.2 Grievances) to file allegations of sexual abuse and sexual harassment if the resident is subject to a substantial risk of imminent sexual abuse. The emergency grievance process provides the resident with access to report to the supervisor on duty immediately to ensure the resident is not at substantial risk of imminent sexual abuse.

Emergency Grievance process:

 - a. The resident shall request of the JSO on duty to speak to the supervisor.
 - b. The resident will make the report to the supervisor.
 - c. If the resident alleges they are at substantial risk of imminent sexual abuse, the supervisor will take immediate steps to ensure the safety of the resident. Immediate corrective action may be taken.
 - d. The supervisor will then follow the mandatory reporting steps.
24. In collaboration with the Administrator an initial response will be provided within 48 hours with a final decision within 5 calendar days. The initial response and final decision shall

document the determination if the resident is at substantial risk of imminent sexual abuse and the action taken.

25. All residents and staff who report sexual abuse or harassment or cooperate with sexual abuse or harassment investigations will be protected from retaliation by other residents or staff which will be monitored by the PREA coordinator/investigator and Shift Supervisor.
26. The alleged staff or resident abusers will not have contact with the victim. Staff will be placed on leave until the conclusion of the investigation with possible disciplinary or criminal action as warranted. Residents may be placed in another unit until the conclusion of the investigation.
27. Emotional support services will be provided to staff and residents related to sexual abuse or who fear retaliation for reporting sexual abuse or harassment or for cooperating with investigations. Emotional support may include crisis intervention and counseling services. Emotional support services will be provided as follows:
 - a. Staff through the employee assistance program.
 - b. Residents alleging sexual abuse will be referred to the Sexual Abuse Nurse Examiner (SANE) at Citizens Medical Center (CMC). The SANE Nurse will determine referrals to services based on their professional training to include but not limited to emotional support for sexual abuse and/or retaliation.
 - c. Residents alleging sexual harassment or retaliation within the facility or previous sexual abuse will be referred to the facility mental health professional (MHP) to determine if further services are warranted. The facility MHP may refer for additional community services based on their professional judgment.
 - d. Reasonable communication between residents and the emotional support service will be provided in as confidential a manner as possible.
 - e. Residents shall be informed, prior to giving them access, of the extent to which such communication will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws.
28. For at least 90 days following a report of sexual abuse, the Facility Administrator/designee shall monitor the conduct or treatment of residents or staff who reported the sexual abuse and of residents who were reported to have suffered sexual abuse to determine if there are changes that may suggest possible retaliation by residents or staff, and shall act promptly to remedy any such retaliation. The following shall be monitored:
 - a. Resident disciplinary reports,
 - b. Unit housing,
 - c. Program changes, or
 - d. Negative performance reviews or reassignments of staff will be monitored by the Facility Administrator.
29. Monitoring shall continue beyond 90 days if the initial monitoring indicates a continuing need.
30. For residents, such monitoring shall also include periodic status checks to be conducted by the Shift Supervisors. Status checks will be conducted randomly twice weekly and documented on a status check form. The status check form will be maintained in the Compliance officer/PREA Coordinator's office.
31. If an individual who cooperates with an investigation expresses a fear of retaliation, the facility shall take appropriate measure, to include contacting the Sheriff's Department, to protect the individual against retaliation.
32. The obligation to monitor shall terminate if the allegation is unfounded.
33. Segregation to protect a resident who is alleged to have suffered sexual abuse shall follow requirements of the VRJJC's isolation policy to protect the resident in the least restrictive manner. This will occur only as a "last resort." Resident's in isolation will be provided with a daily large-muscle exercise, educational programming or special education service, daily visits from medical or mental health care clinician and access to regular program opportunity to the extent possible. If a resident is placed in isolation, a review will be held every 30 days to determine whether there is a continuing need for separation from the general population.

XII. Interventions and Disciplinary Sanctions for Residents: 115.311, 115.378

1. A resident may be subject to disciplinary sanctions only pursuant to a formal disciplinary process as outlined in the VRJJC policies and procedures following a finding that the resident engaged in resident-on-resident sexual abuse or following a criminal finding of guilt for resident on resident sexual abuse.
2. Disciplinary sanctions shall be commensurate with the nature and circumstances of the abuse committed, the resident's disciplinary history, and the sanctions imposed for comparable offense by other residents with similar histories.
3. If a resident is isolated, the rules following isolation requirements will be followed.
4. Residents in isolation shall receive daily large-muscle exercise, access to educational programming or special education services and daily visits from a medical or mental health care clinician. Residents shall also have access to other programs to the extent possible.
5. The disciplinary process shall consider if the resident's mental disabilities or mental illness contributed to the behavior when determining what sanction, if any, is imposed.
6. The facility will determine if the resident will receive counseling or other interventions to address and correct underlying reasons or motivations for the abuse. The facility shall consider whether to offer the offending resident participation in such interventions. The facility may require participation in interventions as a condition of access to privileges within the program but not as a condition to access to general programming or education.
7. A resident may be disciplined for sexual contact with staff only upon a finding that the staff did not consent to such contact.
8. A report made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.
9. Sexual activity between residents is strictly prohibited and residents may be disciplined for such activity. The facility however, may not deem such activity to constitute sexual abuse if it is determined that the activity is not coerced.
10. A resident may be disciplined for filing a grievance related to alleged sexual abuse only when determined the resident filed the grievance in bad faith.
11. False allegations against either residents or staff will receive disciplinary measures. Charges may be filed for making a false allegation.

XIII. Administration Reporting Requirements 115.322, 115.361

1. Upon receiving any allegation of sexual abuse, the administrator or designee shall promptly (**within 1 hour of receipt**) report the allegation to the Sheriff's Department, TJJD, and the alleged victim's parents or legal guardians unless the facility has official documentation showing the parents or legal guardians should not be notified.
2. If the alleged victim is under the guardianship of DFPS the report shall be made to the alleged victim's caseworker instead of the parents or legal guardians.
3. If a juvenile court retains jurisdiction over the alleged victim, the allegation will also be reported to the victim's attorney, the youth's Juvenile Probation Officer, or other legal representative of record within 14 days of receiving the allegation.
4. The PREA Coordinator for the facility (facility's designated investigator), will also be notified of all reports of sexual abuse and sexual harassment including third-party and anonymous reports to begin the internal investigation process.

XIV. Outside Agency Allegations 115.363

1. Any allegation that a resident was sexually abused while in another confinement facility; the Facility Administrator shall notify the administrator of the facility or appropriate office of the agency where the alleged abuse occurred and shall notify the appropriate investigative agency.
2. Notification shall be provided as soon as possible but no later than 72 hours after receiving the allegation.

3. The Facility Administrator will document the notification and also notify TJJD.
4. The facility that receives such notification shall ensure the allegation is investigated in accordance with PREA standards.

XV. First Responders 115.364

The first staff to learn of an allegation that a resident was sexually abused shall: (see First Responder Checklist and the Coordinated Response checklist)

1. Separate the alleged victim and abuser pending the outcome of the investigation or of a determination of whether and to what extent discipline is warranted.
2. Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence.
3. If the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, smoking, drinking, washing, brushing teeth, changing clothes, urinating, defecating, or eating. The Facility Administrator/designee will collect all unit documentation, including general unit log, individual room logs, seclusion logs, control log, etc.
4. If the abuse occurred within a time period that still allows for the collection of physical evidence 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.
5. If the first responder is not a JSO/JPO, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence, and notify the JSO/Supervisor/Administrator/PREA Coordinator/Investigator.
6. The supervisor/designee will contact the Facility Administrator immediately to determine if the youth will be transported by the EMS or in the facility vehicle by a JSO depending upon the medical treatment required.

XVI. Residents Access to Outside Support Services and Legal Representation 115.353

1. Residents will have access to the SANE nurse at CMC. The SANE nurse will respond to the hospital to provide emotional support services and resources for legal representation.
2. Victim services (e.g. emotional support services, advocacy, crisis counseling, sexual assault recovery services) will be provided through:
 - a. The Hope Center as agreed within the memorandum of understanding; or
 - b. Mid-coast Family Services, a community based Certified Sexual Assault Center.
2. Reasonable communication between the resident and organization/agency will be held in a confidential manner as possible.
3. Residents will be informed prior to access the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to the authorities in accordance with mandatory reporting laws.
4. Reasonable and confidential access to their attorneys or other legal representation and reasonable access to parents/legal guardians will be provided.

XVII. Access to Emergency Medical and Mental Health Services 115.382

1. Resident victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services. The nature and scope of which are determined by medical and mental health practitioners according to their professional judgment.
2. If a medical or mental health practitioner is not on duty at the time of the report, the first responder shall take preliminary steps to protect the victim and shall immediately notify the appropriate medical and mental health practitioners.
3. Resident victims of sexual abuse while incarcerated shall be offered timely information about and timely access to pregnancy test, emergency contraception and sexually

transmitted infections prophylaxis in accordance with professionally accepted standards of care, where medically appropriate. The required information/care will be provided by CMC.

4. Treatment services shall be provided to the victim without financial cost and regardless if the victim names the abuser or cooperates with any investigation arising from the incident.

XVIII. Evidence Protocol and Forensic Medical Examinations 115.321

1. All residents who experience sexual abuse shall have access to a forensic medical examination without financial cost through CMC by the SANE nurse. Efforts shall be made and documented on the facility incident report, nurse's notes or shift supervisor's report to provide Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANES).
2. Attempts shall be made to make available a victim advocate through the SANE nurse at CMC. All efforts must be documented. The SANE nurse is a victim advocate who will aid the sheriff department and investigators collect evidence and to provide emotional support during the collection of evidence process using the most up to date National Protocol for Sexual Assault Medical Forensic Examinations.
3. As requested by the victim, the victim advocate or qualified community-based organization staff member shall accompany and support the victim through the forensic medical examination process and investigatory interviews and shall provide emotional support, crisis intervention, information, and referrals.
4. A qualified community-based staff member shall be an individual who has been screened for appropriateness to serve in this role and has received education concerning sexual assault and forensic examination issues in general.
5. All allegations will require an administrative investigation to be conducted by the PREA coordinator or a criminal investigation to be conducted by the Victoria County Sheriff Office (VCSO) or TJJJ for all allegations of sexual abuse and sexual harassment.
6. If the allegation involves potentially criminal behavior the allegation will be referred to the VCSO for investigation to conclude criminal investigations.
7. All referrals and investigations will be documented on the incident based data form and the year to year analysis form maintained by the PREA Coordinator. The year to year analysis will be posted on the Victoria County Juvenile services website.

XIV. Investigations 115.373

1. Substantiated Allegation – an allegation that was investigated and determined to have occurred.
2. Unfounded Allegation – an allegation that was investigated and determined not to have occurred.
3. Unsubstantiated Allegation – an allegation that was investigated and the investigation produced insufficient evidence to make a final determination as to whether or not the event occurred.

XX. Training 115.334

1. Employees assigned to conduct sexual abuse investigations shall receive training in conducting such investigations in confinement settings. If the person conducting the investigation is not an employee, the administrator will insure that the investigating agency has the appropriate training to conduct the investigation. Documentation will be maintained in the employee's file on the completed specialized training.
2. Specialized training shall include:
 - a. Techniques for interviewing juvenile sexual abuse victims,
 - b. Proper use of Miranda and Garrity warnings (Garrity – only in the event that criminal charges may ensue against the employee),
 - c. Sexual abuse evidence collection in confinement settings, and
 - d. The criteria and evidence required to substantiate a case for administrative action or prosecution referral.

XXI. Internal investigation 115.371

1. Investigations into allegations of sexual abuse and sexual harassment shall be completed promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports.
2. The investigator shall gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; the investigator shall interview alleged victims, suspected perpetrators, and witnesses; and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator.
3. An investigation shall not terminate solely because the source of the allegation recants the allegation.
4. If the evidence appears to support criminal prosecution, all following interviews will be conducted by the prosecutors to avoid compromising the criminal investigation. If the investigation appears criminal, the investigation will be turned over to the Victoria County Sherriff's Department to complete for prosecution.
5. The credibility of an alleged victim, suspect, or witness shall be assessed on an individual basis and shall not be determined by the person's status as resident or staff. No resident will submit to a polygraph exam or other truth-telling device as a condition for proceeding with the investigation of an allegation.

XXII. Administrative Investigations 115.371, 115.372, 115.373

1. Investigations shall include an effort to determine if staff actions or failure to act contributed to the abuse.
2. Investigations shall be documented per TJJJD incident form requirements and investigation requirements including:
 - a. Description of the physical and testimonial evidence,
 - b. The reasoning behind credibility assessments, and
 - c. Investigative facts and findings.
3. No standard higher than a preponderance of evidence is required to determine whether allegations of sexual abuse or sexual harassment are substantiated.
4. Criminal investigations shall be documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible.
5. Substantiated allegations of conduct that appears to be criminal shall be referred for prosecution.
6. The resident will be informed of the outcome of the investigation whether or not it has been determined to be substantiated (determined to have occurred, based on a preponderance of the evidence), unsubstantiated (evidence was insufficient to determine whether or not the event occurred), or unfounded (the event did not occur).
7. If the investigation was not conducted by the facility, the PREA coordinator will request the relevant information from the investigative agency to inform the resident.
8. Written reports of administrative and criminal investigations shall be retained as long as the alleged abuser is incarcerated or employed by the agency, plus five years, unless the abuse was committed by a juvenile resident and applicable law requires a shorter period of retention.
9. Departure of the alleged abuser or victim from the employment or control of the facility shall not provide a basis for terminating an investigation.
10. If outside agencies investigate sexual abuse, the facility shall cooperate with outside investigators and shall endeavor to remain informed about the progress of the investigation.

The following notifications shall be documented in the investigation file:

- A. Allegations involving sexual abuse by a staff.
Unless determined unfounded, the resident shall be informed of the following:

1. The staff member is no longer posted in the resident's unit;
2. If the staff is no longer employed at the facility;
3. If the staff member has been indicted on a charge related to sexual abuse within the facility; or
4. The facility learns that the staff member has been convicted on a charge related to sexual abuse within the facility.

B. Allegations involving sexual abuse by another resident – the victim will be informed of the following:

1. The facility learns that the alleged abuser has been indicted or convicted on a charge related to sexual abuse within the facility.

All notifications or attempted notifications shall be documented. The facility's obligation to report shall terminate if the resident is released from Victoria County Juvenile Services custody.

XXIII. Criminal Investigations 115.322

All staff, contractors, and volunteers shall fully cooperate in the investigation.

1. The Victoria Sheriff's Department or TJJD will take the lead in all criminal investigations;
2. The investigating entity will have access to all records and files as legally permissible, to include video records; and
3. Space will be provided for the investigating entity to conduct interviews and/or to review records and files;
4. The investigating entity will be responsible for completing the criminal investigation consistent with their policies governing the conduct of such investigations and for referring any individual or individuals for criminal prosecution.
5. The concluded report will be provided to VRJJC.

XXIV. Disciplinary Sanctions for Staff (see policy 1.9 regarding investigations) 115.311, 115.376

Disciplinary sanctions for violations of facility policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) shall be 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.

At the conclusion of the internal investigation, the administrator shall take appropriate measures to provide for the safety of the residents. The subject of investigation will be informed of the outcome of the investigation and the measures to be taken.

Measures may include:

1. Review of the policies, procedures and practices, and if appropriate, modifications to the policies, procedures and practices to help ensure the safety of residents and staff and to prevent subsequent incidents.
2. Additional training of staff specifically involved in the incident or of all staff;
3. Suspension or termination of staff involved in the incident; and
4. Possible criminal prosecution.

Termination shall be the presumptive disciplinary sanction for staff who has engaged in sexual abuse.

All terminations for violations of facility sexual abused or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, shall be reported to law enforcement, unless the activity was clearly not criminal, and to TJJD.

XXV. Corrective Action for Contractors and Volunteers 115.377

1. Any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with residents and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies.
2. The facility shall take appropriate remedial measures, and shall consider whether to prohibit further contact with residents, in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer.
3. This will also be reported to the licensing entity, if appropriate.

XXVI. Sexual Abuse Incident Reviews 115.386

1. The facility shall 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.
2. Such review shall ordinarily occur within 30 days of the conclusion of the investigation.
3. The review team shall include the Chief Probation Officer, Administrator, and Compliance Officer, with input from line supervisors, investigators, and medical or mental health practitioners.
4. The review team shall:
 - a. Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse;
 - b. Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or, gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility;
 - c. Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse (camera placement, blind spots, training curriculum, and program);
 - d. Assess the adequacy of staffing levels in that area during different shifts;
 - e. Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; and
 - f. Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to paragraphs (4)(a)-(4)(e) of this section, and any recommendations for improvement and submit such report to the Chief Probation Officer, Facility Administrator and PREA Compliance Manager.
5. The facility administrator shall implement the recommendations for improvement, or shall document the reasons for not doing so.

XXVII. Data Collection 115.387

1. The facility shall collect accurate, uniform data for every allegation of sexual abuse at the facility using the annual PREA report form developed by the facility. Definitions are provided in 1.9 Treatment & Safety.
2. The facility shall aggregate the incident-based sexual abuse data at least annually.
3. The incident-based data collected shall include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice.
4. The facility shall maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.
5. Upon request, the facility shall provide all such data from the previous calendar year to the Department of Justice no later than June 30.

Effective Date: 5/13	Last Change Date: 05/05/23	Approved By:
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