

PREA AUDIT REPORT INTERIM FINAL

JUVENILE FACILITIES

NATIONAL
PREA
RESOURCE
CENTER



BJA

Bureau of Justice Assistance
U.S. Department of Justice

Auditor Information			
Auditor name: Jack Fitzgerald Fitzgerald Correctional Consulting			
Address: 87 Sharon Drive Wallingford CT 06492			
Email: jffitzgerald@snet.net			
Telephone number: 203 694-4241			
Date of facility visit: March 15-20 2015			
Facility Information			
Facility name: Mountain View			
Facility physical address: 1182 Dover Road Charleston Maine 04422			
Facility mailing address: (if different from above)			
Facility telephone number: 207 285-0880			
The facility is:	<input type="checkbox"/> Federal	<input checked="" type="checkbox"/> State	<input type="checkbox"/> County
	<input type="checkbox"/> Military	<input type="checkbox"/> Municipal	<input type="checkbox"/> Private for profit
	<input type="checkbox"/> Private not for profit		
Facility type:	<input checked="" type="checkbox"/> Correctional	<input type="checkbox"/> Detention	<input type="checkbox"/> Other
Name of facility's Chief Executive Officer: Jeff Morin Superintendent			
Number of staff assigned to the facility in the last 12 months: 146			
Designed facility capacity: 133			
Current population of facility: 17			
Facility security levels/inmate custody levels: Medium			
Age range of the population: 11-21			
Name of PREA Compliance Manager: Gerald Merrill		Title:	Dep Superintendent
Email address: Gerald.Merrill@maine.gov		Telephone number:	207 285-0880
Agency Information			
Name of agency: Maine Department of Corrections			
Governing authority or parent agency: (if applicable)			
Physical address: 25 Tyson Drive 3rd Floor State house Station 111 Augusta Maine 04333-0111			
Mailing address: (if different from above)			
Telephone number: 207-287-2711			
Agency Chief Executive Officer			
Name: Dr Joseph Fitzpatrick		Title:	Commissioner
Email address:		Telephone number:	207-287-4360
Agency-Wide PREA Coordinator			
Name: Kathleen Mahoney		Title:	PREA Coordinator
Email address: Kathleen.Mahoney@maine.gov		Telephone number:	207-287-4331

AUDIT FINDINGS

NARRATIVE:

The Mountain View Youth Development Center (MVYDC) in Charleston Maine is part of the Maine Department of Corrections. The Maine Department of Corrections administrative offices are located approximately 80 miles away in Augusta Maine the states capital. The juvenile facility is in the same physical building as a Young Adult Offender Program (YAOP) and also located on the same 72 acres is the Charleston Correctional Facility (CCF) a community confinement facility for Adult males. There is a common administration of the juvenile facility and the Young Adult Offender Program with the community confinement facility running separately. The Medical/ Mental Health services and some education/programming space is used by both the Juvenile and Young Offender Program. The shifts over seen by middle management staff with dedicated line staff to each program. The facility has shown an excellent ability to move youth with in common use areas without violating sight and sound separations required between Juveniles and Young Adults Offenders.

The mission of the juvenile facility is to provide treatment and services within a safe secure environment that enables youth to develop pro-social skills and competencies promoting public safety by reducing the likelihood of re-offending. The juvenile facility services youth from seven of Maine's northern counties. The Mountain View Youth Development Center management staff is well experience and provide a supportive environment to staff and juveniles. The agency uses strength and evidence based practices and have received awards for it success including the Barbra Allen-Hagen Award as the 2007 facility of the year from the Counsel of Juvenile Correctional Administrators (CJCA). The facility has also achieved excellence in being accredited by the American Correctional Association since 2006.

Mountain View Youth Development Center and Young Adult Program employs 146 staff members including administrators, residential staff, and case management workers. The facility also employed 30 contracted Medical, Mental Health, Substance Abuse, Vocational and Education staff members. The complex can house up to 133 male and female residents. Residents in the Juvenile portion of the facility are divided in the housing units between sentenced male residents and pretrial male and female resident. The Facility serviced 136 juvenile residents in 2014 with an average population of 27 Juveniles ranging in Age from 14-18 for Detention and 15-20 for committed juveniles. Length of stay ranges between 14.5 days for Detention and 399 days for Committed Juveniles. Medical and Mental Health services are done through a contract with Correct Care Solutions whose home office is out of Nashville Tennessee. Medical Staff are available 24 hours per day. No SAFE or SANEs are employed by the facility but are available through either the Mayo Medical Center or Eastern Maine Hospital 24 hours per day.

The audit was completed by Certified PREA Auditor Jack Fitzgerald of Fitzgerald Correctional Consulting. During the pre-audit phase the auditor reviewed the Pre Audit tool, the Maine Department of Corrections policies and procedures related to the PREA Audit, and the supportive documentation. The auditor also called regional sexual assault advocacy organizations including the Rape Response Service (RRS) with whom the facility has a memorandum of understanding to provide PREA related services. The representatives (including hotline a staff member) with whom the auditor spoke acknowledged the MOU and reported that they had no historical complaints about the facility. The RRS has provided group education at the Mountain View Facility for several years. The auditor also had several phone conversations with Maine DOC PREA Coordinator Kathleen Mahoney during the period. These conversations provided the auditor with a clarification of policy, procedures and provided the auditor with a feel of the preparation process that has gone on at the facility and agency wide.

The auditor arrived in the Charleston area on Sunday March 15th but the scheduled pre audit meeting for that evening was cancelled due to weather. The onsite work hours were from 7:45am to 7pm on March 16th and 5am to 6pm on March 17th. March 18th 9am to 2:30 An entrance meeting was held on the morning of March 16th for both the Juvenile and the Young Adult Offender Program . In attendance were the following: Kathleen Mahoney PREA Coordinator for Maine DOC, Jeff Morin Superintendent, Gerry Merrill Deputy Superintendent (PREA Manger), Asia Serwik Deputy Superintendent Mental Health and Programming, Boyd Kronholm Deputy Superintendent Operations and Cherly Preble Compliance Manager.

The auditor was able to interview ten random residents (10 males, 0 females –no females in custody on the date of the audits) including one from each pod. The population did not have an individual with a disability or a resident to whom English is a second language. There were no residents to interview who had reported a PREA related incident. 10 random staff members were interviewed including custody, case management and intake staff members. Interviews also included the facility Superintendent Jeff Morin, Deputy Superintendent Gerald Merrill who is the PREA Monitor, Gary LaPlante Director of Operations for Maine DOC on behalf of the Commissioner of Corrections Joseph Fitzpatrick, Kathleen Mahoney PREA Coordinator for Maine DOC. Also interviewed were individuals who work in Medical and Mental Health areas, Teachers, Intake officers, Classification, and the Correctional Investigator Casey Ritano. The auditor worked with the PREA Coordinator and the administration of MYDC to obtain further supporting documentation to support compliance while on site and subsequent to the visit. There were no individuals who had to act in the first responder role but questions were answered by staff as part of the random staff interview.

The residents who were interviewed as part of the site visit reported overwhelmingly that the facility is a safe place sexually and that staff will not tolerate sexual related behaviors including joking

DESCRIPTION OF FACILITY CHARACTERISTICS:

The Mountain View Juvenile and Young Offender Programs , in Charleston Maine, one large building that has 22000 square feet.. The facility is in a rural area on a state road about 30 Miles from Bangor Maine. The residential units have exterior recreation areas next to the day room spaces. The residents were all housed in single rooms and the housing units have good line of sight from the day areas. Natural light also allows for an open feel in the housing units. The corridors are wide well light spaces with good vision. Each unit has a staff office, a monitoring station; which contains log books showing supervisory tours, and a unit manager and case managers offices. The door to each area is locked when not in use. Each of the facility's 60 cameras captures common areas, interior and exterior spaces. The central control space is manned by experienced staff who control all movement of the two populations. Staff utilize the cameras to watch residents movement in common areas and identify staff in need of assistance. Staff perform random tours of the facility. All staff knock and announce presence when entering any units. Staff are aware of blind spots in the facility and know to respond if residents congregate in these areas. The agency has a dress code for residents when in common areas and in bedrooms all residents must be fully clothed while sleeping to eliminate incidental viewing incidents. The education, vocation, counseling, medical spaces are monitored through camera and staff presence. Staff recognize the risk of being alone with juveniles and make every effort to limit these occasions.

SUMMART OF AUDIT FINDINGS:

Number of Juvenile Facility Standards: 41

Number of Standards that were found not applicable: 1

Standards that were found not applicable: 115.312 Maine DOC does not contract with any other agency for the confinement of Juveniles

Number of standard exceeded: 2

Standards that were found to exceed expectations: 115.311, 115.234

Number of standards met:40

Number of standards not met:0

Standards that were found to require corrective action: None

Standard 115.311 Zero tolerance of sexual abuse and sexual harassment; PREA coordinator.

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

Mountain View Youth Development Center is in compliance with the expectations of this standard in policy 6.11 Sexual Misconduct. The agency, the Maine Department of Corrections (DOC), has policies for all it's facilities on the standard requirements of the Prison Rape Elimination Act. The Maine DOC employs an agency wide PREA Coordinator Kathleen Mahoney as noted in the agency flow chart. The agency has developed an upper level management team that supports working toward PREA Compliance. The PREA Coordinator is new to the Maine DOC but has shown a strong ability to develop the networking to be effective in her job. Kathleen reports to the former PREA Coordinator Ryan Anderson. The Mountain View Facility also employs a Deputy Superintendent who acts as the PREA Manager or the title used a PREA Monitor. The Facility Superintendent, and the PREA Monitor all understands the role of the PREA Coordinator. Reportedly issues of concern are communicated in an effective and timely manner. Interviews with staff and management show an understanding of the agency's commitment to preventing, detecting and responding to Sexual Abuse and Sexual Harassment within the Mountain View Facility. Maine dedication to PREA is not new as evident in that the Superintendent had been stressing PREA education for several years. The Facility PREA Monitor Deputy Superintendent Gerry Merrill is very familiar with the process and is uniquely qualified in the he has also served the Maine DOC in several roles including as the Correctional Investigator at the Charleston Complex earlier in his career.

In Addition to the compliance factors mentioned above the Auditor felt the facility exceeded the expectations of this standard through a visible culture of supporting the PREA efforts to have zero tolerance toward sexual abuse and sexual harassment. The culture was evident in the professional attitude from both the staff at the facility level and the support from the Maine Department of Correction Administration's commitment to this effort which began before the standards were finalized in 2012. Residents strongly supported the environment is safe, supportive and that sexualized behavior is not tolerated and even sexualized jokes or comments are addressed quickly by staff.

Standard 115.312 Contracting with other entities for the confinement of residents.

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

N/A This Standard is not applicable as the Mountain View Youth Development Center is part of the Department of Corrections. It is reported that Maine DOC does not contract out for the confinement of any Juveniles.

Standard 115.313 Supervision and monitoring.

- Exceeds Standard (substantially exceeds requirements of standard)
- X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

MVYDC has developed a staffing plan that is in compliance with the elements of the PREA Standards. The staffing pattern allows for each shift to have at a minimum at all times meet the requirements of staff to juvenile ratios that will be required of all juvenile facilities in October of 2017. The facility adds additional non security staff, such as case managers, on times when greatest numbers of residents are in the facility and awake. There was no reported instance in which the staffing plan was not met. Policy requires if the staffing plan is deviated from the instance is documented and justified. The staffing plan is new but will be reviewed annually and was recommended by the auditor that the PREA Coordinator review with the Superintendent. There were no findings of inadequacy by any Judicial, Federal or State oversight bodies.

The MVYDC management team has instructed the staff on supervision practices that support sexual safety include randomization of tours and responding to blind spots when more than one resident is out of view of staff. Policy 6.11 also required unannounced round to be completed by supervisory staff. Log books were reviewed on tour (management document tours in red) as well as staff questioned supported that these practices are done. The Mountain View Facility has 66 cameras covering the facility, its exterior and outdoor recreation areas. Control Officers also confirm that they do not alert in any way when supervisory staff are completing rounds.

Standard 115.315 Limits to cross-gender viewing and searches.

- Exceeds Standard (substantially exceeds requirements of standard)
- X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Both agency policy (6.11 Sexual Misconduct page 6) and resident and staff interviews confirm that the facility prohibits cross gender strip searches of any type including to determine one's genital status. The facility confirms that they have not had an exigent circumstance in which a cross gender pat search has

occurred. The Supervisory staff said they would prefer to call a staff person into work rather than allow the cross gender pat search. Pat-down search training was added for staff during the audit period to supplement their existing search training to include respectful communication and search procedures for with transgender and intersex residents. Training records confirm that staff have received the required trainings. The auditor requested further training specifically addressing pat searches of transgender and intersex residents. The agency adjusted its training program to include these topics and provided evidence of the retraining of staff to the auditor to support compliance. Residents also confirm that they can shower and change their clothes without staff members of the opposite gender seeing them. Agency Policy 6.11 addresses the requirements of all indicators.

Standard 115.316 Residents with disabilities and residents who are limited English proficient.

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

The MVYDC has several resources to assist disabled or LEP Youth. Language link is a phone in resources available to help staff in communication with limited English proficiency as well as a contracted translation service. The Maine Department of Corrections has the ability to print the handbook for residents in multiple languages. As part of the audit, the auditor was able to speak with residents none of whom reported a disability or a ESL Language issue. The Director of Operations, the Superintendent and the state PREA Coordinator confirmed that though this facility has not needed the agency has translated documents into Somalian in the southern part of the state where there is a population. Policies 18.12 Accommodation for Prisoners with disabilities or other Special Needs and 1.10 Staff Communications with Persons with Limited English Proficiency outline the agency's requirements in this standard including equal opportunity and access to information for those residents who are disabled or have limited English proficiency as well as the protection of confidentiality through the prohibition of resident interpreters.

Standard 115.317 Hiring and promotion decisions.

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

The Maine Department of Correction is compliant with the aspect of hiring and promotion decisions required by PREA. The agency has policy in place to address the requirements of the standard. The agency has all staff and contractor undergo criminal background checks. The agency recently added questions to the pre-employment process to include the standard requirements on reporting of prior sexual misconduct as describe in the standard. The auditor was given samples of questionnaires that support that the practice has been implemented. The Maine DOC has directed human resources staff at the facility level on the process for requesting information on sexual misconduct from an employment candidate's prior institutional employer as well as giving direction on when they receive request about former Maine DOC employee who may have had a substantiated sexual abuse or sexual harassment investigation. The Department of Health and Human Services has worked with the Maine DOC to develop a mechanism to

complete record checks for child abuse by potential staff persons in the juvenile facilities. This is a new collaborative effort between the agencies that provides compliance with the standard expectations. The agency has several policies including Human Resource policies (5.8, 8.06), Personnel Policies (3.3, 3.24), as well as union contracts that support compliance.

Standard 115.318 Upgrades to facilities and technologies.

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

The Maine Department of Corrections has added or upgraded 14 cameras at the Mountain View facility in the past year that improved the safety of staff and residents. The Superintendent and PREA Monitor report that the camera positions added reduced blind spots. During the tour it was very evident of their knowledge of the facility and potential weak points. Gary LaPlante Director of Operations for Maine's Department of Correction who was interviewed by this auditor representing the Commissioner of Corrections spoke about the Department's commitment to using technology to improve safety of staff and residents. He gave several examples of pilot projects the Department is undertaking and that in the preparation for opening one of their newer facilities they had purposely involved the former state PREA Coordinator Ryan Anderson. The Mountain View facility has been designed with good sight lines and large windows allowing staff to see into housing units from common areas. Staff, in random interviews and those spoken on tour, were aware of concern areas and positioning themselves to observe the areas of concern.

Standard 115.321 Evidence protocol and forensic medical examinations.

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

The Mountain View Juvenile Facility has not had a sexual assault case that required the use of forensic medical examination. In the event of a sexual assault, the criminal investigation would be completed by the department on site Criminal Investigator Casey Riitano. Maine Department of Corrections investigators receive extensive training on investigations. The Maine Attorney General's Office has produced a guideline for Sexual Assault Forensic Exams and the Care of Sexual Assault Patients. This 185 page document provides specific steps for forensic exams and was developed in conjunction with medical and legal experts from Maine including nine SAFE or SANE. The Department of Corrections has sufficiently trained its staff as evident from their responses on how to preserve evidence and potential crime scenes as first responders. All resident who are victims of sexual assault will be sent to the Mayo Hospital or Eastern Maine Hospital who has SAFE and SANE examiners available 24 hours per day without cost to the resident. The agency has also entered into a MOU with the Rape Response Services (RRS) for the Charleston facilities. Interviews with the facility Superintendent, the Investigator, Medical Director, PREA Monitor and the

agency PREA Coordinator confirms requirement of this standard and that a victim's advocate could support the resident victim of sexual assault as they undergo forensic exams and investigatory interviews

Director of Operations for Maine DOC Gary LaPlante reports when a criminal investigation involves a staff member separate Administrative Investigations are conducted by a trained investigator from the Central Office staff.

Standard 115.322 Policies to ensure referrals of allegations for investigations.

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

Agency policies 7.1 Investigations by a Correctional Investigation Officer (pages 8-11) and 6.11 Sexual Misconduct (pages 4&6) , sets forth obligations that all Sexual Harassment and Sexual Abuse cases are investigated. In Maine the Correctional Investigator has statutory authority powers in that they can arrest, question and refer cases for prosecution to the District Attorney of Penobscot County ME. Many of the complaint the facility received were for harassment statements that did not require investigation as they were not repetitive. Resident were address according to the PREA Monitor through the behavioral system of the facility. The Mountain View Juvenile Facility did have once incident which lead to a full criminal investigation. The Maine Department of Correction has posted onto its website the agency PREA policy which set obligations for referring incidents for criminal investigation, and administrative investigations. The agency reports if it receives a claim involving a staff person and a resident in addition to the investigation by the Correctional Investigator and simultaneously an administrative offices would assign a person to complete a separate administrative investigation. All staff spoken to were aware of the need to ensure incidents were reported quickly to the facility Correctional Investigator and the PREA Monitor.

Standard 115.331 Employee training.

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

The Maine Department of Correction has worked on its Training Program during the Pre Audit Phase with the PREA Coordinator to come into compliance with the standard. Policy 6.11 Sexual Misconduct (page 2) addresses the requirements of the standard including the required areas of education, the frequency of training, and gender specific understanding of sexual victimization that is important for staff in a co-correctional facility such as Mountain View Juvenile Detention Center. All employees have had an on site training with an agency staff member. A copy of the slide show portion was reviewed by this Auditor. All staff interviewed formally and as part of the tour confirmed regular training on PREA. Random staff member interviews confirmed that they were aware of the different aspects of the training presentation and were able to give examples of information provided. PREA related topics have clearly

been stressed by the Superintendent as evident of my questioning of staff on the tour. Staff also reported the ability to refresh PREA issues through on line courses. Training records and curriculums; in addition to policy and staff interviews, support compliance with indicators.

Standard 115.332 Volunteer and contractor training.

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

The Mountain View Youth Development Center ensures all contractors and volunteers receive training in the agency efforts to prevent, detect and respond to sexual assault and sexual harassment. Training records, interviews with contractors and information from both contractors and volunteer spoken to on the tour support that they have received comprehensive training equivalent to their level of contact with the residents. Training Records and interaction with contractors as part of the tour clearly support an understanding of the agency Zero Tolerance to PREA related issues. Correct Care Solutions who is the majority of the contracted employees requires training on PREA in addition to the Maine DOC training. Contractors and the volunteer spoken with were able to identify key staff members in the facility with whom to report if they had a PREA concern.

Standard 115.333 Resident education.

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

According to the residents, education regarding PREA begins as soon they get to the facility through the resident handbook and during their admission meeting with the Intake officer. Information is reviewed is signed and placed in their case record. The facility has PREA educational materials available to residents in the form of brochures and posted in addition to the handbook. The facility has provided youth with opportunity to get further information from the Maine Department of Corrections PREA video. Residents have access to their handbook that can be translated into multiple languages as needed. The facility has posters up that inform residents on how to report PREA events or how to access advocate services. Residents consistently reported comfort level in speaking with the staff of Mountain View if they had any PREA related concerns.

Standard 115.334 Specialized training: Investigations.

- Exceeds Standard (substantially exceeds requirements of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

- Does Not Meet Standard (requires corrective action)

Correctional Investigator Casey Riitano is the on-site Investigator at the Charleston Complex. In addition to the General Maine DOC PREA training she attended a two day investigator training provided by the Moss Group on behalf of National PREA Resource Center. Her training is extensive in Crime Scene Investigation and is working toward international certification. She also is a team leader for Maine DOC Evidence Response Team. In addition to Casey Riitano the facility PREA Monitor Deputy Superintendent Gerry Merrill also has completed the training by the Moss group. Mr. Merrill prior training as a Correctional Investigator serves the facility well. Staff felt confident in reporting to these individuals if they had any concerns that might warrant an investigation.

The Auditor finds that the standard expectations have been exceeded by the facility and the state though its support of the extensive training opportunities on investigative skills in addition to the Moss Group training. Also factored into this determination was the background of not only the Investigative Officer but also the PREA Monitor and their close communication.

Standard 115.335 Specialized training: Medical and Mental Health Care.

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

Medical and Mental Health Staff who are employed by Correct Care Solutions have received training on medical and mental health training from their agency which addresses how to detect, assess signs and preserve evidence. The training materials and interviewed staff support they were trained in how to respond appropriately to juvenile victims. Medical and Mental health staff were able to discuss how and to whom to report allegations and suspicions of sexual abuse or sexual harassment. They were able to explain the reporting would be up their agency chain of command while also notifying the chain of command of the Mountain View facility. Medical and Mental Health Staff knew to also report any concerns to the Investigator Casey Riitano or PREA Monitor Gerry Merrill. The contracted staff has regularly attended PREA classes from Maine DOC with the state employees. Interviews and Policy 6.11.5 support compliance with indicators. Staff knew how to preserve evidence and support the juvenile until they could be transported for a forensic exam and work with the youth after they return.

Standard 115.341 Screening for risk of victimization and abusiveness

- Exceeds Standard (substantially exceeds requirements of standard)
- X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

The Mountain View Youth Development Center ensures that all youth are screened for Sexual victimization and abusiveness using an objective tool. Policy 6.11.2 page 4 requires that all youth are screened initially within 24 hours and reassessed within 14 days by the facility classification team. The Agency also requires periodic rescreening by the unit team using the relevant PREA assessment instrument in CORIS when warranted due to a referral, request, incident of sexual misconduct, or receipt of additional information that bears on the prisoner's or resident's risk of sexual vulnerability or sexual violence. The objective tool was developed by Maine DOC and has clear guidelines for its use. Ryan Anderson, Maine DOC's Manager of Correctional Operations recently presented on the tool at the 2015 winter conference of the American Correctional Association. The Maine DOC had realized that the intake questions had to be adjusted to gain all information including asking about the youth's sexuality. They have also implemented a system to ensure that after the initial screening the youth are asked about sexuality, victimization history, and perceived safety. The tool addresses all aspects of the standard and file review confirms that the screenings are completed supporting compliance.

Standard 115.342 Use of screening information

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

Maine DOC policy 6.11.2 Sexual Misconduct directs how the screening tool information is used. In both documentation and interview with the screening staff it is apparent that housing decisions include considerations to avoid housing residents who are potential victims with potentially aggressive residents and the proximity to staffing. PREA classification can also impact the resident's programmatic decisions including treatment programming, housing and educational placements. Individuals with mental health histories including identified sexual offenders and those with history of sexual victimization may require treatment. Though the facility has not had a transgender and intersex residents policy states one's own views of safety are taken into consideration, and be based on protecting the prisoner's or resident's safety and mental health and preventing security issues. The facility does not employ the use of separate housing rooms based on LGBTI identification.

Standard 115.351 Resident reporting.

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

Policy 6.11 addresses the requirements of this standard on Pg 1 and addresses the staff responsibility to accept all forms of resident reported Sexual Abuse and Harassment claim. The facility Sexual Assault Brochure, the Resident Handbook and posters throughout the facility all give direction on the importance and methods of reporting Sexual Assault and Sexual Harassment. Interviews with staff were consistent in their understanding of their duties of accepting and responding to all reports of Sexual Assault

or Sexual Harassment whether it was done verbally, in writing, anonymously, or by a third party. All residents were aware of multiple ways in which they could report including the telling staff, calling on the hotline to the one of the two numbers, mail administration, complete grievance form. Residents consistently reported comfort in speaking with staff if they had any concerns. Mountain View Staff has implemented an expanded orientation program to help juveniles identify an outside person with whom they could speak including RRS and the on-site Department of Health and Human Services worker. In addition to talks, posters and other information help inmates identify the services of Rape Response Services and the umbrella organization Maine Coalition Against Sexual Assault (MeCASA) which is available to them post release.

Standard 115.352 Exhaustion of administrative remedies.

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

Mountain View Juvenile facility is not exempt from the exhaustion of administrative remedies.. No complaint relating to PREA has been filed at the facility. In interviews the Superintendent confirmed the policy 6.114 Section D requirements that there is no time limits to submit allegation, or requirements to use of informal grievance process, including having to speak with the alleged staff member who is the subject of the grievance. Since the facility did not have a grievance timeframe compliance is determined by the policy. In general it is reported that grievance outcomes are generally responded to by the director within a few days. The facility has not received any third party grievance related to PREA. Residents were aware of the grievance process and its potential use for reporting a complaint of Sexual Abuse and reported no difficulty in access to materials to report.

Standard 115.353 Resident access to outside confidential support services.

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

The residents of Mountain View can access victim advocates for emotional support. The agency has entered into a MOU with the Rape Response Services. The Maine DOC PREA Brochure has a toll free number for residents to access from the pay phone in the facility, or with their case manager. Requirements of this standard are covered by agency policy 6.11 Sexual Misconduct residents whose sexual assault history was not a PREA related event may pursue treatment options through the facility Mental Health services or through RRS. Residents were not consistently able to identify how confidentially the communication is within the facility but knew that outside counseling staff could be spoken to in a professional visiting setting.

Standard 115.354 Third-party reporting.

- Exceeds Standard (substantially exceeds requirements of standard)
- X** Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Mountain View and Maine Department of Correction has developed a mechanism for individuals who want to report PREA concerns as a third party; be they fellow residents, family or friends. Information can be done in person, by phone, by e-mail, by US mail, or by contacting the agency PREA Coordinator through the agency website Maine.Gov. There is information directing residents in the PREA brochure, PREA poster, resident handbook and on the website noted above. Staff were aware that they must take all reported concerns about PREA potential violations including from third parties. The facility phones allow for inmates to dial out the advocates or the Maine DOC PREA Coordinator without using their identification number. The Maine DOC Policy on Communication Mail and Visiting 16.3 and Sexual Misconduct policy 6.11 and 6.11.5 address the requirements of this standard.

Standard 115.361 Staff and agency reporting duties.

- Exceeds Standard (substantially exceeds requirements of standard)
- X** Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

The Maine Department of Corrections has several policies that address issues in this standard including it's Sexual Misconduct Policy, Investigation Policy, Confidentiality Policy, and the Records Policy. Staff interviews confirm that staff are aware of the immediate need to report all accusations of Sexual Assault or Sexual Harassment including third party and anonymous complaints. Staff are aware of the importance of timely reporting and the need to provide confidentiality about information except when reporting to supervisory, investigative staff or information needed to secure treatment or provide for the safety/security of others. The facility's Medical and Mental Health clinicians were aware of the timely reporting concerns up CCS and the Mountain View Administration. All contractors were aware of both the Investigator and the PREA Monitor Gerry Merrill's role in the facility. All Staff including contractor were aware of mandated reporting and their legal responsibility.

Standard 115.362 Agency protection duties.

- Exceeds Standard (substantially exceeds requirements of standard)
- X** Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

The Mountain View facility has not had to protect a resident in imminent risk of sexual abuse. Random staff were able to identify what to do in these situations to provide immediate safety including: immediate separation of parties, increasing contact and support to the residents. The Director of Operations for Maine's Department of Correction, Gary LaPlante, and Jeff Morin, Superintendent of

Mountain View both acknowledge that the agency response would be swift and that the efforts would include both facility based changes to increase safety and or to coordinate efforts including the movement of one or both of the residents. The agency PREA Coordinator Kathleen Mahoney would also be notified of these events. Random staff interviews also supported compliance as staff were able to voice steps to protect potential resident victims.

Standard 115.363 Reporting to other confinement facilities.

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

Policy 6.11.3 pages 3 and 4 addresses the requirements of reporting to other confinement facilities of incidents of sexual assault that had occurred in those facilities. The Mountain View Juvenile facility has not had a resident inform them of sexual abuse at another confinement facility. The Superintendent was able to state his responsibilities, if he received notice from another site or if he had to call another site to discuss an accusation he has been made aware of. Director of Operations for Maine DOC also confirmed the agency's commitment to comply with the standards expectation as part of the agencies zero tolerance policy.

Standard 115.364 Staff first responder duties.

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

Maine Depart of Correction Policy 6.11.5 covers the requirements of the first responder duties including: 1) separating victim and alleged abuser 2) preserving and protecting the crime scene 3) directing the alleged victim on protecting evidence until they can be transported for forensic examination 4) ensure the alleged abuser also does not take action to destroy evidence. There was no resident victim or staff person who acted as a first responder to interview. Random staff members, including non security staff, were aware of the requirements of the first responder when interviewed.

Standard

115.365 Coordinated response.

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

The agency policy 6.11.5 Sexual Misconduct Responding addresses the steps to coordinate efforts in response to sexual abuse incidents. The agency has an extensive response plan available to staff that provides a step by step and role by role response to “ coordinate actions taken in response to an incident of sexual abuse among staff responders, medical and mental health practitioners, investigators and facility leadership”

The facility Superintendent was able to describe the plan and communication efforts that would occur in a timely fashion with Medical Staff, the Correctional Investigator, the rape crisis agency, and the Maine DOC administration office including the PREA Coordinator. To ensure consistency by staff there is a checklist that is expected to be completed on each accusation that documents the steps taken. The advocacy organization was able to provide a written description of their services that can be used to further educate inmates in the event of a crisis to their role.

Standard 115.366 Preservation of ability to protect residents from contact with abusers.

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

Mountain View Juvenile Facility has contracts with two different bargaining units AFSCME and the Maine State Employees Association. A review of the two contracts, which both were signed in 2013, did not find any language which would limit the Department of Correction from removing an alleged Staff Sexual Abuser from having contact with the reported victim. This practice was confirmed by the Director of Operations for Maine DOC Gary LaPlante.

Standard 115.367 Agency protection against retaliation.

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

Mountain View Youth Development Center policy 6.11 (page 2) covers the requirements of this standard. The Director of Operations and the Facility Superintendent both described multiple mechanisms that would be put in place to protect individuals who report sexual assaults which include changing housing, preventing contact between the accused and the victim, monitoring reports about the resident or staff to see if there is any change in frequency, or tone. The PREA Monitor reports he would lead the monitoring of these events. The PREA Monitor and Superintendent both reports areas they would consider in the monitoring process. There was no resident in isolation or who had reported a sexual assault in the current population.

Standard 115.368 Post Allegation Protective Custody.

- Exceeds Standard (substantially exceeds requirements of standard)
- X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Mountain View Youth Development Center policy 6.11 (pages 5 and 6) covers the requirements of this standard. The facility Superintendent reports they have not had to use any protective custody measures for victims of sexual abuse. The facility is equipped with the capacity to do segregated housing but it is not been used for this situation. Segregation is rarely used at Mountain View and more often for aggressive actions on a temporary bases until the resident has calmed. There were no individuals who were currently housed in the segregation unit for any reason and the Superintendent reports there is no reason that victims of sexual abuse would be barred from receiving education, or recreation.

Standard 115.371 Criminal and administrative agency investigations.

- Exceeds Standard (substantially exceeds requirements of standard)
- X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

The requirements of the standards are outlined in two Maine DOC policies 7.1 Investigation by Correctional Investigative Officer and 6.11.3 Sexual Misconduct; Reporting and Investigation. Correctional Investigator Casey Riitano reports that all Sexual Abuse investigations will begin as soon as possible and will be investigated no matter if the source of information is known, anonymous, or a third party. As noted earlier in standard 115.34 CIO Riitano has received extensive training in investigations. The Correctional Investigator was able to discuss at length the investigative process and the coordinated efforts to ensure all evidence is gathered in a timely fashion including the use of SAFE/SANE at local medical facilities. She reports that interviews with witness, victims, and alleged perpetrator will be made without the judgment and the victims would not be required into undergo a polygraph. Once Probable cause is determined criminal cases are referred for prosecution. As part of the audit a case file of a prior instigation was reviewed; this showed the investigative process, the criminal prosecution and the notification to the victim. CIO Riitano also reported that if the alleged victim or perpetrator was no longer at the facility the investigation would continue. She reports if needed she would work with police authorities in the community in which the individual lives to continue the pursuit of the case. Administrative investigation of staff misconduct would be completed as a second investigation by a separate Correctional Investigator most likely out of the Maine Department of Correction's central office. Agency Policy 11.6 Prisoner Record Management requires that all records related to a resident be maintained on site for 7 years after release and then they are forwarded to the state archives.

Standard 115.372 Evidentiary standard for administrative investigations.

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

Superintendent, and Correctional Investigator in their respective interviews confirm that they do not use a standard higher than the preponderance of evidence to substantiate an allegation. One Juvenile was referred for prosecution after probable cause was determined. The case was eventually prosecuted based on the evidence in the investigation.

Standard 115.373 Reporting to residents.

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

The Maine DOC policy 6.11.3 (Page 6) defines the agency's responsibilities to notify resident of the outcome of the investigation if it has been substantiated, unsubstantiated, or unfounded. The policy also addresses the requirements if the perpetrator is a staff or other residents. A review of an investigative file as part of the audit process showed a form that confirms the notification process had taken place. The Superintendent and the Correctional Investigator both confirmed the requirement of the standard. There were no residents on the audit dates to interview who had reported a sexual abuse.

Standard 115.376 Disciplinary Sanctions for staff.

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

Agency policies 6.11.4 Sexual Misconduct (page 2) and 3.15 Employee Discipline, states that staff who violate agency sexual abuse or sexual harassment policies are subject to disciplinary action. Disciplinary actions include a variety of sanctions, including termination which will be presumed for a substantiated finding of sexual abuse. Discipline according to policy will be commensurate to the nature and circumstances of the acts committed, and comparable to other staff with similar histories. Agency policy requires all allegations of sexual abuse to be investigate, regardless of whether the staff resigns or is terminated. Superintendent reports that no staff have been disciplined for PREA related offenses in the last year.

Standard 115.377 Corrective action for contractors and volunteers.

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

Maine Department of Correction staff at Mountain View sign contractors including no direct service contractors who would be unescorted in the facility. The facility also has limited number of volunteers/interns. The Policy 6.11 allows the program to bar entry to prevent contact with potential victims in incidents of sexual abuse or harassment. The policy requires the agency to refer incidents involving these individuals for investigation by law enforcement agencies. There were no incident that required the removal of a contractor or volunteer.

Standard 115.378 Interventions and disciplinary sanctions for residents.

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

Maine DOC policy 15.3 Resident Discipline and 6.11.4 Sexual Misconduct addresses the requirements of this standard. The agency prohibits consensual relationships between residents and residents and it is also stated in the resident handbook. The facility staff monitor relationships closely and there has been no PREA related issues that caused a juvenile to be discipline. Resident who engage in sexual misconduct with staff can be disciplined unless it is determined the staff consented to the act.

Standard 115.381 Medical and Mental Health Screening History of Sexual Abuse

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

Mountain View Youth Development Center policy 6.11.5 covers the requirements of this standard. Maine's Policy exceeds the time requirements of this standard by requiring a follow up meeting with medical and mental health practitioners within 7 days of intake if they have been previously a victim of sexual abuse. Medical and Mental health information and log in rights in the states electronic information system CORIS limits the information access; this ensures that information can only be shared with those individuals with a need to know.

Standard 115.382 Access to emergency medical and mental health services.

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

The agency has not experienced an incident of sexual assault that required a referral to a hospital for forensic services. Maine DOC has around the clock on site medical nursing staff that can help to facilitate the referral to a outside medical provider and provide communication to the on call Medical administrator. The Correct Care Solutions and Maine DOC will follow the requirements as outline in Policy 6.11.5 (responding) Sexual Misconduct. As noted the State of Maine has a list of several facilities with SAFE or SANE capabilities. The two hospitals to whom a referral by the medical staff potentially be made each have SAFE or SANE staff availability 24 hours per day. There is no financial cost to any juvenile in DOC custody.

Standard 115.383 Ongoing medical and mental health care for sexual abuse victims and abusers.

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

Mountain View Juvenile Facility is committed to ensuring residents have ongoing access to services if they have been a victim of sexual abuse in any criminal justice setting. The Maine DOC has staff who have received training as Sexual Assault Crisis in addition to Contracting with RRS. Agency Policy 6.11 and Agency Policy 18.5 Health Care services speaks to each aspect of this standard. The availability of RRS allows for ongoing treatment services if they prefer to use them instead of the onsite staff. Through contracting with rape crisis centers the Maine DOC has opened the inmate victims to resources post release. The MECASA organization has provided the facilities with Maps and contact information to each regional provider available in the state.

Standard 115.386 Sexual abuse incident reviews.

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

Mountain View Juvenile Facility and Maine DOC 6.11 requires the completion of the steps outlined in this standard. There was one incident that was founded at the Juvenile facility and the agency did complete a incident review. The Superintendent, agency PREA Coordinator and the facility PREA Monitor are all aware of the requirements. The report used to document the meeting is based on the standard requirements.

Standard 115.387 Data collection.

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

The Maine DOC website has collected and provided for review the results of the Sexual Violence Survey. The 2014 Maine Department of Corrections Prevention of Rape in Prison report outlines the efforts including data for each of Maine DOC's adult and juvenile facilities.. The agency policy 6.11 commits the agency to comply with the data collection requirement of the standard. The policy states "Each facility's PREA Monitor shall ensure the collection of incident-based sexual misconduct data and shall report that data to the Department's PREA Coordinator at least annually, who shall aggregate it for all Department facilities."

Standard 115.388 Data review for corrective action.

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

Maine Department of Correction policy 6.11 meets the requirements of this standard in Policy 6.11.1 section three. The data elements are required to be reviewed by the state PREA Coordinator to ensure consistent data. The management team both on the facility level and the agency will utilize data to make informed decisions on programmatic and policy needs. Since the PREA Coordinator works in operational oversight unit trends can be reviewed and changes supported either from the facility level if needed such as the supporting the need for additional staff or electronic surveillance; or from an central administrative level such as policy/procedural modifications based on incidents.

Standard 115.389 Data storage, publication, and destruction.

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

Both State Statue and Agency policy ensure that records are maintained in a secure manor. Records are presented annually through the DOC web site and ensure that all identifying information is removed. The Policy 6.11.1 requires "The Department's PREA Coordinator shall maintain the data reported or collected for at least ten (10) years." The auditor confirmed the report was posted publicly.

AUDITOR CERTIFICATION:

The auditor certifies that the contents of the report are accurate to the best of his knowledge and no conflict of interest exists with respect to his or her ability to conduct of the agency under review.



Jack Fitzgerald Certified PREA Auditor

5-4-15
Date