

PREA AUDIT: AUDITOR'S SUMMARY REPORT

ADULT PRISONS & JAILS



Name of facility: Southern Maine Women's Reentry Center			
Physical address: 2 Layman Way, Alfred, Maine 04002			
Date report submitted: April 30, 2015			
Auditor Information Joette D. Scarborough			
Address: 2 Someton Court, Irmo SC, 29063			
Email: joettescarborough@yahoo.com			
Telephone number: (803) 407-4435			
Date of facility visit: August 20-21, 2014			
Facility Information			
Facility mailing address: <i>(if different from above)</i>			
Telephone number: (207) 490-5205			
The facility is:	<input type="checkbox"/> Military	<input type="checkbox"/> County	<input type="checkbox"/> Federal
	<input type="checkbox"/> Private for profit	<input type="checkbox"/> Municipal	<input checked="" type="checkbox"/> X State
	<input type="checkbox"/> Private not for profit		
Facility Type:	<input type="checkbox"/> Jail	<input type="checkbox"/> Prison	<input checked="" type="checkbox"/> X Other
Name of PREA Compliance Manager: Jennifer Needham		Title: PREA Monitor/Unit Manager	
Email address: jennifer.needham@maine.gov		Telephone number: (207) 490-5205	
Agency Information			
Name of agency: Southern Maine Women's Reentry Center			
Governing authority or parent agency: <i>(if applicable) N/A</i>			
Physical address: 2 Layman Way, Alfred, Maine 04002			
Mailing address: <i>(if different from above)</i>			
Telephone number (207) 287-2711			
Agency Chief Executive Officer			
Name: Dr. Joseph Fitzpatrick		Title: Commissioner	
Email address: joseph.fitzpatrick@maine.gov		Telephone number: (207) 287-4360	
Agency-Wide PREA Coordinator			
Name: Ryan Anderson		Title: Manager of Correctional Operations	
Email address: ryan.andersen@maine.gov		Telephone number: (207) 557-2422	

AUDIT FINDINGS

NARRATIVE:

The Southern Maine Women's Reentry Center (SMRC) is an adult female minimum and community custody facility which is designed to give women the skills and experience they need to successfully live as positive citizens and employees after transition from the state correctional facilities into their home communities. At SMRC, an emphasis is placed on reducing the risks of reoffending and on increasing positive outcomes. Located in York County in the city of Alfred, Maine, SMRC houses up to 68 female inmates. SMRC is operated by the Maine Department of Corrections and is the only female reentry center in the state. SMRC uses gender-responsive principles as the foundation of all its programming and operations. To be eligible for assignment, the female must have 3 years or less left to serve and have already demonstrated a commitment to a positive, crime free life during her stay in prison.

SMRC employs a staff of 18 employees and 32 volunteers to support program needs. Daily operations oversight is provided by a full-time facility Unit manager while a team of Counselors, Case manager and security staff focus on inmate and staff safety, security and order. Medical needs are provided by contract nurses with Correct Care Solutions (CCS).

The program is based on educational or cognitive-behavioral classes that prepare inmates for successful transition into the community. Sessions includes self-awareness, decision making, examining individual reoffending risks and triggers, substance abuse treatment, behavioral treatment, financial management, and other opportunities for self-improvement. Inmates may also participate in obtaining their GEDs', taking colleges classes in the community or learning a trade. They also spend time volunteering, participating in community service projects and assisting local community agencies. Inmates assigned to SMRC are initially assigned to work assignments at the facility. During the last 18 months of their sentence, female inmates have the opportunity to work in the community. SMRC works closely with the Maine Department of Labor Career Center to place inmates in high growth/high demand jobs in the community.

DESCRIPTION OF FACILITY CHARACTERISTICS:

Southern Maine Reentry Center is a one-building facility with four wings (A, B, C and D). The front entrance into the facility brings you into a small control room area which is adjacent to administrative offices on both sides including the office of the facility Unit Manager, Counselors, Case Worker, security supervisory staff, a small medical staff office and exam room. Access to the inmate living areas is gained through a large multi-purpose dayroom which also serves as a meeting room for programming and the inmate cafeteria.

On the East side of the dayroom are two corridors (A/B wing) providing access to an open community style shower and bathroom areas. There are no private bathrooms or private showers but privacy curtains are available in all bathroom and shower areas. SMRC does not have isolation rooms or a segregation unit.

The West side (C/D wing) of the dayroom provides access to additional inmate living areas, the laundry room and additional small conference rooms. At the back of the facility is a patio and outdoor area where recreation can occur when the weather permits. The facility is equipped with surveillance cameras throughout to ensure the safety and security of staff and inmates. Seven (7) surveillance cameras were added in May, 2014.

SUMMARY OF AUDIT FINDINGS:

The notification of the on-site audit was posted on July 7, 2014, six weeks prior to the first date of the on-site audit. The posting of notices were verified by photographs received electronically from the PREA Coordinator. The photograph indicated that notices were posted in various locations throughout the facility including the housing unit and administrative areas.

The Pre-Audit questionnaire, policies and some supporting documentation were initially received on July 24, 2014. The documents were uploaded to a UBS flash drive. The initial review revealed the need for clarification and additional documentation in regard to some policies and procedures not sufficiently addressing standards. Appropriate documentation and related policies were not provided for some standards. After several e-mail communications with the PREA Coordinators, steps were taken to address policy reference and required documentation was provided for most standards. Specific actions taken to correct deficiencies as well as those standards not addressed are summarized in this report under the related standard.

The on-site audit was conducted on August 20-21, 2014. Flora Boyd, Certified PREA Auditor served as my assistant. After a brief meeting with the PREA compliance manager and the facility's management staff, a tour of the facility was conducted and I was able to observe the building and physical grounds. There are no cameras in the resident's rooms or shower/toileting area so inmates are not seen on the surveillance system while showering or toileting. SMRC has multi-person bathrooms and toilets with privacy curtains which allow inmates to privately perform bodily functions. Showers are equipped to allow inmates to shower one at a time.

Over the two-day on-site visit, thirteen staff including those from all shifts was interviewed. Overall, the interviews revealed that staff was knowledgeable of PREA standards and able to articulate their responsibilities. Eight inmates were also interviewed. Inmates are informed of their right to be free from sexual abuse and harassment and how to report abuse and harassment. There were noted concerns with the PIN number indicated on educational posters in the dayroom. A telephone number along with a PIN number is listed on the posters. When dialed, the automated instructions did not ask for a PIN number. It was suggested that the instructions be revised to indicate the correct instructions for reporting. All inmates interviewed however, indicated that they are aware of their right to be free from sexual abuse and sexual harassment and how to report abuse and harassment. Staff interviewed indicated that they have been trained on PREA standards and understand their responsibilities and duties to prevent detect and respond to sexual abuse and harassment.

SMRC reports eight PREA allegations of sexual abuse and harassment in the past year. A review of investigative files indicates that three cases were determined to be unfounded, one substantiated staff misconduct, two substantiated inmate on inmate sexual misconduct, one unsubstantiated inmate on inmate sexual harassment and one case still under investigation. SMRC added seven additional cameras, video monitor and body cameras as a result of recent analysis of alleged incidents.

Number of standards exceeded:
Number of standards met: 39
Number of standards not met:0
Not Applicable: 1

Standard 115.211 Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

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

Southern Maine Reentry Center (SMRC) Sexual misconduct (PREA and Maine Statutes) and Victim Services policy number 6.11 (revised October 9, 2013) has clearly written language mandating a zero tolerance for all forms of sexual abuse and sexual harassment. The agency's approach to preventing, detecting and responding to acts of sexual abuse and harassment is outlined throughout this 30 page policy. SMRC policies use the terminology "sexual misconduct" as oppose to "sexual abuse". Sexual misconduct is defined in policy as sexual abuse.

The agency has a PREA coordinator who oversees compliance efforts for the SMRC. He indicates that he has sufficient time to oversee compliance efforts .The institutional PREA compliance manager is called the PREA monitor. SMRC PREA monitor also serves as the Unit Manager. The monitor indicates that she has sufficient time and authority to manage PREA compliance related responsibilities.

Standard 115.212 Contracting with other entities for the confinement of inmates

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

SMRC renewed contracts with the Cumberland County Jail (May 21, 2014) and the Two Bridges Regional Jail (August 11, 2014) for the confinement of inmates with less than 36 months to serve. Both contracts require contractors to adopt and comply with PREA standards. Maine state statute under title 34-A (1208) requires the agency to conduct a comprehensive on-site inspection of each contract county and municipal facility every two (2) years in order to provide the department with information regarding compliance with all department standards.

Standard 115.213 Supervision and monitoring

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

The institution documents and makes efforts to comply with a plan that provides for adequate levels of staffing. SMRC policy (6.11) requires a yearly collaboration with the PREA coordinator to consider substantiated and unsubstantiated incidents of sexual misconduct, analysis of blind spots and areas where staff or inmates may be isolated, number and placement of staff, including supervisory staff. Agency policy requires the development of a written plan to coordinate actions taken in response to incidents of sexual misconduct and harassment. SMRC staffing plan is based on minimum strength needed to run the center effectively on a daily basis. The facility and agency policy requires conducting and documenting unannounced rounds to identify and deter staff sexual misconduct and sexual harassment. Interviews with staff and a review of unit log books served to validate that rounds are conducted and documented. Recent changes have been made to mandate upper level supervisory coverage at SMRC seven days a week.

SMRC utilizes video monitoring combined with direct staff supervision to protect inmates from sexual abuse and harassment. Documentation of recent upgrades and addition of surveillance cameras throughout the facility was provided as an example of how adjustments are made in an effort to prevent sexual abuse and harassment.

Standard 115.215- Limits to cross-gender viewing and searches

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

SMRC policy (6.11) mandates that staff shall not conduct cross-gender strip searches, cross-gender visual body cavity searches (meaning a search of the anal or genital opening), or cross gender pat down searches except in exigent circumstances. Policy also prohibits the search of a transgender or intersex inmate solely to determine their genital status. In the case of female inmates, pat down searches are conducted by staff of the same gender, except in exigent circumstances. There was no cross gender pat down searches during the past twelve months. Staff and inmate interviews verified compliance.

SMRC has multi-person bathrooms and toilets with privacy curtains allowing inmates to privately perform bodily functions. Showers are equipped to allow one inmate at a time to shower. Observation during facility tour and interviews with staff and inmates revealed that the institution does not consistently require staff of the opposite gender to announce their presence when entering an inmate housing unit.

During the corrective action period, PREA policy 6.11.2 procedures F 12 were revised to include procedures for opposite gender staff to announce their presence when entering an inmate housing unit.

Standard 115.216- Inmates with disabilities and Inmates who are limited English proficient

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

SMRC policy (6.11) provides for equal access to programs and services for persons who are special needs and whose primary language is not English. Policy indicates that no person with a disability will be denied the opportunity to receive services or participation in programs on the basis of the prisoner's disability. This policy also states that the facility will not rely on inmate interpreters, readers or any kind of resident assistants except when a delay in obtaining interpreters could jeopardize a prisoner's safety. The institution's PREA orientation DVD is available in English, Spanish, Somalia and sign language. Inmate and staff interviews served to verify that the facility does not use inmate interpreters, readers or assistants.

Standard 115.217- Hiring and promotion decisions

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

A review of staff files and documentation received from the Human Resources Manager verified that a criminal background check is conducted on every employee and contractor prior to employment. Documentation from Correct Care Solutions (CCS) contract medical and mental health staff indicate that background checks have been conducted on all medical and mental contractors prior to employment.

SMRC agency policy (6.11) does not prohibit the hiring or promoting of an employee or contractor who may have contact with inmates who have committed sexual abuse as outlined in this standard. SMRC has two employee unions, the American Federal of State, County and Municipal Employees and the Maine State Employees Association. There is no record of a criminal background check at least every five (5) years for CCS contractor medical and mental health employees. Submitted documentation indicates that agency attorneys have ruled that adding the required 5 year background check of current employees and contractors would amount to a change in working conditions which is a violation of the collective bargaining agreement. The labor contracts will be negotiated in January, 2015. The agency has discussed the use of legislation to remove this issue from collective bargaining.

During the corrective action period, a copy of proposed legislation was received along with changes to the agency human resource policy to incorporate hiring practices in which applicants will be asked about any previous sexual misconduct for positions with the possibility of direct contact with inmates. Revise policy and procedure to prohibit the hiring and promoting of an employee or contractor who may have contact with inmate who has engaged in sexual abuse as outlined in PREA standard 115.17. After consult with the PREA resource center, it was determined that sufficient efforts are being made to comply with 115.17 at this time.

Standard 115.218- Upgrades to facilities and technology

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

SMRC has not acquired any new facilities, or any expansion or modification since August 20, 2012. SMRC has upgraded its surveillance system to include seven additional cameras, two video monitors and additional body cameras in the past year.

Standard 115.221- Evidence protocol and forensic medical examination

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

SMRC investigations are conducted by Maine Correctional Center (MCC) law enforcement certified investigators who conduct both administrative and criminal investigations. Findings are based on agency policy; interviews with the MCC investigator and a review of investigative files. Forensic medical examinations are conducted by the Goodall Hospital or the Southern Maine Medical Center. Staff directive indicates that in the event that an inmate needs a forensic examination in regards to an alleged sexual abuse, staff will first contact Goodall Hospital or South Maine Medical Center and ask if they have a SANE or SAFE nurse on duty, if they do not, the client will be transported to the Maine Medical Center. Submitted documentation indicates that sexual assault forensic examiners (SAFE) and sexual assault nurse examiners (SANE) staff are available 24 hours a day, 7 days a week at

the Maine Medical Center. MCC's website also includes PREA policy (6.11) which describes how investigative responsibilities are handled for allegations of sexual abuse. There were no forensic medical examinations conducted during the past 12 months. Reviews of investigative files indicate that evidence collection is within the requirements of the standard. PREA policy (6.11) does not indicate that forensic medical examinations are offered without financial cost to the victim.

Draft MOU verified that the facility has attempted to make a victim advocate from a rape crisis center available to the victim. A signed memorandum of understanding was pending at the completion of the on-site audit.

During the corrective action period, PREA policy 6.11.5 sexual misconduct (procedures 2) was revised to indicate that medical and mental health cost are provided to alleged victims without financial cost. A copy of an informational flyer from the Commissioner indicating that medical exams were performed at an outside hospital free of charge to the prisoner. The signed MOU with the Maine Coalition of Sexual Assault Crisis Center was received as supporting documentation.

Standard 115.222- Policies to ensure referrals of allegations for investigations

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

SMRC policy (6.11 and 7.1) governs the investigation of allegations of sexual abuse and sexual harassment. The policies require the investigator to conduct administrative and criminal investigations. SMRC reports eight PREA allegations of sexual abuse and harassment in the past year. A review of investigative files indicates that three cases were determined to be unfounded, one substantiated staff misconduct, two substantiated inmate on inmate sexual misconduct, one unsubstantiated inmate on inmate sexual harassment and one case still under investigation. SMRC added additional cameras, video monitor and body cameras as a result of recent analysis of alleged incidents.

During the corrective action period, MCC policy (6.11.1) was revised to indicate referral process for allegations of sexual abuse or sexual harassment for criminal investigations is publicly on the agencies website or made publicly available via other means. A copy of the automated screen shot of the Maine public website was received as supporting documentation.

Standard 115.231 -Employee training

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

SMRC policy (6.11); training curriculum; automated staff training records and staff interviews verified that staff received initial and annual refresher training. Training rosters are signed verifying comprehension of PREA training material. Staff interviews served to further validate that training occurred for employees and contract staff. Specific training tailored for employees working with female offenders consistent with the standard requirements was reviewed and documented.

During the corrective action period, additional documentation of staff training specifically for employees working with female offenders including training curriculum on women offenders and sexuality in corrections was received as supporting documentation.

Standard 115.232 -Volunteer and contractor training

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

SMRC policy (6.11) requires volunteers and contractors who have contact with inmates to receive PREA training on their responsibilities under the sexual misconduct prevention, detection and response policy. Volunteers and contractors were notified of the department's zero-tolerance policy regarding sexual misconduct and informed of how to report such incidents. Volunteers and contractors signed and received a certificate acknowledging that they understand the training they received. The volunteer and contractor's training curriculum was also submitted and reviewed.

Standard 115.233 -Inmate Education

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

SMRC policy (6.11) requires inmates to receive comprehensive education within ten (10) days of intake to the facility on the facility's zero tolerance policy; how to report sexual misconduct/abuse and sexual harassment and their right to be free from retaliation for reporting. Female inmates are provided a gender specific handbook which includes information on prevention, self-protection, reporting and treatment/counseling. Inmates sign acknowledgement forms indicating that they receive this information. Documentation of inmate's signatures was reviewed. Inmates receive education upon transfer to the extent that the practice of the new facility differs from those of the previous facility. When asked the question in the interviews mixed answers were received. During the tour of the facility, posters outlining the sexual misconduct/abuse, zero tolerance policy, and instructions for reporting were posted in the dayroom. A telephone number along with a PIN number is listed on the poster. When dialed, the automated instructions did not ask for a PIN number. During discussion with staff, it was suggested that the instructions be clarified on the posters.

During the corrective action period, the Prisoner Acknowledgement of Prohibition on Sexual Misconduct was revised to indicate that the prisoner has viewed the educational video and understanding their right to report if sexual misconduct occurs. Each prisoner is required to sign this form upon intake.

Standard 115.234- Specialized training: Investigations

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

SMRC policy (6.11) requires investigators to receive specialized training in conducting investigations of sexual misconduct in facility settings. Documentation of training was reviewed and is in compliance with the requirements of the standard. A three (3) day investigators training was conducted by the MOSS Group in May of 2013. MCC investigators who also provide services for SMRC are law enforcement certified and conduct both administrative and

criminal investigations.

Standard 115.235- Specialized training: Medical and Mental Health Care

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

SMRC policy (6.11) mandates PREA and specialized training for medical and mental health care staff. Correct Care Solutions (CCC) provides PREA training for contract medical and mental health care staff. A certificate documenting participation was provided for each contract medical care staff and verified during interviews with staff.

During the corrective action period, documentation of specialized training for mental health staff was received.

Standard 115.241- Screening of risk of victimization and abusiveness

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

SMRC policy (6.11) requires intake staff to screen each inmate for risk of victimization and abusiveness within twenty four (24) hours of arrival/transfer to the facility. Inmates are reassessed using the PREA assessment instrument and additional relevant information received since intake within fourteen (14) days. A review of the inmate's automated files validated compliance with completion of the screening instrument. Interviews with staff also verified compliance with all elements of section (d). Staff interviews verified that information from the risk assessment screening instrument is kept confidential. The screening instrument did not meet the minimum required elements outlined in section (c) of the standard in that it did not include all questions in this subsection.

During the corrective action period, the PREA risk screening assessment instrument was revised to include the vulnerability factor regarding whether the inmate is gay, bisexual or transgender.

Standard 115.242- Use of screening information

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

SMRC policy (6.11) indicates that information from the risk screening is considered when making housing, work, education and other program assignments with the goal of keeping separate those inmates at high risk of being victimized from those at high risk of being abusive. Manual and automated versions of the risk screening instrument were submitted and viewed. Interviews with staff validate that information gathered from the screening instrument is used to guide security and management decisions.

During the corrective action period, PREA policy 6.11.2 was clarified to indicate procedures taken upon a prisoner arrival at SMRC. The risk instrument is scored prior to permanent housing placement. Inmates who are identified or disclose sexual victimization are referred to medical and mental health professionals within 14 days. Policy 6.11

precludes lesbian, gay, bi-sexual, transgender and intersex inmates from being placed in a particular housing area.

Standard 115.251- Inmate reporting

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

During interviews staff and inmates identified the multiple ways inmates can report to include telling a staff member, writing a grievance, asking to speak with the Unit Manager or designee and calling the PREA hotline. SMRC policy (6.11) also indicates that staff may make a report directly to the Department's PREA coordinator, either in writing or by calling the hotline number. Staff and inmate interviews verified compliance with this standard. Inmates receive a female handbook during the intake process that provides reporting options to include the toll-free PREA hotline number and the Maine Coalition Against Sexual Assault (MECASA) crisis and support telephone number.

Standard indicates that agency must provide at least one way for inmates to report abuse and harassment to a public or private entity that is not part of the agency. None of the random inmates interviewed were aware of any outside service provider by the facility to deal with sexual abuse. Some were generally aware that services exist in the community. Calls to the PREA hotline are sent to the agency PREA Coordinator. Calls to the MECASA are answered by an answering service. A number is left and calls are returned by a sexual assault counselor. Auditor's test call to MECASA revealed that a return number must be left in order to receive a call back.

During the corrective action period, a MOU was signed with the York County Jail to provide a way for inmates to report abuse of harassment to an office that is not a part of the agency. Pictures of the posted signs in various locations of the institution with reporting information was received.

Standard 115.252- Exhaustion of administrative remedies

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

SMRC policy (6.11) outlines the administrative procedure for addressing inmate grievances regarding sexual abuse and sexual harassment. Staff and inmate interviews confirmed their knowledge of how the grievance process can be used to report sexual abuse and harassment. SMRC had no grievances alluding to sexual abuse in the past twelve months. Staff and inmate interviews as well as SRC policy verified compliance with all elements of this standard.

Standard 115.253- Inmate access to outside confidential support services

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

SMRC provided a copy of a draft MOU with the MECASA to provide unimpeded access to outside confidential support services as required in this standard. Documentation of these efforts was verified by the auditor. The PREA supervisor's checklist which list actions to be completed when a sexual misconduct is alleged offers the victim an

advocate from the MECASA. The form indicates that the advocate may be present during medical, mental health, or other interviews. SMRC does not detain inmates solely for immigration purposes. Recommended that agency continue efforts to enter into a MOU with the Maine Coalition on Sexual Assault.

Standard 115.254 -Third Party reporting

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

SMRC website provides the public with information regarding third-party reporting of sexual misconduct/abuse or sexual harassment on behalf of an inmate. Inmates interviewed indicate that they are aware that sexual abuse or harassment may be reported through a third party.

Standard 115.261-Staff and agency reporting duties

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

All SMRC staff and volunteers are mandated reporters and are required by policy 6.11 to report any knowledge, suspicion or information they receive regarding sexual misconduct/abuse and harassment or retaliation against inmates or staff who report any such incidents. Besides reporting to designated supervisors, staff shall not reveal any information related to a sexual abuse to anyone. Random staff interviews verified knowledge of and compliance with this standard.

Standard 115.262-Agency protection duties

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

When a facility learns that an inmate is subject to substantiated risk of imminent sexual abuse it shall take immediate action to protect the inmate as mandated in MCC policy 6.11. There were no inmates identified as being at risk for sexual abuse in the past twelve months as revealed in interviews with the PREA coordinator and other staff. Interviews with the Unit Manager, PREA Coordinator and random staff validated their awareness of the mandate to immediately take steps to protect inmates.

Standard 115.263- Reporting to other confinement facilities

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

Does Not Meet Standard (requires corrective action)

SRC policy (6.11) requires the Unit Manager or designee to notify the head of another facility upon receiving an allegation that an inmate was sexually abused or sexually harassed while confined at another facility. SMRC received no allegations of sexual abuse from other facilities during the past 12 months.

Standard 115.264-Staff first responder duties

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

SMRC policy (6.11) requires staff to take specific steps to respond to a report of sexual abuse including; separating the alleged victim from the abuser, preserving the crime scene; and ensure that the alleged abuser does not take any action to destroy physical evidence, if the abuse took place within a time period that still allows for the collection of physical evidence. Policy indicates responsibilities of first staff person who discovers an incident and does not delineate duties and responsibilities for first responders who are not security staff members. Random staff and first responder interviews revealed that they are knowledgeable of actions to be taken upon learning that an inmate was sexually abused.

Standard 115.265-Coordinated response

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

SMRC has a written facility plan to coordinate actions taken in response to an incident of sexual abuse for first responders, medical and mental health, investigators, PREA coordinator, and the Unit Manager. The PREA Supervisors checklist is used as a guide to ensure that all areas are contacted and informed of the alleged incident. Interviews with the Unit Manager and other staff revealed that they are knowledgeable of their duties in response to sexual misconduct/assault.

Standard 115.266-Preservation of ability to protect inmates from contact with abusers

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

SMRC has not renewed its collective bargaining agreement or any agreement since August 20, 2012

Standard 115.267-Agency protection against retaliation

Exceeds Standard (substantially exceeds requirement of standard)

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

SMRC policy (6.11) requires monitoring of inmates and staff who reported sexual misconduct or sexual harassment or who provide information related to alleged incidents. Policy also mandates that any staff person or volunteer found to have attempted to deter or take retaliatory action against persons who provide information is subject to disciplinary or other appropriate action, including termination. Retaliatory action shall be reported and investigated. SMRC policy (6.11) does not designate the monitoring responsibility for retaliation; however, the PREA Coordinator reported that the unit treatment team has been charged with monitoring for retaliation. Documentation of one incident of monitoring for retaliation of a whistle blower by the SMRC unit management was received and reviewed.

During the corrective action period, SMRC policy (6.11.3) procedures A 8-10 were revised to indicate compliance with monitoring responsibilities as outlined in 115.267.

Standard 115.271-Criminal and administrative agency investigations

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

SMRC policy (7.1) requires that an administrative or criminal investigation be completed for all allegations of sexual abuse and sexual harassment. The facility reported eight PREA allegations in the past year. A view of the investigative files revealed that staff responses were compliant with PREA standards. All written reports alleging sexual abuse and sexual harassment are held for as long as the alleged abuser is incarcerated or employed by the facility, plus five (5) years.

Standard 115.272- Evidentiary standards for administrative investigations

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

SMRC policy (6.11 and 7.1) governs the investigation of allegations of sexual abuse and sexual harassment. The policies require the investigator to conduct administrative and criminal investigation. Policies and interviews with Correctional Investigative Officers state that SMRC shall impose no standard higher than a preponderance of evidence in determining whether allegations of sexual abuse or harassment are substantiated.

Standard 115.273- Reporting to inmates

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

SMRC policy (6.11) indicates that at the conclusion of an investigation the Correctional Investigative Officer or staff member designated by the facility administrator shall inform the inmate who made the allegation of sexual abuse in writing whether the allegation has been substantiated, unsubstantiated and unfounded. If the alleged abuser was an employee, the victim shall also be informed. During interviews, the Unit Manager and PREA Coordinator were knowledgeable of the reporting requirements and verified that notifications are provided.

Standard 115.276-Disciplinary sanctions for staff

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

SMRC policy (6.11) indicates that staff shall be subject to disciplinary action up to and including dismissal for failure to comply with the facility's policy prohibiting sexual abuse and harassment. Policy also mandates that the violation is reported to law enforcement and licensing agencies unless the activity was not criminal. Employee interviews and documentation received indicates that there has been no abuse case reported in the past year. There has been one investigations resulting in formal disciplinary action of suspension or reprimand.

Standard 115.277-Corrective actions for contractor and volunteer

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

SMRC policy (6.11) requires volunteer and contractors in violation of the facilities policies and procedures regarding sexual abuse and harassment of inmates will be reported to local law enforcement and relevant licensing bodies unless the activity was clearly not criminal. Documentation received from SMRC volunteer coordinator indicates that there has been no PREA incident involving volunteers or contractors in the past twelve (12) months.

Standard 115.278-Disciplinary sanctions for inmates

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

SMRC policy (6.11) requires that inmates who are found guilty of engaging in sexual abuse involving other inmates (either through administrative or criminal investigations) shall be subject to formal disciplinary sanctions. The agency also disciplines inmates for sexual conduct with staff only upon finding that the staff member did not consent to such contact. Interviews with medical and mental health staff verified that in the event of such a finding, the treatment team would make decision for appropriate counseling treatment or other intervention as appropriate.

Standard 115.81-Medical and mental health screening; history of sexual abuse

- Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

Correct Care Solutions (CCS) and SMRC policy (6.11) requires medical and mental health staff to provide counseling for inmates who disclose a history of sexual abuse or previous perpetrating of sexual abuse within seven (7) days. Interviews with medical and mental health staff verified compliance with this standard.

Standard 115.282-Access to emergency medical and mental health services

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

SMRC (6.11) and CCS policy requires medical staff to document the response and timeliness of emergency medical treatment and access to crisis intervention services for victims of sexual abuse. Policy indicates that inmates are offered timely information about access to emergency contraception and sexually transmitted infection prophylaxis. Staff interviews with medical and mental health staff verified compliance with this standard.

Standard 115.283 Ongoing medical and mental health care for sexual abuse victims and abusers

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

SMRC policy (6.11) mandates ongoing medical and mental health care for sexual abuse victims and abusers consistent with those outlined in this standard to include mental health evaluations and services as appropriate. Interviews with medical and mental health staff verified that there are procedures in place for on-going medical and mental health care should an incident of sexual abuse occur.

Standard 115.286 Sexual Abuse incident reviews

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

SMRC policy (6.11) requires a sexual abuse incident review at the conclusion of every sexual abuse investigation in which the allegation has been determined substantiated or unsubstantiated. Such reviews shall occur within thirty (30) days of the conclusion of the investigation. The policy outlines the specifics of the Review Team's duties as outlined in section (d) of this standard. The facility has a Sexual Misconduct review form in place to document such reviews. Interview with PREA Coordinator verified that the facility complies with policy and this standard.

Standard 115.87 Data Collection

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

Standard 115.88- Data review for corrective action

SMRC policy (6.11) requires the collection of accurate, uniform data for every allegation of sexual abuse at facilities under its direct control. The agency's PREA Coordinator uses a standardized instrument and collects all data relating to the PREA. Policy indicates that the Coordinator shall maintain the data reported or collected for at least ten (10) years. At least annually, all sexual misconduct data shall be made readily available to the public through the department's website and reported to the DOJ upon request. A review of the report revealed it was completed correctly according to this standard.

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

SMRC policy (6.11) requires the PREA Coordinator to review data collected and aggregated in order to assess and improve the effectiveness of the agencies sexual misconduct prevention, detection, response policies, practices and training. The coordinator prepares a semi-annual report which includes findings and corrective actions taken for SMRC since January, 2014. Policy mandates that all aggregated sexual abuse data shall be made readily available to the public at least annually through MCC website.

AUDITOR CERTIFICATION:

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

Joette D. Scarborough

April 30, 2015

Auditor Signature

Date