

PREA AUDIT: AUDITOR'S SUMMARY REPORT ADULT PRISONS & JAILS

INTERIM FINAL



AUDITOR INFORMATION			
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Dates of on-site audit:	December 14-15, 2015		
FACILITY INFORMATION			
Name of Facility:	Chester County Prison		
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Facility Mailing Address:	Same		
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This Facility is:	<input type="checkbox"/> Federal	<input type="checkbox"/> State	<input checked="" 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"/> Jail	<input type="checkbox"/> Prison	
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Governing Authority or Parent Agency:	Chester County Prison		
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NARRATIVE: The Chester County Prison is a secure 1105 bed facility for male and female inmates (both pre-trial detainees and sentenced offenders). It is the only facility operated by the agency. The on-site portion of the PREA Audit took place December 14-15, 2015 and covered the audit period of December 14, 2014 to December 14, 2015. On the morning of December 14, 2015 this auditor entered the facility for purposes of conducting an on-site tour of the facility and interviewing inmates, staff, volunteers and contractors. The facility provided a list of all staff by shift and employee job categories and a list of all inmates by housing unit. Prior to arrival this auditor reviewed pertinent agency policies, procedures, and related documentation used to demonstrate compliance with the Adult Prisons and Jails PREA Standards. The pre-audit review of documents contained in the Pre-Audit Questionnaire submitted by the facility prompted very few questions. Answers to those questions were submitted to this auditor by the facility staff and any additional remaining questions were resolved during the audit. This auditor and an assistant interviewed 51 inmates (45 male and 6 female). There were 10 youthful inmates housed at the facility at the time of the audit. Three youthful inmates were interviewed. Youthful inmates they are housed in cells on a separate housing unit that has complete sight and sound separation from the general population. The inmates interviewed were a representative sample from each of the housing units. Length of stay for those interviewed ranged from one day to 23 months. There were no inmates who identified themselves as transgender or intersex and no inmates who needed translation services. There was one inmate identified as gender non-conforming in appearance (arrived during tour on day one of audit and interviewed on day two). This auditor received no written correspondence from any inmate. There was one inmate currently in the facility that made an allegation of sexual harassment that occurred at the facility. This inmate was also interviewed.

During the tour, additional questions were answered by executive and upper-level management staff. This auditor was given free access to all areas of the facility. The tour covered all housing units, recreation areas, food service, restrictive housing unit, maximum security, segregation, medical, mental health and inmate services. Staff and inmate interviews followed and were conducted privately in a room without video surveillance. There are no Sexual Assault Nurse Examiner (SANE) or Sexual Assault Forensic Examiner (SAFE) staff employed at the facility. These services are available at the Brandywine Hospital. A Memorandum of Understanding (MOU) is in place with the Victims Services Center of Chester County. This auditor interviewed members of the incident review team and one of the staff members charged with monitoring for retaliation (Lieutenant).

Administrative investigations are conducted by Captains who have had prior investigations training and have completed specialized training for conducting investigations of sexual abuse in confinement settings. The curriculum used for this training is the curriculum posted on the PREA Resource Center's website. Criminal investigations are conducted exclusively by the Chester County District Attorney's Office detectives (lead detective was interviewed). There was a group volunteers at the facility on the second day of the audit. An interview was conducted with one of the religious volunteers. Contract medical and mental health staff were interviewed. The agency Executive Director (the Warden) was interviewed by this auditor. Emails were sent to Just Detention International, the Victim Services Center of Chester County and the Pennsylvania Coalition Against Rape in an effort to determine if the organizations had any relevant information regarding the facility. Just Detention International advised that they had received one complaint regarding PREA compliance at the Chester County Prison that fell outside this audit period. Efforts to contact the complainant in that incident were unsuccessful. As of this writing there has been no response from the Pennsylvania Coalition Against Rape. Contact was

successfully made with the Victim Services Center of Chester County and that information is reflected in this report.

DESCRIPTION OF FACILITY CHARACTERISTICS: The Chester County Prison is an 1105 bed secure facility for male and female inmates at all levels of security operated under the authority of the Chester County Prison Board. The facility is comprised of one structure with a secure perimeter (the main prison) and the community corrections center. The building was purpose-built as a prison in 1958 and was designed to hold 284 inmates. Renovations and an addition were completed in 1984 adding a full sized gym and 240 more beds. The Community Corrections Center was built in 1991. In 2008 the facility underwent an additional expansion that included an 18 bed infirmary, increased space for medical services and additional housing units to bring the facility's total capacity to 1105. All housing units except the originals from 1958 are pod style. The four original housing units are linear in design. The facility is a combination of double and single occupancy cells. There are single cells available on all housing units with the exception of the Community Corrections Center. Sleeping areas at the Community Corrections Center are dormitories. There are 16 housing units in the main prison (14 male and two female). The male housing units consist of minimum security, medium security, maximum security, mental health, restrictive housing (segregation) and youthful inmates. The two female housing units contain cells for general population, special needs, and restrictive housing. Showers are single user stalls that are situated within the cell block to facilitate appropriate supervision and maintain safety without sacrificing the inmate's privacy.

The Community Corrections Center has two housing units (one male and one female). The population consists of sentenced inmates. The vast majority are pre-release and work-release inmates. There are also inmates serving short-term determinate sentences for non-violent offenses such as driving under the influence. All inmates at the Community Corrections Center go through screening, intake and classification at the main prison prior to admission.

The Chester County Prison houses the following types of inmates:

- Pre-trial detainees
- County sentenced inmates
- State sentenced inmates – Technical Parole Violators
- Immigration and Customs Enforcement detainees
- Work release sentenced inmates

Each housing unit has access to an outdoor recreation yard. The yard utilized by the youthful inmates has sight and sound separation from the general population. There is a full-size indoor gymnasium in both the main prison and the Community Corrections Center. The gymnasium in the main prison is not visible from any of the housing units and serves as an additional recreation area for youthful inmates. There is no central dining hall. All meals are served on the housing units.

There are a total of 211 cameras in the facility. There are two central control booths for viewing live images (one in the main prison and one in the Community Corrections Center). Supervisors have access for viewing and downloading recorded images from their office computers. The system has a minimum of 30 days retention time for recorded images. There is camera view of all doors in the facility. The system provides camera coverage for approximately 90 % of the facility. All interior cameras are fixed.

The facility just received funding approval for expanding its video surveillance system. The expansion will provide an additional thirty cameras.

The facility maintains 24 hour medical coverage.

Chester County Prison is certified by the Pennsylvania Department of Corrections every two years. They were re-certification in November 2015 with a score of 100%. The next re-certification will be in 2017.

There were a total of 877 inmates at the facility on the first day of the audit. 53% of the population was white. 35% of the population was African-American, 11% of the population was Hispanic and the remaining 1% were other. 86% of the population was male and 14% female.

The Chester County Prison maintains 24 hour supervisory coverage (Lieutenant or higher) as well as an On-Call Administrator.

SUMMARY OF AUDIT FINDINGS: Auditor arrived at the facility the morning of December 14, 2015. An entrance meeting was held with the Warden, Assistant Warden, Major (facility PREA Coordinator), three Captains, this auditor's interview assistant, and this auditor. This auditor explained how inmate interviews needed to be supervised (staff able to see both the interviewer and the inmate, but out of hearing range and the inmates line of sight). The scope of the tour and how the tour needs to be conducted was explained. The facility was advised that this auditor needed to interview the one inmate who made an allegation of sexual harassment and was still at the facility. It also happens that this was the one inmate who sent this auditor a confidential letter.

A complete tour of the facility took approximately three and a half hours. All areas were extremely well maintained. Sight lines were excellent in all housing areas. Information on reporting sexual violence and available of outside support services (including contact information) was prominently posted on all housing units. The audit notice was posted on all housing units, the main entrance to the facility and the inmate visitors waiting area.

Inmates were observed at recreation, during movement, work details (inside and outside the facility), meals, in medical, going through intake, and on the housing units. Observations of staff supervision practices were consistent with the agency's policies. Observed interactions between staff and inmates were professional, respectful and boundary appropriate.

The initial PREA screening for risk of sexual victimization and/or propensity to victimize others is conducted by corrections officers on the date of admission, and documented in the inmate management system. Secondary screening is conducted by medical staff within four hours of admission. All inmates interviewed acknowledged being screened on the date of admission as well as being seen by medical staff on the date of admission. A full classification assessment is completed by a Counselor from Inmate Services within 48 hours of admission. Both the screening and classification are performed using an objective, standardized instrument. These instruments include questions about sexual orientation, gender identity, history of sexual abuse and abusiveness, and the inmates own perception of their vulnerability. Any alerts noted during the screening process that would necessitate medical or mental health follow-up are sent to the appropriate parties. Inmates who disclose prior sexual victimization during screening are seen by mental health staff within 24 hours. Interviews with medical and mental health staff confirmed this process and that follow-up occurs with the required time frame.

Chester County Prison Policy and Procedure, "Prison Rape Elimination Act of 2003", pages 10-12 gives clear direction on the steps to be taken once an allegation is received. This same policy requires all staff, contractors, and volunteers to immediately report any knowledge of sexual harassment, sexual abuse or sexual assault to the shift supervisor. In the case of sexual harassment, the shift supervisor notifies the facility's PREA investigators, who will begin an administrative investigation. Interviews will be conducted of the alleged victim, suspected perpetrator and any witnesses. A review will be conducted (if applicable) of any prior complaints against the suspected perpetrator, as well as the victim. The creditability of the information received will be assessed on the bases of the Case and not on the status of the victim or alleged perpetrator. If during the course of the administrative investigation it is determined that the harassment is criminal the Investigation will cease and the Chester County Detective Bureau will be notified immediately and given all information that had been collected.

In cases of alleged sexual abuse and/or sexual assault, once the shift supervisor is made aware of the allegation the alleged victim & abuser must be separated immediately, in order to collect evidence. Appropriate steps will be taken to protect and preserve the crime scene. A request will be made to the alleged victim not to take any action that could destroy physical evidence, while ensuring the alleged victim is not permitted to do the same. The Shift Supervisor will notify Medical and transport the victim as soon as possible to the Medical Department. Any physical markings found or evidence present in the area where the assault occurred will be photographed immediately by Staff.

The Warden and PREA Coordinator will be notified by the shift supervisor. 911 will be contacted for transport to the hospital for forensic examination and evidence collection. The Hospital will be notified by medical that a sexual abuse/assault victim is in route.

Initial administrative investigations regarding allegations of sexual harassment and sexual abuse are conducted by supervisors (lieutenant or higher) who have received prior investigations training and specialized training for investigators of sexual abuse in correctional settings. This training utilized the curriculum posted on the PREA Resource Center's website. A review of all nine administrative investigations confirmed an aggressive and thorough investigation into all allegations of. Criminal investigations of sexual abuse and assault are conducted by detectives from the Chester County District Attorney's Office. The facility, per policy, refers all allegations of sexual acts to the detectives and allows DA's detectives to determine if the behavior rose to the level of criminal conduct. The primary District Attorney's Office detective who handles the majority of PREA investigations was contacted. He confirmed that there were no allegations of sexual abuse or sexual assault referred to his office for investigation during this audit period. All nine administrative investigations have been completed. None rose to the level of criminal behavior. Of those nine allegations nine inmates were still at the facility at the conclusion of the investigation. Documentation of notice to all inmates was provided to this auditor. An MOU is in place with the Victims Services Center of Chester County for crisis counseling and victims' services. Forensic examinations and evidence collection would be performed at the Brandywine Hospital by Sexual Assault Nurse Examiners.

This auditor interviewed the following staff titles (number in parentheses indicates more than one staff in that title was interviewed):

- Warden
- Major
- Captain
- Lieutenant
- Mental Health Manager
- Kitchen Supervisor
- Health Services Administrator
- Agency PREA Coordinator
- Corrections Officer (10)
- Religious volunteer

Corrections Officers were selected for interviews to include staff, both male and female, from all housing units. Experience levels ranged from one year to over 19 years. All presented as very knowledgeable about their jobs and highly dedicated to keeping inmates and the community safe. All staff acknowledged receiving PREA training within the past year and over the course of their careers a significant amount of training related to cultural sensitivity, professional ethics and reporting responsibilities.

All staff members knew their responsibilities as related to mandatory reporting of allegations of sexual abuse, assault and harassment. All staff acknowledged having received PREA specific training as first responders and all knew what to do if they were a first responder. All Corrections Officers and supervisors interviewed were readily able to articulate their first responder duties. All felt supported by facility management, and had no fear regarding retaliation for reporting abuse. All felt empowered to proactively address issues related to sexual violence and were able to describe actions they would take to prevent and/or deter potential and/or imminent threats of sexual violence.

A total of 50 randomly selected inmates at the facility were interviewed and included inmates from all housing units. Random selection involved taking every tenth inmate on the facility roster until there were sixty inmates available for interview and at least one inmate from every housing unit. There were no inmates currently at the facility that identified as transgender or intersex. There was one inmate who had been identified as gender non-conforming in appearance upon admission on the first day of the on-site audit. This inmate was interviewed as well. All inmates acknowledged being asked about sexual orientation upon admission. All inmates interviewed had knowledge of the right to be free from sexual abuse, assault or harassment. All inmates were aware of at least two methods for reporting abuse, one of which was anonymous reporting via the inmate telephones. All inmates acknowledged being screened upon admission (initial screening actually occurs on date of admission, which exceeds the standard). The vast majority of inmates interviewed acknowledged receiving information upon admission on their right to be free from sexual abuse, assault and/or harassment. All inmates interviewed said they currently felt safe at the facility.

Of the 51 total inmates interviewed (50 randomly selected and one specific inmate) four were self-identified as gay and six self-identified as bisexual). These inmates were distributed among four different housing units. A review of all housing assignments and classification decisions regarding the ten gay and bisexual inmates clearly indicated that there was no designated unit for housing such inmates.

The quality and organization of the documentation provided to this auditor was excellent. This auditor received all policies and supporting documentation as hard copies. The pre-audit questionnaire completed by the agency's PREA Coordinator was one of the best adult questionnaires this auditor has received. The referenced documents in the questionnaire were provided electronically and properly labeled for easy access.

The organized manner in which the interviews were facilitated by the PREA Compliance Manager made the process go very smoothly with no wasted time in between interviews.

STANDARDS DETERMINATION TOTALS:

Exceeds Standard – 2 (Two) Standards or approximately 5% of total standards.

Meets Standard - 41 (Forty one) Standards or approximately 95% of total standards.

Does Not Meet Standard – 0 (Zero) Standards or 0% of total standards

Standard 115.11 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The Chester County Prison Policy and Procedure, "Prison Rape Elimination Act of 2003", page 1, clearly articulates the agency’s zero tolerance policy. The Chester County Prison Policy and Procedure, "Prison Rape Elimination Act of 2003", page 1, establishes the role of PREA Coordinator who reports to the deputy warden. Agency organization chart and chain of command chart clearly depict the role of the Facility PREA Coordinator. Interview with the PREA Coordinator confirmed his knowledge of the PREA standards and commitment to the implementation of the PREA standards. The Chester County Prison is the only facility operated by the agency and as such there is no facility compliance manager. Notice of the PREA compliance audit was posted on all housing units and other prominent locations throughout the facility.

Standard 115.12 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Per this auditor’s interview with the warden, Chester County Prison does not contract with any other entity for the confinement of its inmates. In the event that the facility did end up contracting with another entity for the confinement of its inmates PA Title 37, Chapter 95 regulations require compliance with this standard.

Standard 115.13 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Chester County Prison Policy and Procedure, "Supervision and Staffing Analysis", requires the Chester County Prison to have a staffing plan in compliance with the PREA standards and that the plan is reviewed annually. The facility staffing plan was provided to this auditor. The plan is a multi-page document that addresses the following standard requirements:

- Any judicial findings of inadequacy;
- Any findings of inadequacy from Federal investigative agencies;
- Any findings of inadequacy from internal or external oversight bodies;
- Components of the physical plant including blind spots and areas where staff or inmates may be isolated);
- composition of the inmate population;
- Additional posts required based on programs occurring on a particular shift;
- PA DOC regulations;
- Any substantiated and unsubstantiated incidents of sexual abuse; and
- Available video surveillance.

Documentation of annual review of the plan was also provided. Chester County Prison Policy and Procedure requires unannounced rounds. These rounds are documented in housing unit logs. This auditor was provided documentation of these rounds and interviews with supervisory staff and corrections officers confirmed that they occur. Observed staffing during the on-site audit demonstrated compliance with the staffing plan during program hours. Over-night staffing in compliance with the staffing plan was documented on staffing schedules, housing unit logs as well as interviews with staff. The facility reports that there were no instances of deviations from the staffing plan due to training, vacations, Family Medical Leave and other types of leave. Overtime is paid to maintain minimum staffing. There was no indication from any of the staff interviews that the staffing plan is not followed. This auditor has audited county correctional facilities twice the size of Chester County Prison that operated with a third of the staffing that this facility maintains as minimum numbers. The six female inmates interviewed stated that there had been no instance in the past year of them being confined to their cells due to a lack of female staff on duty to conduct searches.

Additionally, PA Title 37, chapter 95 for the operation of county correctional institutions requires compliance with this standard.

Standard 115.14 Youthful 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Chester County Prison houses youthful inmates. Chester County Prison Policy and Procedure, "Youthful Offender PREA Protocol" requires compliance with this standard. The facility has provisions to house youthful inmates that afford sight and sound separation from the general population. There is a separate housing unit that is sight and sound separated from the general population. Recreation (large muscle activity) is provided daily in a recreation yard that is sight and sound separated from the general population. There is no central dining hall. All meals are served on the housing units. Youthful inmates attend educational programming in a classroom adjacent to the housing unit that is sight and sound separated from the general population. All movement off the housing unit requires an officer escort. Other county correctional facilities contract with Chester County Prison to house their youthful inmates because of the excellent practices and appropriate sight and sound separation.

Standard 115.15 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Chester County Prison Policy and Procedures, "Searches of Inmates" prohibits cross gender strip searches for any reason and cross gender viewing of inmates showering, changing clothes and performing bodily functions. Male staff at the facility are only assigned to male housing units and female staff are only assigned to female housing units. Male staff relieving a female officer assigned to a female housing unit are only permitted to enter the control both; they do not enter the actually housing unit unless there is an emergency. The female inmates interviewed reported that they have never been searched by a male staff while at the Chester County Prison. All random staff interviewed confirmed that cross-gender searches of female inmates do not occur. All inmates interviewed denied ever having been strip searched by an opposite gender staff. Chester County Prison policy and procedure, "Search and Processing Commitments", page 2, prohibits searching inmates for the purpose of determining if the inmate is transgender or intersex. All of the inmates interviewed denied ever being searched for this purpose. The corrections officers interviewed were aware that this type of search is prohibited. There are no cameras with a view inside bathrooms or showers. This was confirmed by observation at the central control center. All inmates shower separately. This was confirmed via inmate interviews. All inmate interviewed acknowledged that they have reasonable privacy when showering, toileting and changing clothes. There are privacy curtains in each cell for the toilets. All staff interviewed stated that their presence is announced when they enter a housing unit of opposite gender inmates. There are signs at the entrances to all housing unit requiring opposite gender staff to announce their presence upon entering the housing unit. All inmates interviewed acknowledged that opposite gender staff announces their presence when entering housing units. This practice was also observed throughout the on-site audit.

Standard 115.16 Inmates with disabilities and residents 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Chester County Prison Policy and Procedure, "Prison Rape Elimination Act of 2003" page 5 requires compliance with this standard. The facility has trained staff to assist disabled inmates in understanding their rights under PREA. The policy states on the same page that the use of inmate interpreters is prohibited. This auditor received copies of intake materials in Spanish. The facility has multiple Spanish speaking staff. A language interpretation service is available for all languages should the need arise. There is also American Sign Language interpretation available. There were no inmates currently at the facility that required the services of an interpreter. There were no inmates currently at the facility that had disabilities that would require them to receive special services to understand their rights under PREA. All of the above was confirmed via interviews with staff and inmates.

Standard 115.17 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Chester County Prison Policy and Procedure, "Prison Rape Elimination Act of 2003", pages 3, requires compliance with this standard. These checks include clearance through the Pennsylvania child abuse registry. Employment applications specifically ask questions regarding prior sexual misconduct in an institutional setting, in the community, as well as any civil or administrative adjudication for sexual misconduct. Material omissions of sexual abuse or harassment incidents or the provision of materially false information are grounds for termination. The facility hired 41 new employees during this audit period. A random sample personnel records were examined. 41 new employees underwent background checks during this audit period. 10 contract personnel underwent background checks during this audit period. Documentation of all background checks and clearances for this audit period was reviewed by this auditor. Background checks are repeated every five years.

Standard 115.18 Upgrades to facilities and technologies

- 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

There have been no physical plant upgrades or renovations during this audit period. The facility just received approval for funding to upgrading its video surveillance system. Upgrades include 30 additional cameras on the housing units and other areas determined during the facility's annual review of its surveillance system. Current retention time on the system for recorder images is on average 30 days. This standard is expected to remain after the system upgrade.

Standard 115.21 Evidence protocol and forensic medical examinations

- 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Chester County Prison only conducts administrative investigations of sexual harassment. Criminal investigations are conducted by detectives from the Chester County District Attorney's Office. Per policy the facility refers all allegations of sexual acts to the DA's detectives and the detectives determine if the behavior rose to the level of criminal activity. The facility reports no allegations of sexual abuse or assault during this audit period. The lead detective from the Chester County DA's office confirmed that they did not conduct any investigations of sexual abuse or assault during this audit period. The facility reports there were no allegations which necessitated a forensic exam. The facility reports that, per agency medical protocols, all victims of sexual assault would receive a forensic examination (free of charge) from a Sexual Assault Nurse Examiner or other qualified medical professional at the local healthcare facility. Forensic examinations are not conducted by facility staff. All staff are trained to preserve incident scenes and measures to prevent evidence from being destroyed. Physical evidence collection of criminal acts may be performed by staff in a manner consistent with municipal law enforcements practices. This was confirmed via interviews with staff. Rape crisis and victim advocacy services are provided by the Victims Services Center of Chester County. Services are provided at no charge to the inmate.

Per this auditor's interview with the warden, the Chester County District Attorney's office detectives have been advised of the need to comply with the PREA standards related to investigations. The lead detective from the Chester County District Attorney's Office confirmed this.

Standard 115.22 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Chester County Prison Policy and Procedure, "Prison Rape Elimination Act of 2003" was reviewed by this auditor. The policy meets all the requirements of this standard. It requires that all allegations of sexual harassment and sexual abuse be investigated. It requires that allegations that may be criminal in nature be referred to law enforcement and provides clear guidance for when Chester County Prison may conduct an administrative investigation once a referral to law enforcement has been made. These policies are posted on the agency website. All Chester County Prison staff are mandated reporters of sexual abuse and/or harassment and all staff interviewed were aware of their obligations to report sexual abuse and/or harassment under agency policy. The facility reported nine allegations of sexual harassment during this audit period. The facility reports no allegations of sexual abuse and/or assault. There were zero allegations referred to the law enforcement for investigation. This was confirmed by the lead detective at the Chester County DA's Office. Sample investigation reports were reviewed by this auditor. Reports are extremely detailed and the file contains all evidence relevant to the investigation. Chester County Prison policy requires reporting of sexual harassment allegations that do not rise to the level of sexual harassment as defined by the PREA standards (the standards specifically state "repeated" as a condition of the definition). Chester County Prison is intentionally reporting and investigating single occurrences of sexual harassment in order to improve the conditions of confinement at the facility as they relate to PREA compliance, and they should be applauded for their efforts. This practice clearly exceeds the requirements of this standard.

Standard 115.31 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Chester County Prison Policy and Procedure, “Prison Rape Elimination Act of 2003”, pages 3-4 requires all staff with contact with inmates to be trained as required in this standard. The training curriculum, taken from the PREA Resource Center website and modified for the jail, meets all aspects of this standard. This is the same curriculum used for refresher training. All staff interviewed acknowledged that they had received the initial training and refresher training. Staff sign a written acknowledgement at the end of the training to document their understanding of the material. Documentation was provided to this auditor confirming staff’s understanding of the material presented. All staff interviewed were aware of their obligations related to the agency’s PREA policy, their obligations as mandated reporters of sexual abuse and/or harassment, their duties as a first responder and agency protocols related to evidence collection.

The training curriculum utilized by the facility meets all aspects of this standard as follows:

<input checked="" type="checkbox"/> (1) Agency's zero tolerance policy for sexual abuse and sexual harassment.	Policy Reviews
<input checked="" type="checkbox"/> (2) How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures.	Policy Reviews
<input checked="" type="checkbox"/> (3) Inmates’ right to be free from sexual abuse and sexual harassment.	Policy reviews
<input checked="" type="checkbox"/> (4) The right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment.	Slides 22 and 23
<input checked="" type="checkbox"/> (5) The dynamics of sexual abuse and sexual harassment in confinement.	Slides 30 and 31
<input checked="" type="checkbox"/> (6) The common reactions of sexual abuse and sexual harassment victims.	Slides 44 - 47
<input checked="" type="checkbox"/> (7) How to detect and respond to signs of threatened and actual sexual abuse.	Slides 31 - 35
<input checked="" type="checkbox"/> (8) How to avoid inappropriate relationships with inmates.	Addressed during cultural sensitivity training, professional conduct training and employee rules and regulations training.
<input checked="" type="checkbox"/> (9) How to communicate effectively and professionally with residents, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates.	Addressed during cultural sensitivity training, professional conduct training and employee rules and regulations training.
<input checked="" type="checkbox"/> (10) How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.	Policy review

Standard 115.32 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Chester County Prison policy and procedure, "Prison Rape Elimination Act of 2003" was reviewed by this auditor. All contractors that have contact with inmates receive the same PREA training as employees. The training meets all the aspects of this standard. Volunteers receive an orientation and handout, and must sign an acknowledgement that they have received and understood the training. One contract mental health staff and one of the contract medical staff were interviewed at the time of the on-site audit and all acknowledged receiving PREA training. Documentation of signed acknowledgements was provided to this auditor. One religious volunteer was interviewed on day two of the audit. The volunteer has been at the facility for 4 years and advised that she has received annual training on PREA for the past two years. She also stated that volunteers are never alone with inmates. One-on-one meetings are observed by an officer.

Standard 115.33 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Chester County Prison's inmate education program is provided to inmates by the facility staff during intake. Inmates also receive the inmate handbook upon admission which contains the same information. Inmates receive materials about PREA and their rights to be free from abuse upon admission. There is a translation service available if the need arises. American Sign Language translation is also available. Medical and mental health staff has received specialized training to assist inmates with disabilities in understanding their rights under PREA. All inmates interviewed were aware of their right to be free from sexual abuse and harassment, and knew multiple means of reporting allegations of abuse. All inmates acknowledged receiving the inmate education and written materials. All inmates interviewed acknowledged receiving PREA education and written materials upon admission. The facility maintains documentation that all inmates received the education. Posters in English and Spanish were clearly visible on all living units and throughout the facility.

Standard 115.34 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Per Chester County Prison Policy and Procedure, “Prison Rape Elimination Act of 2003” requires the facility to have properly trained investigators for administrative investigations. The training the investigators received utilized the curriculum on the PREA Resource Center’s website. Documentation of training for Chester County Prison investigators was provided to this auditor. A review of completed investigations demonstrated the investigator’s full understanding of the training. Chester County Prison does not conduct criminal investigations of sexual abuse and assault. Such investigations are conducted by detectives from the Chester County District Attorney’s Office. This was confirmed via contact with the lead detective.

Standard 115.35 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Chester County Prison Policy and Procedure, “Prison Rape Elimination Act of 2003”, mandates specialized training for medical and mental health staff as per the PREA standards. The facility’s PREA training provides extensive instruction on recognizing signs and symptoms of sexual abuse, as well as effective and professional communication skills when dealing with victims of sexual abuse. The facility evidence collection protocols are also extensively covered in the training. Documentation of training for contract providers was provided to this auditor. Interviews with the staff, both medical and mental health, of the contracted medical services provider confirmed staff training. Contract medical staff does not conduct forensic examinations. The agency’s protocol is to preserve/avoid destruction of evidence and then transport to the designated medical facility.

Standard 115.41 Screening for 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Chester County Prison Policy and Procedure, "Prison Rape Elimination Act of 2003", page 6 addresses the standards related to screening inmates for risk of victimization and abusiveness. The PREA screening for risk of sexual victimization and/or propensity to victimize others is conducted by corrections officers and medical staff on the date of admission, and documented in the inmate management system. All inmates interviewed acknowledged being screened on the date of admission as well as being seen by medical staff on the date of admission. A full classification assessment is completed by a classification staff within 72 hours of admission. All new commitments to the jail are housed on the intake unit for the first 72 hours. Both the screening and classification are performed using an objective, standardized instrument. Access to screening information is limited to medical staff, mental health clinicians and a limited number of upper level administrators. The screening instrument includes documentation of:

- Height and weight
- Age
- Mental health concerns
- Developmental disabilities
- Physical disabilities
- History of prior incarceration
- Criminal history and current offense
- Appearance
- Sexual orientation, gender identity and gender non-conforming
- The inmates own perception of vulnerability
- Inmate's request for protective custody
- History of abuse and/or abusiveness including prior sexual abuse or abusiveness

Page 6, section E of the policy requires reassessment of an inmate's risk of victimization or abusiveness promptly after obtaining relevant information after the initial screening. Reassessments are also conducted as needed based on relevant institutional behaviors.

Standard 115.42 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Chester County Prison Policy and Procedure, “Classification and Custody Levels” addresses how the information obtained during screening is utilized to inform programming and housing decisions. Sexual orientation is not a factor taken into consideration by the policy. A review of documentation of classification decisions and housing assignments clearly showed that the decisions are case-by-case, and that there is no designated unit for transgender or intersex inmates. Interviews with all staff and inmates confirmed compliance with this standard. Chester County Prison Policy and Procedure, “Housing Assignments”, page 2 requires that housing assignment decisions for transgender and intersex inmates be done on a case by case basis, based on the safety needs of the inmate and the security of facility.

Standard 115.43 Protective custody

- 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Chester County Prison does not use involuntary protective custody beyond 24 hours. The provisions of the policy comply with this standard. The use of involuntary protective custody would be based on incidents occurring at the facility and not based on initial risk assessments. The facility reported one instance of involuntary protective custody lasting less than 24 hours during this audit period. Involuntary protective custody beyond 24 is not used, and was not used during this audit period. Involuntary protective custody was used once in order to provide for the inmate’s safety while investigators determined whether or not the allegation involved sexual abuse. A review of documentation of classification decisions and housing assignments clearly showed that the decisions are case-by-case. Interviews with all inmates confirmed compliance with this standard. All of inmates in protective custody at Chester County Prison at the time of the on-site audit were there at their own request.

Standard 115.51 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Chester County Prison Policy and Procedure, "Prison Rape Elimination Act of 2003", page 8 appropriately addresses this standard. All staff, contractors and volunteers are mandated to report sexual abuse, assault and harassment. They are also mandated to accept any report from an inmate or third party. All inmates interviewed knew at least two means to report sexual abuse or harassment (report to staff and Hotline via inmate telephone system were the most common responses). All knew where to find the Hotline number to report abuse outside the agency. The Hotline is a service to all county correctional facilities provided by the Pennsylvania Department of Corrections. Allegations of acts that have already occurred are sent via email to the warden and PREA Coordinator. Allegations involving the imminent threat of sexual violence are immediately called into the facility for prompt response. The calls can be made anonymously, without the use of an inmate's PIN. This auditor tested the system to confirm this information. None of the inmates interviewed had ever reported sexual abuse sexual assault or sexual harassment while in the Chester County Prison. Inmates receive a handout at admission regarding how to report abuse and there are posters throughout the facility and on all housing units with the information. Inmates also receive the inmate handbook upon admission. It contains information on PREA and how to report violations. All staff are mandated reporters of abuse per Chester County Prison Policy and Procedure, "Prison Rape Elimination Act of 2003", page 1, and the laws of the Commonwealth of Pennsylvania. All staff interviewed were aware of their obligations as mandated reporters. The facility does not house inmates detained solely for civil immigration purposes.

Standard 115.52 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The Chester County Prison inmate grievance process is not intended as a means to report allegations of sexual abuse, assault or harassment. Any grievance received that alleged a PREA violation would automatically trigger the facility's PREA incident response plan. It would not be processed as a grievance; it would be treated as a written report of sexual abuse or sexual harassment. Therefore, under section (a) of this standard the agency is deemed exempt.

Standard 115.53 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

A Memorandum of Understanding with the Victims Services Center of Chester County exists for the provision of these services. Chester County Prison Policy and Procedure, "Prison Rape Elimination Act of 2003" addresses access to these services. Interviews with medical and mental health staff confirmed that inmates would be advised about confidentiality prior to accessing the services. Efforts to contact the Victims Services Center of Chester County to determine if they provided services any to inmates during this audit period were unsuccessful. Information is provided to all inmates during the inmate education program. All alleged victims of sexual abuse/assault are provided the telephone number and mailing address. This was confirmed during inmate interviews. Inmates who report prior abuse during intake are advised of the availability services and information on how to request services. The facility does not house inmates detained solely for civil immigration purposes.

Standard 115.54 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Chester County Prison’s public website lists the hotline number to call if sexual abuse or harassment is suspected. All inmates interviewed acknowledged that they knew they could report abuse via a third party. All inmates interviewed acknowledged ready access to contact with their families (visiting and telephone calls) and the ability to contact their lawyer if they so desired. All staff interviewed acknowledged that they would accept a third party report of abuse and respond in the same manner as if they had witnessed the abuse themselves. The Hotline number is also posted in the visitors waiting area and visiting rooms.

Standard 115.61 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Chester County Prison Policy and Procedure, "Prison Rape Elimination Act of 2003" addresses the requirements of this standard. All staff, contractors, and volunteers are mandated by policy to report any knowledge of sexual abuse or harassment. The policy further prohibits staff from revealing information regarding a sexual abuse report except on a need to know basis. All staff, contractors, and volunteers receive training as to how to fulfill their obligations as mandated reporters (what to report and how to report it). All staff and contractors interviewed were aware of the obligations as mandated reporters. Of the nine allegations of sexual harassment reported by the facility for this audit period all were reported to the facility's designated investigators and investigations were completed. The facility provided documentation of responses to inmates calls to PREA hot-line.

Standard 115.62 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Chester County Prison Policy and Procedure, "Prison Rape Elimination Act of 2003", page 8 requires an immediate response when an inmate is deemed to be in imminent danger of sexual abuse or assault. The facility states there was one reported instance of an inmate being determined to be in substantial risk of imminent sexual abuse. Documentation of the timely response was provided to this auditor. None of the inmates interviewed reported ever being at imminent risk of sexual violence. All staff interviewed were able to articulate means that they would use to protect inmates should this occur. These included immediately calling for a supervisor to respond to the location; keeping the inmate under arms-length supervision until the supervisor arrives; and, if necessary based on the imminent nature of the threat, securing the inmate alone in a cell.

Standard 115.63 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Chester County Prison Policy and Procedure, “Prison Rape Elimination Act of 2003” page 9 complies with this standard. Chester County Prison reports that it received one report of inmate being sexually abused at another confinement facility during this audit period. The lead detective from the Chester County DA’s office confirmed that this allegation was reported to detectives in Allegheny County. Chester County Prison did not report receiving any allegations of sexual abuse from another facility.

Standard 115.64 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

All staff receive training regarding first responder duties. Chester County Prison Policy and Procedure, “Prison Rape Elimination Act of 2003” pages 8-9 complies with this standard. There were no reported instances of alleged sexual abuse or sexual assault during this audit period, and therefore no instances involving staff separating victims from abusers or collection of physical evidence. All staff interviewed (corrections officers, supervisors, contractors and medical/mental health) were able to articulate their first responder duties.

Standard 115.65 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

A copy of the facility's coordinated response plan was provided to this auditor (Chester County Prison Policy and Procedure, "Prison Rape Elimination Act of 2003" pages 8-11). The plan provides clear and concise direction for response to any alleged PREA violation. There were no reported incidents of sexual abuse/assault and therefore no documentation of the plans use was reviewed by this auditor. All staff interviewed were aware of the facility's coordinated response plan and where to locate the document.

Standard 115.66 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Employees of the Chester County Prison are not represented by a union and therefore there is no collective bargaining agreement that might violate this standard. Under Chester County Prison Policy and Procedure, "Prison Rape Elimination Act of 2003" page 2, section G, sexual misconduct is subject to disciplinary action up to and including termination. Any sexual act with an inmate is a felony under Pennsylvania criminal code (3124.2) The facility reports that no staff were disciplined for sexual abuse or sexual harassment during this audit period.

Standard 115.67 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Chester County Prison Policy and Procedure, "Prison Rape Elimination Act of 2003" page 7 names the PREA Coordinator as the person responsible for monitoring for retaliation against staff and the housing unit supervisors as the persons responsible for monitoring inmates. Monitoring for retaliation is documented in the monthly reports completed by the PREA Compliance Manager. The facility reports that there were no reports or complaints of retaliation during this audit period. Per interviews with the Warden and the facility’s PREA Compliance Manager, retaliation should be reported by corrections officers and inmates to any available supervisor and/or the PREA Coordinator. Appropriate measures would be taken to stop retaliation.

Standard 115.68 Post-allegation protective custody

- 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Chester County Prison does not use involuntary protective custody in excess of 24 hours. None of the inmates or staff interviewed were aware of an inmate being placed in post-allegation protective custody.

Standard 115.71 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Chester County Prison does not conduct criminal investigations of sexual abuse and/or sexual assault. Those are conducted by detectives from the Chester County District Attorney’s Office. Chester County Prison Policy and Procedure, “Prison Rape Elimination Act of 2003” page 10 complies with this standard relative to administrative investigations. Chester County Prison investigators completed specialized PREA investigations training and follow the protocols there in when conducting initial investigations related to allegations of sexual abuse and sexual harassment. Documentation of this training was provided to this auditor. A review of prior sexual harassment investigation reports confirmed the investigators’ understanding of this policy and their training. There were no criminal investigations of PREA violations conducted during this audit period. This was confirmed by the primary detective from the DA’s office.

Standard 115.72 Evidentiary standard 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Per Chester County Prison Policy and Procedure, “Prison Rape Elimination Act of 2003” page 10, a preponderance of evidence is the standard. A review of administrative investigation reports for alleged sexual harassment confirm the evidentiary standard is being followed.

Standard 115.73 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Chester County Prison Policy and Procedure, "Prison Rape Elimination Act of 2003" page 11 meets the requirements of this standard. There were no reported incidents of sexual abuse during this audit period. However, 9 inmates received notification of the outcome investigations regarding sexual harassment. Documentation of reports to inmates was provided to this auditor. As the standard only requires reporting to inmates the results of investigations into allegations of sexual abuse, the facility's practice of reporting to inmates regarding sexual harassment exceeds this standard.

Standard 115.76 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Chester County Prison Policy and Procedure, "Prison Rape Elimination Act of 2003" page 6 addresses the requirements of this standard. There was one allegation of sexual harassment by a staff member during this audit period. The case was deemed unfounded after an investigation. There were no reported employee terminations or disciplinary action taken against a staff during this audit period for staff misconduct.

The District Attorney's Office detectives did not conduct any PREA investigations at the facility.

Standard 115.77 Corrective action for contractors and volunteers

- 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Chester County Prison Policy and Procedure, “Prison Rape Elimination Act of 2003”, page 6 addresses the requirements of this standard. The facility reported that there were no instances of sexual abuse, assault or harassment by contractors or volunteers occurring during this audit period, and therefore there was no documentation to review for compliance.

Standard 115.78 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Chester County Prison Policy and Procedure, “Prison Rape Elimination Act of 2003” page 7 and the Chester County Prison Inmate Handbook, disciplinary procedure section address all required elements of this standard. The facility reports zero instances of inmate-on-inmate sexual abuse during this audit period. The facility reported zero instances of disciplinary action being taken against inmates after administrative investigations were completed. The facility rules prohibit all sexual activity between inmates.

Standard 115.81 Medical and mental health screenings; 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Chester County Prison Policy and Procedure, “Prison Rape Elimination Act of 2003” pages 8 addresses the requirements of this standard related to access to medical and mental health care.. Inmates admitted to Chester County Prison are seen by medical staff on the date of admission. Medical staff performing the inmate’s intake utilize a standardized, computer-based screening tool to determine if an inmate has any immediate and/or emergency medical or mental health needs. This information is recorded in the inmate management system and notifications are sent to the appropriate parties for follow up. This instrument includes asking the inmate about prior sexual abuse. This practice was observed on two separate occasions during the on-site audit. All inmates interviewed confirmed that they were seen by medical staff shortly after arrival at the facility and that they were asked about prior sexual abuse. Interview with medical staff confirmed that screening includes history of sexual abuse. Per medical staff interviewed, inmates have access to all the same medical services available in the community. When a disclosure of prior abuse occurs, and services are offered by Medical and Mental Health staff, this is documented in the inmate’s medical record.

Standard 115.82 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Chester County Prison’s coordinated response plan addresses the requirements of this standard. Chester County Prison Policy and Procedure, “Prison Rape Elimination Act of 2003”, page 9 requires that the inmate’s medical and mental health needs are met. The policy further states on the same page that services will be provided free of charge to the inmate. The Chester County Prison Inmate Handbook clearly states that services will be provided to the inmate free of charge. Attempts to contact the Victims Services Center of Chester County to confirm whether or not they have provided or attempted to provide services to inmates during this audit period were unsuccessful.

Standard 115.83 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The MOU with the Victim Services Center of Chester County and Chester County Prison Policy and Procedure, “Prison Rape Elimination Act of 2003”, page 10 address the requirements of this standard for victims. The policy clearly states that services will be provided to the inmate free of charge. As previously noted disclosures at the time of admission are recorded in the inmate management system. Notifications are then made to the appropriate parties for necessary follow-up evaluations and assessments. Follow up mental health evaluations occur within 24 hours. Interviews with the Medical Administrator and Mental Health Assessor confirmed this practice. All ongoing medical care beyond the scope of facility medical staff would be provided by community providers. The inmate would have the option of facility clinical staff or community providers for ongoing mental health services. Due to the short-term nature of the jail treatment services for sexual offenders is inappropriate. The facility reported no instances of sexual abuse during this audit period and reported no instances of pregnancy or vaginal penetration which would necessitate pregnancy testing.

Standard 115.86 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Chester County Prison Policy and Procedure, “Prison Rape Elimination Act of 2003”, pages 11 requires that sexual abuse incident reviews occur within 30 days of the conclusion of the investigation. Reviews address policy, procedures, staffing and physical plant considerations relevant to the incident. The incident review team includes warden, medical, mental health, PREA Coordinator, line staff and training. There were no reported instances of sexual abuse that occurred during this audit period, therefore there was no documentation to be reviewed by this auditor.

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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Chester County Prison also maintains electronic records for inmates and collects data on all allegations of sexual abuse using a standardized format. The form contains standardized definitions which are taken word for word from the PREA standards. The PREA Coordinator submits monthly reports to the warden regarding all PREA matters (training, incidents, investigations, inmate education, etc.). Combined these systems and practices allow Chester County Prison to access data sufficient to complete the annual survey of sexual violence. The facility's most recent survey of sexual violence is posted on the agency website.

Standard 115.88 Data review for corrective action

- 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The agency's public website was reviewed by this auditor. The most recent, available annual PREA report is available via the website. The annual report is a combination of the survey of sexual violence and a narrative discussing statistical information related to PREA incidents, including any corrective actions taken. The annual report addresses all elements of this standard. Chester County Prison Policy and Procedure, "Prison Rape Elimination Act of 2003", page 12 addresses the retention requirements of this standard.

Standard 115.89 Data storage, publication, and destruction

- 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The Chester County Prison maintains inmate medical records indefinitely. A review of the data available on the inmate management system shows records go back to the year the system was put in place. A review of the data available on the Chester County Prison website supports full compliance for this standard. There is no individual identifying information contained in the aggregate data or the reports related to the data posted.

AUDITOR CERTIFICATION

This auditor certifies that no conflict of interest exists with respect to his ability to conduct an audit of the Chester County Prison.

Kurt Pfisterer/s/ _____
Kurt Pfisterer, Dual Certified PREA Auditor

December 24, 2015
Date