

Prison Rape Elimination Act (PREA) Audit Report Lockups

Interim Final

Date of Report September 26, 2018

Auditor Information

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Company Name: Kurt Pfisterer, LLC	
Mailing Address: 30 Lori Jean Place	City, State, Zip: Troy, NY 12182
Telephone: 518 860 5764	Date of Lockup Visit: June 12 and September 1, 2018

Agency Information

Name of Agency:		Governing Authority or Parent Agency (If Applicable):	
Rhode Island State Police		Rhode Island	
Physical Address: 311 Danielson Pike		City, State, Zip: North Scituate, RI 02857	
Mailing Address: 311 Danielson Pike		City, State, Zip: North Scituate, RI 02857	
Telephone: 404 444 1010		Is Agency accredited by any organization? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
The Agency Is:		<input type="checkbox"/> Private for Profit	<input type="checkbox"/> Private not for Profit
<input type="checkbox"/> Military	<input type="checkbox"/> County	<input checked="" type="checkbox"/> State	<input type="checkbox"/> Federal
Agency mission: http://risp.ri.gov			
Agency Website with PREA Information: http://risp.ri.gov			

Agency Chief Executive Officer

Name: Ann C. Assumpico	Title: Colonel
Email: ann.assumpico@risp.gov	Telephone: 404 444 1001

Agency-Wide PREA Coordinator

Name: Kenneth Buonaiuto	Title: Captain
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Email: kenneth.buonaiuto@risp.gov	Telephone: 404 444 1010
PREA Coordinator Reports to: Colonel Ann C. Assumpico	Number of Compliance Managers who report to the PREA Coordinator 4

Lockup Information

Name of Lockup:	Rhode Island State Police Wickford Barracks		
Physical Address:	7875 Post Rd. North Kingstown, RI 02852		
Mailing Address (if different than above):	Same		
Telephone Number:	404 444 1064		
The Lockup Is:	<input type="checkbox"/> Military	<input type="checkbox"/> Private for Profit	<input type="checkbox"/> Private not for Profit
<input type="checkbox"/> Municipal	<input type="checkbox"/> County	<input checked="" type="checkbox"/> State	<input type="checkbox"/> Federal
Lockup Type:	<input checked="" type="checkbox"/> Police	<input type="checkbox"/> Sheriff	<input type="checkbox"/> Court Holding
			<input type="checkbox"/> Other
Lockup Mission:	http://risp.ri.gov		
Lockup Website with PREA Information:	http://risp.ri.gov		

Have there been any internal or external audits of and/or accreditations by any other organization? Yes No

Director

Name: Eric Jones	Title: Lieutenant
Email: Eric.Jones@risp.gov	Telephone: 401 444 1064

Lockup PREA Compliance Manager

Name: Eric Jones	Title: Lieutenant
Email: Eric.Jones@risp.gov	Telephone: 401 444 1064

Lockup Health Service Administrator

Name: Not Applicable	Title: Not Applicable
Email: Not Applicable	Telephone: Not Applicable

Lockup Characteristics

Designated Lockup Capacity: 9	Current Population of Lockup: Zero
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Number of detainees admitted to lockup during the past 12 months		467
Number of detainees admitted to lockup during the past 12 months who were transferred from a different community confinement lockup:		Zero
Number of detainees admitted to lockup during the past 12 months whose length of stay in the lockup was for 30 days or more:		Zero
Number of detainees admitted to lockup during the past 12 months whose length of stay in the lockup was for 72 hours or more:		Zero
Number of detainees on date of audit who were admitted to lockup prior to August 20, 2012:		Zero
Age Range of Population:	<input checked="" type="checkbox"/> Adults 18 and over	<input type="checkbox"/> Juveniles <input type="checkbox"/> Youthful detainees Click or tap here to enter text.
Are youthful detainees housed separately from the adult population		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Number of juveniles/youthful detainees held in the lockup during the past 12 months:		Zero
Are detainees housed overnight?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Average length of stay or time under supervision:		6 Hours
Lockup Security Level:		Variable
Detainee Custody Levels:		Variable
Number of staff currently employed by the lockup who may have contact with detainees:		28
Number of staff hired by the lockup during the past 12 months who may have contact with detainees:		Zero
Number of contracts in the past 12 months for services with contractors who may have contact with detainees:		Zero
Physical Plant		
Number of Buildings: One		Number of Single Cell Holding Areas: 0
Number of Multiple Cell Holding Areas:		2
Description of any video or electronic monitoring technology (including any relevant information about where cameras are placed, where the control room, is retention of video, etc.):		
The facility has a video surveillance system that provides 99% coverage for all areas where prisons are allowed to be. There is a camera view of all doors inside the holding area as well as all entry and exit doors. The only place there is not a camera view is the toilets in each of the holding cells.		
Medical		
Type of Medical Lockup:		Not Applicable
Forensic sexual assault medical exams are conducted at:		Rhode Island Hospital
Other		
Number of contractors and inmates currently working in the lockup:		zero
Number of volunteers, who may have contact with detainees, authorized to enter the lockup:		zero
Number of volunteers and individual contractors currently authorized to enter the lockup:		zero

Audit Findings

Audit Narrative

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

The Rhode Island State Police Lockups, consisting of the Scituate, Lincoln Woods, Hope Valley and Wickford Barracks, are short-term holding facilities for adult male and female detainees awaiting arraignment or appearance before a Bail Commissioner. The on-site portion of the PREA Audit took place June 12, 2018 and September 1, 2018 and covered the audit period of September 1, 2017 to August 30, 2018. On the morning of June 12, 2018 this auditor entered the headquarters building in North Scituate for purposes of conducting an on sight tour of the agency and interviewing available detainees and staff. The agency provided a list of all staff with access to the lock-ups by shift and employee job categories. Prior to arrival this auditor reviewed pertinent agency policies, procedures, and related documentation used to demonstrate compliance with the PREA Standards for lock-ups. The pre-audit review of documents contained in the Pre-Audit Questionnaire submitted by the agency prompted very few questions. There were no detainees at any of the lock-ups on the date of the audit. Detainees are only housed at the lock-ups until the courts open for business in the morning or the detainee appears before a Bail Commissioner. Detainees are required to sign their initial screen for risk and vulnerability assessments upon completion. Documentation of these signed and witnessed legal documents were reviewed at each of lock-ups.

A tour of the Wickford Barracks followed (an additional on-site visit was made 09/01/18). During the tour, additional questions were answered by upper-level management staff. Staff interviews were conducted during the course of the tour of the lock-up location. There are no medical, mental health or SANE/SAFE staff employed at the lock-ups. Rhode Island law requires that suicidal, injured and mental ill persons are medically cleared before they can be processed through the criminal justice system. SANE/SAFE services are available at the Rhode Island Hospital in partnership with Day One. Administrative and criminal investigations of sexual abuse, sexual assault and sexual harassment are conducted by trained criminal investigators from the Rhode Island State Police Major Crimes Unit. The agency does not utilize volunteers or contractors in any capacity in the lock-ups. The agency Deputy Superintendent and the Captain in charge of the Professional Standards unit were interviewed by this auditor. The agency Superintendent and Chief Legal Counsel were previously interviewed.

A complete tour of the lock-up took approximately 30 minutes. All areas were extremely well maintained. Sight lines are good throughout the lock-up areas (there are no unmitigated blind spots).

Due to the nature of the program (short-term overnight holds) and the extremely unpredictable nature of admissions, no detainees were available for interview (this was expected). The PREA screening for risk is conducted by trained officers on the date of admission, and documented. Detainees acknowledge, via signature, being screened upon admission to the lock-up and that gender identity questions were asked prior to the detainee being placed in holding. Sample arrest records from over the weekend were provided to this auditor. Signed acknowledgements were present in records observed. Detainees also receive information on multiple means of reporting incidents. Signs with information on reporting incidents and detainees' rights to be free from sexual abuse, sexual harassment and sexual assault are posted in all cells and holding areas.

Administrative investigations regarding allegations of sexual harassment are conducted by trained Rhode Island State Police investigators. Criminal investigations of sexual abuse and assault are conducted by the Major Crimes Unit of the Rhode Island State Police. Interview with the Chief Legal Counsel confirmed that there were no incidents of sexual abuse, assault or harassment during this audit period. Forensic examinations and evidence collection are performed at Rhode Island Hospital. A review of the Rhode Island Hospital website confirmed that forensic examinations and victims' services are available.

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

- Deputy Superintendent
- RISP PREA Coordinator - Captain
- Captain
- Lieutenant (3) – PREA Compliance Managers
- Sargent
- Corporal (4)
- Trooper (4)
- Tele-communicator

Random staff interviewed represented all staff on duty at the lock-ups during the tour of the physical plants. All employees that were interviewed presented as very knowledgeable about their jobs and highly dedicated to keeping detainees safe. The agency's commitment to PREA was also very evident during interviews. Staff members were not only aware of their agency's policies and procedures, but were able to discuss PREA and how it related to the overall mission of the agency.

Strip searches are only conducted based on probable cause. Body cavity searches are not conducted at the lock-ups. Cross gender strip searches are prohibited by agency policy.

The agency uses a Computer Assisted Dispatch (CAD) system which tracks the officer's activities from the time the time a stop is going to made until its conclusion. Officers must notify a supervisor via the CAD system prior to taking anyone into custody. Vehicle mileage is tracked and documented for all transports involving juveniles and any time an officer is transporting a detainee of the opposite gender.

The quality and organization of the documentation provided to this auditor was outstanding. The referenced documents in the questionnaire were provided electronically.

Lockup Characteristics

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

The Rhode Island State Police Lockups consist of the Scituate, Lincoln Woods, Hope Valley and Wickford Barracks. They are short-term holding facilities for adult male and female detainees awaiting arraignment or appearance before a Bail Commissioner. The average length of stay for detainees is six hours. The Rhode Island State Police is accredited by the Commission on Accreditation for Law Enforcement Agencies (CALEA).

The Wickford Barracks is an older brick and mortar structure built in the early 1930's. It has audio and video surveillance covering 99 % of the areas where detainees are permitted. There is an open holding area with bench seating and two double occupancy holding cells with toilets. The holding cells have privacy panels which prevent viewing of the toilets by the cameras covering the cells. The open holding areas and the cells are completely separated and allow for easy sight and sound separation if needed.

There are no medical or mental health services at the lock-ups. Detainees that are in need of medical or mental health services are taken to the hospital for services and clearance before being brought to the barracks for processing. If, during the arrest processing a detainee presented as in need of such services they would be brought to the hospital.

Due to the extremely short-term nature of the holding facilities there are no programs, recreation or food services offered or required by general accepted professional standards of care

All detainees are screened upon arrival at the barracks by the arresting officer. This screening form is signed by the detainee and the officer. This form is retained as a part of permanent arrest record. Detainees also receive information about the Prison Rape Elimination Act (PREA) and the agency's zero tolerance policy towards sexual abuse, assault and harassment. Signs explaining the agency's zero tolerance policy and information on how to report incidents are posted in the holding areas and within easy sight of the holding cells.

Rhode Island State Police policy requires that two officers are present whenever a detainee is in the lock-up (the arresting officer and the officer manning the barracks).

Summary of Audit Findings

*The summary should include the number of standards exceeded, number of standards met, and number of standards not met, **along with a list of each of the standards in each category**. If relevant, provide a summarized description of the corrective action plan, including deficiencies observed, recommendations made, actions taken by the agency, relevant timelines, and methods used by the auditor to reassess compliance.*

Auditor Note: No standard should be found to be “Not Applicable” or “NA”. A compliance determination must be made for each standard.

Number of Standards Exceeded: Zero

Not Applicable

Number of Standards Met: 35

ALL

Number of Standards Not Met: Zero

Not Applicable

Summary of Corrective Action (if any)

Not Applicable

PREVENTION PLANNING

Standard 115.111: Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

All Yes/No Questions Must Be Answered by The Auditor to Complete the Report

115.111 (a)

- Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment? Yes No
- Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment? Yes No

115.111 (b)

- Has the agency employed or designated an agency-wide PREA Coordinator? Yes No
- Is the PREA Coordinator position in the upper-level of the agency hierarchy? Yes No

- Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its lockups?
 Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 lockup does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the lockup.

The Rhode Island State Police General Order 52H, “Prison Rape Elimination Act”, page 1, clearly articulates the agency’s zero tolerance policy. The agency organization chart clearly depicts the roles of State-wide PREA Coordinator and Facility PREA Compliance Manager for each of the barracks. Interviews with the PREA Coordinator and Chief Legal Counsel proved their knowledge and understanding of the PREA standards and their commitment to the implementation of the PREA standards. Notice of the PREA compliance audit was posted in all holding areas and other prominent locations throughout the facilities.

Standard 115.112: Contracting with other entities for the confinement of detainees

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.112 (a)

- If this agency is law enforcement and it contracts for the confinement of its lockup detainees in lockups operated by private agencies or other entities, including other government agencies, has the agency included the entity’s obligation to adopt and comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the law enforcement agency does not contract with private agencies or other entities for the confinement of detainees.) Yes No NA

115.112 (b)

- Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards?

(N/A if the agency does not contract with private agencies or other entities for the confinement of detainees OR the response to 115.112(a)-1 is "NO".) Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 lockup does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the lockup.

The Rhode Island State Police do not contract with any other entity for the housing of detainees.

Standard 115.113: Supervision and monitoring

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.113 (a)

- Does the agency ensure that it has developed for each lockup a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect detainees against sexual abuse? Yes No
- Does the agency ensure that it has documented for each lockup a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect detainees against sexual abuse? Yes No
- Does the agency ensure that it takes into consideration the 4 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The physical layout of each lockup? Yes No
- Does the agency ensure that it takes into consideration the 4 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The composition of the detainee population? Yes No

- Does the agency ensure that it takes into consideration the 4 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The prevalence of substantiated and unsubstantiated incidents of sexual abuse? Yes No
- Does the agency ensure that it takes into consideration the 4 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any other relevant factors? Yes No

115.113 (b)

- In circumstances where the staffing plan is not complied with, does the lockup document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)
 Yes No NA

115.113 (c)

- In the past 12 months, has the lockup assessed, determined, and documented whether adjustments are needed to the staffing plan established pursuant to paragraph (a) of this section? Yes No
- In the past 12 months, has the lockup assessed, determined, and documented whether adjustments are needed to prevailing staffing patterns? Yes No
- In the past 12 months, has the lockup assessed, determined, and documented whether adjustments are needed to the lockup's deployment of video monitoring systems and other monitoring technologies? Yes No
- In the past 12 months, has the lockup assessed, determined, and documented whether adjustments are needed to the resources the lockup has available to commit to ensure adequate staffing levels? Yes No

115.113 (d)

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

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)

- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 lockup does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the lockup.

The Rhode Island State Police General Order 52H, "Prison Rape Elimination Act", pages 4, 6 and 8 address the requirements of this standard. All barracks holding areas have complete audio and video surveillance. The barracks are manned 24 hours a day. The arresting officer is required by policy to remain with the detainee. This in effect requires that there are always two officers present when a detainee is the holding area and/or holding cells. The policy requires officers to provide heightened protection to vulnerable detainees. The physical plant allows for easy sight and sound separation of detainees and the audio and video surveillance system provides for constant sight and sound supervision. The agency wide PREA Coordinator prepares an annual report for the Superintendent which meets all the requirements of this standard. Page three of the policy requires detailed documentation anytime exigent circumstances cause the staffing plan to be deviated from.

Standard 115.114: Juveniles and youthful detainees

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.114 (a)

- Are juveniles and youthful detainees held separately from adult detainees? (N/A if the lockup does not hold juveniles or youthful detainees (detainees <18 years old).) Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 lockup does

not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the lockup.

The age of criminal responsibility in Rhode Island is 18. Juveniles and youthful detainees are not routinely held at the barracks lock-ups. In the event that a juvenile or youthful detainee must be held page 19 of General Order 52C, "Holding Cell Facility Operations" requires complete sight and sound separation from adult prisoners. The physical plant designs of the lock-ups allows for this to be accomplished easily. The agency reports that it did not house any detainees less than 18 years of age during this audit period.

Standard 115.115: Limits to cross-gender viewing and searches

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.115 (a)

- Does the lockup always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?
 Yes No

115.115 (b)

- Does the lockup document all cross-gender strip searches and cross-gender visual body cavity searches? Yes No

115.115 (c)

- Does the lockup implement policies and procedures that enable detainees to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks? Yes No
- Does the lockup require staff of the opposite gender to announce their presence when entering an area where detainees are likely to be showering, performing bodily functions, or changing clothing? Yes No

115.115 (d)

- Does the lockup always refrain from searching or physically examining transgender or intersex detainees for the sole purpose of determining the detainee's genital status? Yes No
- If a detainee's genital status is unknown, does the lockup determine genital status during conversations with the detainee, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?
 Yes No

115.115 (e)

- Does the agency train law enforcement staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs? Yes No
- Does the agency train law enforcement staff in how to conduct searches of transgender and intersex detainees in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 lockup does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the lockup.

General Order 52C, "Holding Cell Facility Operations", pages 3 and 4 prohibits cross-gender searches of any kind and describe the steps to be taken in the event there is no officer of the same gender present at the particular lock-up. Transgender and intersex detainees are advised prior to any search of the right to specify a preference of the gender of the officer that will conduct the search. Due to the extremely short-term nature of the lock-ups detainees do not shower or change clothing. In the event changing clothing is necessary there are private areas where this can be done. All toilet facilities have privacy screens to prevent any type of video viewing of detainees while using the facilities. Page 8 of the previously referenced policy requires officers of the opposite gender to announce their presence prior to entering the holding cell area. Per agency policy strip searches are only performed based on probable cause. Strip searching a detainee to determine their genital status is prohibited.

Standard 115.116: Detainees with disabilities and detainees who are limited English proficient

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.116 (a)

- Does the agency take appropriate steps to ensure that detainees with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect,

and respond to sexual abuse and sexual harassment, including: Detainees who are deaf or hard of hearing? Yes No

- Does the agency take appropriate steps to ensure that detainees with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Detainees who are blind or have low vision? Yes No
- Does the agency take appropriate steps to ensure that detainees with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Detainees who have intellectual disabilities? Yes No
- Does the agency take appropriate steps to ensure that detainees with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Detainees who have psychiatric disabilities? Yes No
- Does the agency take appropriate steps to ensure that detainees with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Detainees who have speech disabilities? Yes No
- Does the agency take appropriate steps to ensure that detainees with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other? (if "other," please explain in overall determination notes.) Yes No
- Do such steps include, when necessary, ensuring effective communication with detainees who are deaf or hard of hearing? Yes No
- Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary? Yes No
- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with detainees with disabilities including detainees who: Have intellectual disabilities? Yes No
- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with detainees with disabilities including detainees who: Have limited reading skills? Yes No
- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with detainees with disabilities including detainees who: Are blind or have low vision? Yes No

115.116 (b)

- Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to detainees who are limited English proficient? Yes No
- Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary? Yes No

115.116 (c)

- Does the agency always refrain from relying on detainee interpreters, detainee readers, or other types of detainee assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the detainee's safety, the performance of first-response duties under §115.164, or the investigation of the detainee's allegations? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 lockup does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the lockup.

General Order 55D, "Managing Communications Barriers", in its entirety, fully addresses the requirements of this standard. The agency has a 24 hour interpretation service, services for the deaf and hearing impaired as well as services for visually impaired persons. Persons with active psychotic disorders and significant cognitive disabilities are not taken to a barracks. They would be taken to the local hospital. In terms of "other", any detainee with a disability beyond the scope of RISP would be taken to the Rhode Island Adult Correctional Institute (ACI) operated by the department of corrections for processing and arraignment.

Standard 115.117: Hiring and promotion decisions

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.117 (a)

- Does the agency prohibit the hiring or promotion of anyone who may have contact with detainees who: Has engaged in sexual abuse in a prison, jail, lockup, community confinement lockup, juvenile lockup, or other institution (as defined in 42 U.S.C. 1997)? Yes No
- Does the agency prohibit the hiring or promotion of anyone who may have contact with detainees who: Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse? Yes No
- Does the agency prohibit the hiring or promotion of anyone who may have contact with detainees who: Has been civilly or administratively adjudicated to have engaged in the activity described in the question immediately above? Yes No
- Does the agency prohibit the enlistment of services of any contractor who may have contact with detainees who: Has engaged in sexual abuse in a prison, jail, lockup, community confinement lockup, juvenile lockup, or other institution (as defined in 42 U.S.C. 1997)? Yes No
- Does the agency prohibit the enlistment of services of any contractor who may have contact with detainees who: Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse? Yes No
- Does the agency prohibit the enlistment of services of any contractor who may have contact with detainees who: Has been civilly or administratively adjudicated to have engaged in the activity described in the question immediately above? Yes No

115.117 (b)

- Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with detainees? Yes No

115.117 (c)

- Before hiring new employees, who may have contact with detainees, does the agency: Perform a criminal background records check? Yes No
- Before hiring new employees, who may have contact with detainees, does the agency: Consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse? Yes No

115.117 (d)

- Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with detainees? Yes No

115.117 (e)

- Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with detainees or have in place a system for otherwise capturing such information for current employees? Yes No

115.117 (f)

- Does the agency ask all applicants and employees who may have contact with detainees directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions? Yes No
- Does the agency ask all applicants and employees who may have contact with detainees directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees? Yes No
- Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct? Yes No

115.117 (g)

- Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination? Yes No

115.117 (h)

- Unless prohibited by law, does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.) Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 lockup does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the lockup.

General Order 52H, "Prison Rape Elimination Act", pages 5 and 6 requires compliance with this standard. The policy requires the facility to refrain from hiring, promoting or enlisting the services of any employee, contractor or volunteer who may have contact with detainees who has engaged or attempted to engage in any of the prohibited acts described in this standard. Written applications and interview protocols require applicants to answer questions specific to this standard. Material omissions regarding misconduct, or the provision of materially false information, are considered to be grounds for termination or withdrawal of an offer of employment, as appropriate.

Staff are also under a continuing affirmative duty to disclose any such misconduct throughout the duration of their employment. Background investigations are conducted to determine whether the candidate for hire is suitable for employment and including a criminal background records check. Detailed records of these background investigations are maintained by the agency, Updated background investigations are conducted every three years for those staff who may have contact with detainees. By policy contractors are prohibited from having any contact with detainees.

Standard 115.118: Upgrades to facilities and technologies

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.118 (a)

- If the agency designed or acquired any new lockup or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect detainees from sexual abuse? (N/A if agency/lockup has not acquired a new lockup or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)
 Yes No NA

115.118 (b)

- If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect detainees from sexual abuse? (N/A if agency/lockup has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)
 Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 lockup does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the lockup.

The agency has not acquired any new facilities during this audit period. The facility has not undergone and renovations since its last audit.

RESPONSIVE PLANNING

Standard 115.121: Evidence protocol and forensic medical examinations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.121 (a)

- If the agency is responsible for investigating allegations of sexual abuse in its lockups, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/lockup is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.) Yes No NA

115.121 (b)

- Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/lockup is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.) Yes No NA
- Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/lockup is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.) Yes No NA

115.121 (c)

- Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside lockup, without financial cost, where evidentiarily or medically appropriate? Yes No
- Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible? Yes No
- If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)? Yes No
- Has the agency documented its efforts to provide SAFEs or SANEs? Yes No

115.121 (d)

- If the detainee is transported for a forensic examination to an outside hospital that offers victim advocacy services, does the agency permit the detainee to use such services to the extent available, consistent with security needs? Yes No

115.121 (e)

- If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating entity follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/lockup is responsible for conducting criminal AND administrative sexual abuse investigations.) Yes No NA

115.121 (f)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 lockup does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the lockup.

The evidence protocol is contained in General Order 77A, "Criminal Investigation" and General Order 77B, "Major Crimes Investigation". The agency follows a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. Forensic examinations of sexual abuse/assault victims would be conducted at Rhode Island Hospital, Women and Infants Hospital and Hasbro Children's Hospital. All three of these facilities have SANE/SAFE services. The facility does not routinely house juveniles and therefore no determination was made regarding its developmental appropriateness for juveniles. All allegations would be investigated by the Rhode Island State Police. General Order 55H, "Prison Rape Elimination Act", page 11 mandates that examinations and other services for victims are provided free of charge. Victim advocacy services are available through Day One (an outside service provider). There were no reported allegations of sexual abuse or assault during this audit period and therefore no evidence of practice to review for compliance.

Standard 115.122: Policies to ensure referrals of allegations for investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.122 (a)

- Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse? Yes No
- Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment? Yes No

115.122 (b)

- If another law enforcement agency is responsible for conducting investigations of allegations of sexual abuse and sexual harassment in its lockups, does the agency have a policy in place to ensure that such allegations are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior? [N/A if agency is responsible for conducting administrative and criminal investigations of sexual abuse or sexual harassment. See 115.121(a).] Yes No NA
- Has the agency published such policy, including a description of responsibilities of both the agency and the investigating entity, on its website or, if it does not have one, made the policy available through other means? [N/A if agency is responsible for conducting administrative and criminal investigations of sexual abuse or sexual harassment. See 115.121(a).] Yes No NA
- Does the agency document all such referrals? [N/A if agency is responsible for conducting administrative and criminal investigations of sexual abuse or sexual harassment. See 115.121(a).] Yes No NA

115.122 (c)

- Auditor is not required to audit this provision.

115.122 (d)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 lockup does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the lockup.

General Order 55H, "Prison Rape Elimination Act", pages 8 – 10 mandate that all allegations of sexual abuse and assault are referred for investigation. The Major Crimes Unit of the Rhode Island State Police is responsible for such investigations. General Order 77A, "Criminal Investigation" and General Order 77B, "Major Crimes Investigation" are the policies that address the conduct of such investigations. There were no reported allegations of sexual abuse, assault or harassment during this audit period and therefore there was no evidence of practice to be reviewed for compliance.

TRAINING AND EDUCATION

Standard 115.131: Employee and volunteer training

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.131 (a)

- Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: Its zero-tolerance policy and detainees' right to be free from sexual abuse and sexual harassment? Yes No
- Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: The dynamics of sexual

abuse and sexual harassment in confinement, including which detainees are most vulnerable in lockup settings? Yes No

- Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: The right of detainees and employees to be free from retaliation for reporting sexual abuse or harassment? Yes No
- Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: How to detect and respond to signs of threatened and actual sexual abuse? Yes No
- Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: How to communicate effectively and professionally with all detainees? Yes No
- Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities? Yes No

115.131 (b)

- Have all current employees and volunteers who may have contact with detainees received such training? Yes No
- Does the agency provide each employee and volunteer with annual refresher information to ensure that they know the agency's current sexual abuse and sexual harassment policies and procedures? Yes No

115.131 (c)

- Does the agency document, through employee signature or electronic verification, that employees understand the training they have received? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

Does Not Meet Standard (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 lockup does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the lockup.

Rhode Island State Police receive a comprehensive on-line training with a testing component that meets all aspects of this standard. This auditor received and reviewed a copy of this training. All staff interviewed acknowledged that they had received training. Documentation was provided to this auditor confirming staff completes a post training test to confirm understanding of the material presented. There are no contract employees and volunteers utilized at the lock-ups. All staff interviewed were aware of their obligations related to the agency’s PREA policy, their obligations as mandated reporters of abuse, 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.	Slide 3, 5, 6
<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.	Throughout the slides
<input checked="" type="checkbox"/> (3) Detainees' right to be free from sexual abuse and sexual harassment.	Slide 8
<input checked="" type="checkbox"/> (4) The right of detainees and employees to be free from retaliation for reporting sexual abuse and sexual harassment.	Slide 33
<input checked="" type="checkbox"/> (5) The dynamics of sexual abuse and sexual harassment in lock-up facilities.	Slides 22, 23, 24 and 25
<input checked="" type="checkbox"/> (6) The common reactions of sexual abuse and sexual harassment juvenile victims.	Slides 26 and 27
<input checked="" type="checkbox"/> (7) How to detect and respond to signs of threatened and actual sexual abuse.	Throughout the slides
<input checked="" type="checkbox"/> (8) How to avoid inappropriate relationships with detainees.	Slide 4
<input checked="" type="checkbox"/> (9) How to communicate effectively and professionally with detainees, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming detainees.	Slides 9, 10, 17, 18
<input checked="" type="checkbox"/> (10) How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.	Slide 28
<input checked="" type="checkbox"/> (11) Relevant laws regarding the applicable age of consent.	Officer basic training

Standard 115.132: Detainee, contractor, and inmate worker notification of the agency's zero-tolerance policy

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.132 (a)

- During the intake process, do employees notify all detainees of the agency’s zero-tolerance policy regarding sexual abuse and sexual harassment? Yes No

115.132 (b)

- Does the agency ensure that, upon entering the lockup, all contractors and any inmates who work in the lockup are informed of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 lockup does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the lockup.

Detainees are notified of the agency's zero tolerance policy immediately upon admission to the lock-up. There are posters stating the agency's zero tolerance policy and how to report allegations throughout the lock-ups. The Rhode Island State Police do not utilize contractors or inmate workers in any of the lock-ups.

Standard 115.134: Specialized training: Investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.134 (a)

- In addition to the general training provided to all employees pursuant to §115.131, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators have received training in conducting such investigations in confinement settings? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.121(a).] Yes No NA

115.134 (b)

- Does this specialized training include: Techniques for interviewing sexual abuse victims? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.121(a).] Yes No NA

- Does this specialized training include: Proper use of Miranda and Garrity warnings? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.121(a).] Yes No NA
- Does this specialized training include: Sexual abuse evidence collection in confinement settings? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.121(a).] Yes No NA
- Does this specialized training include: The criteria and evidence required to substantiate a case for administrative action or prosecution referral? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.121(a).] Yes No NA

115.134 (c)

- Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.121(a).] Yes No NA

115.134 (d)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

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General Order 55H, "Prison Rape Elimination Act", page 7 requires that all officers receive specialized training in conducting investigations related to sexual abuse and sexual assault. However, in the event that an allegation of sexual abuse or assault occurred at one the lock-ups, that allegation would be investigated by the RISP Major Crimes Unit. Documentation of specialized training for an investigator with the Major Crimes Unit was provided to this auditor.

SCREENING FOR RISK OF SEXUAL VICTIMIZATION AND ABUSIVENESS

Standard 115.141: Screening for risk of victimization and abusiveness

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.141 (a)

- If the lockup is not utilized to house detainees overnight, before placing any detainees together in a holding cell do staff consider whether, based on the information before them, a detainee may be at a high risk of being sexually abused? (N/A if the lockup is utilized to house detainees overnight.) Yes No NA
- When appropriate, do staff take necessary steps to mitigate such danger to the detainee? (N/A if the lockup is utilized to house detainees overnight.) Yes No NA

115.141 (b)

- If the lockup is utilized to house detainees overnight, are all detainees screened to assess their risk of being sexually abused by other detainees or sexually abusive toward other detainees? (N/A if lockup is NOT used to house detainees overnight.) Yes No NA

115.141 (c)

- In lockups described in paragraph (b) of this section, do staff always ask the detainee about his or her own perception of vulnerability? (N/A if lockup is NOT used to house detainees overnight.) Yes No NA

115.141 (d)

- Does the screening process in the lockups described in paragraph (b) of this section consider, to the extent that the information is available, the following criteria to screen detainees for risk of sexual victimization: Whether the detainee has a mental, physical, or developmental disability? (N/A if lockup is NOT used to house detainees overnight.) Yes No NA
- Does the screening process in the lockups described in paragraph (b) of this section consider, to the extent that the information is available, the following criteria to screen detainees for risk of sexual victimization: The age of the detainee? (N/A if lockup is NOT used to house detainees overnight.) Yes No NA
- Does the screening process in the lockups described in paragraph (b) of this section consider, to the extent that the information is available, the following criteria to screen detainees for risk of sexual victimization: The physical build and appearance of the detainee? (N/A if lockup is NOT used to house detainees overnight.) Yes No NA

- Does the screening process in the lockups described in paragraph (b) of this section consider, to the extent that the information is available, the following criteria to screen detainees for risk of sexual victimization: Whether the detainee has previously been incarcerated? (N/A if lockup is NOT used to house detainees overnight.) Yes No NA
- Does the screening process in the lockups described in paragraph (b) of this section consider, to the extent that the information is available, the following criteria to screen detainees for risk of sexual victimization: The nature of the detainee's alleged offense and criminal history? (N/A if lockup is NOT used to house detainees overnight.) Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 lockup does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the lockup.

General Order 55H, "Prison Rape Elimination Act", pages 7 and 8 require compliance with this standard. All detainees, regardless of whether or not they will be housed overnight are screened for vulnerability and risk. Documentation of this screening was provided to this auditor at each of the lock-ups. The Prisoner Intake Form becomes a part of the permanent arrest record. Detainees sign this document. Detainees are routinely housed separately. Male and female detainees are always sight and sound separated. The design of the physical plant, staffing and surveillance systems allow for easy sight and sound separation, and monitoring of vulnerable detainees.

REPORTING

Standard 115.151: Detainee reporting

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.151 (a)

- Does the agency provide multiple internal ways for detainees to privately report: Sexual abuse and sexual harassment? Yes No

- Does the agency provide multiple internal ways for detainees to privately report: Retaliation by other detainees or staff for reporting sexual abuse and sexual harassment? Yes No
- Does the agency provide multiple internal ways for detainees to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents? Yes No

115.151 (b)

- Does the agency also provide at least one way for detainees to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency? Yes No
- Is that private entity or office able to receive and immediately forward detainee reports of sexual abuse and sexual harassment to agency officials? Yes No
- Does that private entity or office allow the detainee to remain anonymous upon request? Yes No

115.151 (c)

- Do staff members accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties? Yes No
- Do staff members promptly document any verbal reports of sexual abuse and sexual harassment? Yes No

115.151 (d)

- Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of detainees? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

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Posters throughout the lock-ups list multiple means of reporting abuse and include the 800 number for the State Attorney General's Office crime victim's hotline. General Order 55H, "Prison Rape Elimination Act", pages 8 – 10 discuss in detail reporting methods and procedures, and mandates that officers accept reports verbally, in writing and from third party reporters. All staff interviewed were aware of their obligations regarding reporting. As there were no reported allegations during this audit period there was no documentation of practice to review for compliance.

Standard 115.154: Third-party reporting

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.154 (a)

- Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment in its lockups? Yes No
- Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of a detainee? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 lockup does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the lockup.

General Order 55H, "Prison Rape Elimination Act", page 10, section E addresses third part reporting and complies with the provisions of this standard. Information on third party reporting is available on the Rhode Island State Police website under the Professional Standards Unit tab. There were no reported instances of third party reporting and therefore no documentation of practice to review for compliance.

OFFICIAL RESPONSE FOLLOWING A DETAINEE REPORT

Standard 115.161: Staff and agency reporting duties

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.161 (a)

- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in an agency lockup? Yes No
- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against detainees or staff who reported such an incident? Yes No
- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation? Yes No

115.161 (b)

- Apart from reporting to designated supervisors or officials, do staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment and investigation decisions? Yes No

115.161 (c)

- If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws? Yes No

115.161 (d)

- Does the agency report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the agency's designated investigators? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 lockup does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the lockup.

General Order 55H, "Prison Rape Elimination Act", pages 8 – 10 addresses in detail reporting methods and procedures, and mandates that officers accept reports verbally, in writing and from third party reporters. All staff interviewed were aware of their obligations regarding reporting. The agency does not house detainees as describe in Rhode Island's vulnerable persons statutes. The facility does not routinely house juveniles, however all staff are mandated reporters under Rhode Island law. The agency reports that it received no reports of sexual abuse or assault during this audit period and therefore there was no documentation of practice to review for compliance.

Standard 115.162: Agency protection duties

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.162 (a)

- When the agency learns that a detainee is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the detainee? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 lockup does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the lockup.

General Order 55H, "Prison Rape Elimination Act", page 8 requires officers to take immediate action to protect a detainee from imminent risk of sexual abuse. Sight and sound separation from other detainees is the primary method of immediate action

to protect. The agency reports that it had no instances of a detainee being deemed to be at substantial risk of sexual abuse and therefore there was no documentation of action taken to review.

Standard 115.163: Reporting to other confinement facilities

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.163 (a)

- Upon receiving an allegation that a detainee was sexually abused while confined at another facility, does the head of the lockup that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred? Yes No

115.163 (b)

- Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation? Yes No

115.163 (c)

- Does the agency document that it has provided such notification? Yes No

115.163 (d)

- Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 lockup does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the lockup.

General Order 55H, "Prison Rape Elimination Act", page 9 complies with the requirements of this standard. The agency reported that it had no instances of a detainee reporting being sexually abused while at another facility. The agency reported

that it had not received any reports from other facilities or agencies. Due to a lack of reports there was no documentation of practice to review for compliance.

Standard 115.164: Staff first responder duties

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.164 (a)

- Upon learning of an allegation that a detainee was sexually abused, is the first law enforcement staff member to respond to the report required to: Separate the alleged victim and abuser?
 Yes No
- Upon learning of an allegation that a detainee was sexually abused, is the first law enforcement staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence? Yes No
- Upon learning of an allegation that a detainee was sexually abused, is the first law enforcement staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence? Yes No
- Upon learning of an allegation that a detainee was sexually abused, is the first law enforcement staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence? Yes No

115.164 (b)

- If the first staff responder is not a law enforcement staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify law enforcement staff? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 lockup does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the lockup.

All staff are trained in first responder duties as a routine part of their training as law enforcement officers. They also receive training in conducting investigations, evidence preservation and evidence collection. All staff interviewed acknowledged having received such training. They also receive training correct response procedures as part of their PREA training. Documentation of this training for all staff was provided to this auditor. Civil staff are not permitted in detainee holding areas when detainees are present and would therefore never be in a position to perform first responder duties. The agency reports that it had no instances of sexual abuse or assault during this audit period and therefore there was no documentation of staff performing first responder duties to review.

Standard 115.165: Coordinated response

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.165 (a)

- Has the agency developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to a lockup incident of sexual abuse? Yes No
- If a victim is transferred from the lockup to a jail, prison, or medical facility, does the agency, as permitted by law and unless the victim requests otherwise, inform the receiving facility of the incident and the victim's potential need for medical or social services? Yes No

115.165 (b)

- If a victim is transferred from the lockup to a jail, prison, or medical facility, does the agency, as permitted by law, inform the receiving facility of the incident unless the victim requests otherwise? (N/A if the agency is not permitted by law to inform a receiving facility, where a victim is transferred from the lockup to a jail, prison, or medical facility as a result of an allegation of sexual abuse of the incident and the victim's potential need for medical or social services.) Yes No NA
- If a victim is transferred from the lockup to a jail, prison, or medical facility, does the agency, as permitted by law, inform the receiving facility of the victim's potential need for medical or social services unless the victim requests otherwise? (N/A if the agency is not permitted by law to inform a receiving facility, where a victim is transferred from the lockup to a jail, prison, or medical facility as a result of an allegation of sexual abuse of the incident and the victim's potential need for medical or social services.) Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 lockup does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the lockup.

General Order 77B, "Major Crimes Investigation" is the coordinated response plan for the agency. The agency reported that there were no instances of sexual abuse or assault during this reporting period and therefore there was no document of such a response to review.

Standard 115.166: Preservation of ability to protect detainees from contact with abusers

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.166 (a)

- Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with any detainees pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted? Yes No

115.166 (b)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)

- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 lockup does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the lockup.

The Rhode Island State Troopers union contract is currently under negotiation for renewal. The existing contract, which is still in effect, is in compliance with the provisions of this standard. General Order 52H, "Prison Rape Elimination Act", page 16 states that the agency will not enter into any collective bargaining agreement that would interfere with the ability to protect detainees from contact with abusers.

Standard 115.167: Agency protection against retaliation

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.167 (a)

- Has the agency established a policy to protect all detainees and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other detainees or staff? Yes No
- Has the agency designated which staff members or departments are charged with monitoring retaliation? Yes No

115.167 (b)

- Does the agency employ multiple protection measures, such as housing changes or transfers for detainee victims or abusers, removal of alleged staff or detainee abusers from contact with victims, and emotional support services for detainees or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations? Yes No

115.167 (c)

- Except in instances where the agency determines that a report of sexual abuse is unfounded, does the agency: Monitor the conduct and treatment of detainees or staff who have reported sexual abuse? Yes No

- Except in instances where the agency determines that a report of sexual abuse is unfounded, does the agency: Monitor the conduct and treatment of detainees who were reported to have suffered sexual abuse? Yes No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, does the agency: Act promptly to remedy any such retaliation? Yes No

115.167 (d)

- If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?
 Yes No

115.167 (e)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 lockup does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the lockup.

General Order 52H, "Prison Rape Elimination Act", pages 11 and 12 comply with the requirements of this standard. The lieutenant in charge of each barracks is the person designated to monitor for retaliation against detainees and staff. Due to the extremely short-term nature of the holding process (arrest processing and arraignment, then transfer to ACI) monitoring for retaliation against detainees as described in this standard is not a realistic possibility. The agency reported that there were no allegations of sexual abuse or harassment during the audit period and therefore there was no possibility of retaliation for reporting.

INVESTIGATIONS

Standard 115.171: Criminal and administrative agency investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.171 (a)

- When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? [N/A if the agency/lockup is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.121(a).] Yes No NA
- Does the agency conduct such investigations for all allegations, including third party and anonymous reports? [N/A if the agency/lockup is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.121(a).] Yes No NA

115.171 (b)

- Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.134? Yes No

115.171 (c)

- Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data? Yes No
- Do investigators interview alleged victims, suspected perpetrators, and witnesses? Yes No
- Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator? Yes No

115.171 (d)

- When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution? Yes No

115.171 (e)

- Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as detainee or staff? Yes No
- Does the agency investigate allegations of sexual abuse without requiring a detainee who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding? Yes No

115.171 (f)

- Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse? Yes No
- Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings? Yes No

115.171 (g)

- Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible? Yes No

115.171 (h)

- Are all substantiated allegations of conduct that appears to be criminal referred for prosecution? Yes No

115.171 (i)

- Does the agency retain all written reports referenced in 115.171(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years? Yes No

115.171 (j)

- Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the lockup or agency does not provide a basis for terminating an investigation? Yes No

115.171 (k)

- Auditor is not required to audit this provision.

115.171 (l)

- When an outside entity investigates sexual abuse, does the agency cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? [N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.121(a).] Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 lockup does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the lockup.

General Order 52H, “Prison Rape Elimination Act”, pages 11 and 12 comply with the requirements of this standard. The Rhode Island State Police conduct both administrative and criminal investigations into allegations of sexual abuse, assault and harassment. . General Order 77A, “Criminal Investigation” and General Order 77B, “Major Crimes Investigation” are the policies that address the conduct of such investigations. The agency reported that it received no allegations of sexual abuse, assault or harassment occurring at its lock-ups and therefore there was no documentation of practice related to this standard to review for compliance.

Standard 115.172: Evidentiary standard for administrative investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.172 (a)

- Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 lockup does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the lockup.

General Order 52H, "Prison Rape Elimination Act", page 12 clearly states that evidentiary standard for administrative investigations is a preponderance of the evidence. The agency reported that it had not conducted any administrative investigations related to alleged PREA violations and therefore there was no documentation to review for compliance with this standard.

DISCIPLINE

Standard 115.176: Disciplinary sanctions for staff

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.176 (a)

- Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies? Yes No

115.176 (b)

- Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse? Yes No

115.176 (c)

- Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories? Yes No

115.176 (d)

- Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies unless the activity was clearly not criminal? Yes No
- Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 lockup does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the lockup.

The collective bargaining agreement between the State of Rhode Island and the Rhode Island Trooper's Association clearly allows for disciplinary sanctions up to and including termination. General Order 52H, "Prison Rape Elimination Act", page 12 clearly states that the presumptive disciplinary sanction for sexual abuse is termination. The agency reported that there were no allegations of sexual abuse, assault or harassment made against any officers during this reporting period and therefore there was no documentation of disciplinary actions related to this standard to be reviewed. The Rhode Island State Police is a law enforcement agency and therefore all resignations in lieu of termination are referred to law enforcement. The agency employees no licensed civilians that are permitted to have contact with detainees. The agency posts on its public website statistical data related to citizen complaints and disciplinary sanctions against officers.

Standard 115.177: Corrective action for contractors and volunteers

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.177 (a)

- Is any contractor or volunteer who engages in sexual abuse prohibited from contact with detainees? Yes No
- Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies unless the activity was clearly not criminal? Yes No
- Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies? Yes No

115.177 (b)

- In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the lockup take appropriate remedial measures, and consider whether to prohibit further contact with detainees? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 lockup does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the lockup.

The Rhode Island State Police do not utilize volunteers or contractors within its lock-ups and therefore there is no possible documentation of corrective actions taken.

Standard 115.178: Referrals for prosecution for detainee-on-detainee sexual abuse

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.178 (a)

- When there is probable cause to believe that a detainee sexually abused another detainee in a lockup, does the agency refer the matter to the appropriate prosecuting authority?
 Yes No

115.178 (b)

- If the agency itself is not responsible for investigating allegations of sexual abuse, does the agency inform the investigating entity of this policy? (N/A if the agency/facility is responsible for administrative and criminal investigations. See 115.121(a).) Yes No NA

115.178 (c)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 lockup does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the lockup.

General Order 77A, “Criminal Investigation” and General Order 77B, “Major Crimes Investigation” are the policies that address when and how detainee on detainee sexual abuse is referred for prosecution. The agency reported that there were no instances of detainee on detainee sexual abuse during this audit period and therefore there was documentation of referrals for prosecution to be reviewed.

MEDICAL AND MENTAL CARE

Standard 115.182: Access to emergency medical and mental health services

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.182 (a)

- Do detainee victims of sexual abuse in lockups receive timely, unimpeded access to emergency medical treatment? Yes No

115.182 (b)

- Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 lockup does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the lockup.

General Order 52H, “Prison Rape Elimination Act”, page 12 states:

D. Detainee victims of sexual abuse in lockups shall receive timely, unimpeded access to emergency medical treatment. Treatment services shall be provided to the victims without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

E. All victims of sexual abuse are offered access to forensic medical examinations, without financial cost, where evidentiary or medically appropriate. Such examinations shall be performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible. If SAFEs or SANEs cannot be made available, the examination will be performed by other qualified medical practitioners. The Division shall document its efforts to provide SAFEs or SANEs.

F. If the detainee is transported for a forensic examination to an outside hospital that offers victim advocacy services, the detainee shall be permitted to use such services to the extent available, consistent with security needs.

There were no reported allegations of sexual abuse or assault and therefore no document of the provision of services.



DATA COLLECTION AND REVIEW

Standard 115.186: Sexual abuse incident reviews

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.186 (a)

- Does the lockup conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded? Yes No

115.186 (b)

- Does such review ordinarily occur within 30 days of the conclusion of the investigation? Yes No

115.186 (c)

- Does the review team include upper-level management officials, with input from line supervisors and investigators? Yes No

115.186 (d)

- Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse? Yes No
- Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the lockup? Yes No
- Does the review team: Examine the area in the lockup where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse? Yes No
- Does the review team: Assess the adequacy of staffing levels in that area during different shifts? Yes No
- Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff? Yes No
- Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.186(d)(1) - (d)(5), and any recommendations for improvement and submit such report to the lockup head and agency PREA coordinator? Yes No

115.186 (e)

- Does the lockup implement the recommendations for improvement, or document its reasons for not doing so? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

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not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the lockup.

General Order 52H, "Prison Rape Elimination Act", pages 13 and 14 complies with all aspects of this standard. In addition to sexual abuse incident reviews the agency conducts a variety of other incident reviews and posts this information of its public website. As there were no reported instances of sexual abuse the agency did not conduct any sexual abuse incident reviews during this audit period.

Standard 115.187: Data collection

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.187 (a)

- Does the agency collect accurate, uniform data for every allegation of sexual abuse at lockups under its direct control using a standardized instrument and set of definitions? Yes No

115.187 (b)

- Does the agency aggregate the incident-based sexual abuse data at least annually? Yes No

115.187 (c)

- Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Local Jail Jurisdictions Survey of Sexual Violence conducted by the Department of Justice, or any subsequent form developed by the Department of Justice and designated for lockups? Yes No

115.187 (d)

- Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews? Yes No

115.187 (e)

- Does the agency also obtain incident-based and aggregated data from every private lockup with which it contracts for the confinement of its detainees? (N/A if agency does not contract for the confinement of its detainees.) Yes No NA

115.187 (f)

- Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.) Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 lockup does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the lockup.

The agency collects accurate uniform data on a wide variety of criminal acts, not just sexual abuse. General Order 52H, "Prison Rape Elimination Act", page 14 complies with all aspects of this standard. The agency has not been asked to complete the Survey of Sexual Violence by the Department of Justice, but a review of the agency's most recent annual report, posted on its public website indicates that the agency collects sufficient information to answer all questions on the survey.

Standard 115.188: Data review for corrective action

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.188 (a)

- Does the agency review data collected and aggregated pursuant to § 115.187 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas? Yes No
- Does the agency review data collected and aggregated pursuant to § 115.187 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis? Yes No
- Does the agency review data collected and aggregated pursuant to § 115.187 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each lockup, as well as the agency as a whole? Yes No

115.188 (b)

- Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse Yes No

115.188 (c)

- Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means? Yes No

115.188 (d)

- Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a lockup? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 lockup does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the lockup.

General Order 52H, "Prison Rape Elimination Act", page 14 complies with all aspects of this standard. The Rhode Island State Police compiles an annual report that complies with the requirements of this standard. As the agency has had no reported instances of sexual abuse there is currently no corrective action noted regarding the lock-up units. The report is approved by the Superintendent of the state police and is posted on its public website.

Standard 115.189: Data storage, publication, and destruction

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.189 (a)

- Does the agency ensure that data collected pursuant to § 115.187 are securely retained?
 Yes No

115.189 (b)

- Does the agency make all aggregated sexual abuse data, from lockups under its direct control and private agencies with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means? Yes No

115.189 (c)

- Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available? Yes No

115.189 (d)

- Does the agency maintain sexual abuse data collected pursuant to § 115.187 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 lockup does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the lockup.

General Order 52H, "Prison Rape Elimination Act", page 15 complies with all aspects of this standard. The agency's data is maintained electronically and is appropriately stored and backed up as protection. The most recent annual report is posted on the agency's website.

AUDITING AND CORRECTIVE ACTION

Standard 115.401: Frequency and scope of audits

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.401 (a)

- During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (*Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.*) Yes No

115.401 (b)

- Is this the first year of the current audit cycle? (*Note: a "no" response does not impact overall compliance with this standard.*) Yes No
- If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is **not** the *second* year of the current audit cycle.) Yes No NA
- If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is **not** the *third* year of the current audit cycle.) Yes No NA

115.401 (h)

- Did the auditor have access to, and the ability to observe, all areas of the audited facility? Yes No

115.401 (i)

- Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)? Yes No

115.401 (m)

- Was the auditor permitted to conduct private interviews with inmates, detainees, and detainees? Yes No

115.401 (n)

- Were detainees permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 lockup does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the lockup.

The agency currently operates three lock-ups. This is the second year of the audit cycle. The agency has now had audits for two thirds of its lock-ups. An audit was not conducted in the first year of the audit cycle due to multiple questions regarding the audit process which took a great deal of time to resolve.

Standard 115.403: Audit contents and findings

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.403 (f)

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

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 lockup does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the lockup.

The audit reports from the first three year cycle are posted on the agency website.

AUDITOR CERTIFICATION

I certify that:

- The contents of this report are accurate to the best of my knowledge.
- No conflict of interest exists with respect to my ability to conduct an audit of the agency under review, and
- I have not included in the final report any personally identifiable information (PII) about any detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.

Auditor Instructions:

Type your full name in the text box below for Auditor Signature. This will function as your official electronic signature. Auditors must deliver their final report to the PREA Resource Center as a searchable PDF format to ensure accessibility to people with disabilities. Save this report document into a PDF format prior to submission.¹ Auditors are not permitted to submit audit reports that have been scanned.² See the PREA Auditor Handbook for a full discussion of audit report formatting requirements.

¹ See additional instructions here: <https://support.office.com/en-us/article/Save-or-convert-to-PDF-d85416c5-7d77-4fd6-a216-6f4bf7c7c110>.

² See *PREA Auditor Handbook*, Version 1.0, August 2017; Pages 68-69.

Kurt Pfisterer

September 26, 2018

Auditor Signature

Date