

Disclaimer: This report, as required per 28 CFR §115.403, details the findings of an audit that was conducted by an outside contractor to determine the Federal Bureau of Prisons' (BOP) compliance with the Prison Rape Elimination Act (PREA). As the work product of independent auditors subcontracted by [PREA Auditors of America \(PAOA\)](#), the BOP is **not** responsible for grammatical or typographical errors. Additionally, any questions or comments regarding the discrepancies or inaccuracies found within this report should be directed to PAOA at [\(713\) 818-9098](#), or to the subcontracted independent auditor (name and email address can be found on page one of the report), for explanation and resolution.

Prison Rape Elimination Act (PREA) Audit Report Adult Prisons & Jails

Interim Final

Date of Report: November 6, 2021

Auditor Information

Name: Karen Murray	Email: karen@preaauditing.com
Company Name: PREA Auditors of America	
Mailing Address: P.O. Box 1071	City, State, Zip: Cypress, Texas 77410
Telephone: 713-818-9098	Date of Facility Visit: September 21 – 23, 2021

Agency Information

Name of Agency: Federal Bureau of Prisons	Governing Authority or Parent Agency (If Applicable): U.S. Department of Justice		
Physical Address: 320 First Street NW	City, State, Zip: Washington, D.C. 20534		
Mailing Address: 320 First Street NW	City, State, Zip: Washington, D.C. 20534		
The Agency 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 type="checkbox"/> State	<input checked="" type="checkbox"/> Federal

Agency Website with PREA Information:
http://www.bop.gov/inmates/custody_and_care/sexual_abuse_prevention.jsp

Agency Chief Executive Officer

Name: M.D. Carvajal, Director	
Email: BOP-RSD-PREA Coordinator@BOP.GOV	Telephone: 202-616-2112

Agency-Wide PREA Coordinator

Name: Jill Roth, National PREA Coordinator	
Email: BOP-RSD-PREA Coordinator@BOP.GOV	Telephone: 202-616-2112
PREA Coordinator Reports to: Sonya D. Thompson, Assistant Director, Reentry Services Division	Number of Compliance Managers who report to the PREA Coordinator 0

Facility Information

Name of Facility: Federal Correctional Institution (FCI) Pekin

Physical Address: PO Box 7000

City, State, Zip: Pekin, IL 61555

Mailing Address (if different from above):
Same as above.

City, State, Zip: Same as above.

The Facility Is:

Military

Private for Profit

Private not for Profit

Municipal

County

State

Federal

Facility Type:

Prison

Jail

Facility Website with PREA Information: <https://www.bop.gov/locations/institutions/pek/>

Has the facility been accredited within the past 3 years? Yes No

If the facility has been accredited within the past 3 years, select the accrediting organization(s) – select all that apply (N/A if the facility has not been accredited within the past 3 years):

ACA

NCCHC

CALEA

Other (please name or describe): EMSSC

N/A

If the facility has completed any internal or external audits other than those that resulted in accreditation, please describe:
Program Review, Operational Review, Quarterly Audits

Warden/Jail Administrator/Sheriff/Director

Name: Michael Segal

Email: Msegal@bop.gov

Telephone: 309.346.8588

Facility PREA Compliance Manager

Name: Blake Batson Acting

Email: PEK-PREAComplianceMgr-S@bop.gov

Telephone: 309.346.8588

Facility Health Service Administrator N/A

Name: Lindy Stolarzyk

Email: lbenefiel@bop.gov

Telephone: 309.346.8588

Facility Characteristics

Designated Facility Capacity:	716 (FCI) / 256 (SCP)	
Current Population of Facility:	986/216	
Average daily population for the past 12 months:	1190/210	
Has the facility been over capacity at any point in the past 12 months?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Which population(s) does the facility hold?	<input type="checkbox"/> Females <input type="checkbox"/> Males <input checked="" type="checkbox"/> Both Females and Males	
Age range of population:	22-72 (FCI) / 23-66 (SCP)	
Average length of stay or time under supervision:	144 FCI / 96 (SCP)	
Facility security levels/inmate custody levels:	Medium / Minimum	
Number of inmates admitted to facility during the past 12 months:	654	
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for <i>72 hours or more</i> :	654	
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for <i>30 days or more</i> :	653	
Does the facility hold youthful inmates?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Number of youthful inmates held in the facility during the past 12 months: (N/A if the facility never holds youthful inmates)	<input checked="" type="checkbox"/> N/A	
Does the audited facility hold inmates for one or more other agencies (e.g. a State correctional agency, U.S. Marshals Service, Bureau of Prisons, U.S. Immigration and Customs Enforcement)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<p>Select all other agencies for which the audited facility holds inmates: Select all that apply (N/A if the audited facility does not hold inmates for any other agency or agencies):</p>	<input type="checkbox"/> Federal Bureau of Prisons <input checked="" type="checkbox"/> U.S. Marshals Service <input type="checkbox"/> U.S. Immigration and Customs Enforcement <input type="checkbox"/> Bureau of Indian Affairs <input type="checkbox"/> U.S. Military branch <input type="checkbox"/> State or Territorial correctional agency <input type="checkbox"/> County correctional or detention agency <input type="checkbox"/> Judicial district correctional or detention facility <input type="checkbox"/> City or municipal correctional or detention facility (e.g. police lockup or city jail) <input type="checkbox"/> Private corrections or detention provider <input type="checkbox"/> Other - please name or describe: Click or tap here to enter text. <input type="checkbox"/> N/A	
Number of staff currently employed by the facility who may have contact with inmates:	260	

Number of staff hired by the facility during the past 12 months who may have contact with inmates:	21
Number of contracts in the past 12 months for services with contractors who may have contact with inmates:	4
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	73
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	0
Physical Plant	
<p>Number of buildings:</p> <p>Auditors should count all buildings that are part of the facility, whether inmates are formally allowed to enter them or not. In situations where temporary structures have been erected (e.g., tents) the auditor should use their discretion to determine whether to include the structure in the overall count of buildings. As a general rule, if a temporary structure is regularly or routinely used to hold or house inmates, or if the temporary structure is used to house or support operational functions for more than a short period of time (e.g., an emergency situation), it should be included in the overall count of buildings.</p>	22
<p>Number of inmate housing units:</p> <p>Enter 0 if the facility does not have discrete housing units. DOJ PREA Working Group FAQ on the definition of a housing unit: How is a "housing unit" defined for the purposes of the PREA Standards? The question has been raised in particular as it relates to facilities that have adjacent or interconnected units. The most common concept of a housing unit is architectural. The generally agreed-upon definition is a space that is enclosed by physical barriers accessed through one or more doors of various types, including commercial-grade swing doors, steel sliding doors, interlocking sally port doors, etc. In addition to the primary entrance and exit, additional doors are often included to meet life safety codes. The unit contains sleeping space, sanitary facilities (including toilets, lavatories, and showers), and a dayroom or leisure space in differing configurations. Many facilities are designed with modules or pods clustered around a control room. This multiple-pod design provides the facility with certain staff efficiencies and economies of scale. At the same time, the design affords the flexibility to separately house inmates of differing security levels, or who are grouped by some other operational or service scheme. Generally, the control room is enclosed by security glass, and in some cases, this allows inmates to see into neighboring pods. However, observation from one unit to another is usually limited by angled site lines. In some cases, the facility has prevented this entirely by installing one-way glass. Both the architectural design and functional use of these multiple pods indicate that they are managed as distinct housing units.</p>	11
Number of single cell housing units:	0
Number of multiple occupancy cell housing units:	11
Number of open bay/dorm housing units:	2 SCP
Number of segregation cells (for example, administrative, disciplinary, protective custody, etc.):	65
In housing units, does the facility maintain sight and sound separation between youthful inmates and adult inmates? (N/A if the facility never holds youthful inmates)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Does the facility have a video monitoring system, electronic surveillance system, or other monitoring technology (e.g. cameras, etc.)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Has the facility installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology in the past 12 months?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
--	---

Medical and Mental Health Services and Forensic Medical Exams

Are medical services provided on-site?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
--	---

Are mental health services provided on-site?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
--	---

Where are sexual assault forensic medical exams provided? Select all that apply.	<input type="checkbox"/> On-site <input checked="" type="checkbox"/> Local hospital/clinic <input type="checkbox"/> Rape Crisis Center <input type="checkbox"/> Other (please name or describe:
--	--

Investigations

Criminal Investigations

Number of investigators employed by the agency and/or facility who are responsible for conducting CRIMINAL investigations into allegations of sexual abuse or sexual harassment:	0
--	---

When the facility received allegations of sexual abuse or sexual harassment (whether staff-on-inmate or inmate-on-inmate), CRIMINAL INVESTIGATIONS are conducted by: Select all that apply.	<input checked="" type="checkbox"/> Facility investigators <input checked="" type="checkbox"/> Agency investigators <input type="checkbox"/> An external investigative entity
---	---

Select all external entities responsible for CRIMINAL INVESTIGATIONS: Select all that apply (N/A if no external entities are responsible for criminal investigations)	<input checked="" type="checkbox"/> Local police department <input checked="" type="checkbox"/> Local sheriff's department <input type="checkbox"/> State police <input checked="" type="checkbox"/> A U.S. Department of Justice component <input type="checkbox"/> Other (please name or describe: <input type="checkbox"/> N/A
---	--

Administrative Investigations

Number of investigators employed by the agency and/or facility who are responsible for conducting ADMINISTRATIVE investigations into allegations of sexual abuse or sexual harassment?	253
--	-----

When the facility receives allegations of sexual abuse or sexual harassment (whether staff-on-inmate or inmate-on-inmate), ADMINISTRATIVE INVESTIGATIONS are conducted by: Select all that apply	<input checked="" type="checkbox"/> Facility investigators <input checked="" type="checkbox"/> Agency investigators <input type="checkbox"/> An external investigative entity
--	---

Select all external entities responsible for ADMINISTRATIVE INVESTIGATIONS: Select all that apply (N/A if no external entities are responsible for administrative investigations)	<input type="checkbox"/> Local police department <input type="checkbox"/> Local sheriff's department <input checked="" type="checkbox"/> State police <input type="checkbox"/> A U.S. Department of Justice component <input type="checkbox"/> Other (please name or describe: Click or tap here to enter text.
---	---

Audit Findings

Audit Narrative

The PREA Audit of FCI Pekin, Bureau of Prisons (BOP), was conducted on September 21-23, 2021, by United States Department of Justice Certified PREA Auditor Karen d. Murray. Prior to the audit, FCI Pekin, Bureau of Prisons (BOP) provided this Auditor with appropriate directives, procedures, facility and Agency documentation related to the standards for review. Agency policy and facility documentation were in the form of Program Statements (PS), Institution Supplements (IS) and other forms and memos. Program Statements are agency-wide governing policies developed by the Federal Bureau of Prisons (BOP) and Institution Supplements stipulate institution specific policies when there is no agency-wide policy or when site specific policy is required to expand on agency Program Statements. The results of the “pre-audit” were discussed with the facility’s Program Management Analyst. No youthful inmates were housed at FCI Pekin. The audit was coordinated through PREA Auditors of America, LLC., Cypress, Texas. The audit began at 8:00 AM. The following persons were in attendance: acting Warden, acting Associate Warden of Operations/Institution PREA Compliance Manager (IPCM), the SIS Lieutenant, Captain, Executive Assistant and one Management Analyst from the BOP Central Office who attended the meeting virtually.

FCI Pekin, Illinois, is a medium security level facility for male offenders. The facility has an adjacent SCP for minimum security level female offenders known as the Camp. The Pekin facility houses approximately 1178 inmates within both the FCI and the Camp. In total, the campus employs 268 employees. The facility was opened in 1994 as a minimum security level facility for females and was converted to a male facility in 2011.

On August 16, 2021 the Auditor contacted Management Analyst and introduced herself. This initial call was intended to set a date for the BOP initial call with the auditor to speak to first steps and the audit processes. The Management Analyst and the Auditor then discussed communications moving forward. The decision was made contacting of one another could be made to either parties, at any time, and/or the use of email communications through the secure email provided through PREA Auditors of America. The facility was provided instruction on the following:

1. The BOP Management Analyst and the Bureau of Prisons currently chooses paper audits.
2. The Auditor explained logistics to include unimpeded access to the facility, documents and staff once onsite.
3. The Auditors’ role would be one of collaboration to achieve audit processes and purpose.
4. How collaboration would be accomplished to establish goals and expectations.
5. The Auditor informed the Management Analyst of the Issue Log for applicable areas of concern of uploaded documentation. The color process of the Issue Log was explained- red highlighted items would indicate further information was required. Yellow highlighted items would indicate the uploaded document had questions or needed revision. Green highlighted items indicated the documents uploaded met pre audit standard requirements. Communication exchanged between the Management Analyst and the Auditor would be documented on the Issue Log between both parties.
6. How discussion of corrective action could be accomplished during all phases of the audit.
7. The onsite audit phase would be scheduled for September 21-23, 2021.

8. The notice of the audit posting, for the first scheduled audit, needed to be posted by August 9, 2021. The posting was provided to the Management Analyst by the Auditor in both English and Spanish. The notice provided included the auditor contact information and correct audit dates. The Auditor requested pictures of the posting and areas where the notice was posted. Pictures were provided by PREA Auditors of America on August 17, 2021.
9. As described above, identification of issues with PAQ information was provided through the Issue Log.

Document Review:

Throughout the course of the next two months the Auditor completed a review of multiple documents uploaded onto the secure google drive and provided feedback to the Management Analyst via the issue log and email communications.

Inmate Demographics:

The auditor requested a current inmate roster inclusive of:

1. Inmates with disabilities;
2. Inmates not fluent in English;
3. LGBTQI inmates;
4. Past inmates housed in isolation or segregated from main population;
5. Inmates who reported sexual abuse or who reported sexual victimization during risk screening;
6. All grievances and allegations made in the 12 months preceding the audit; and,
7. All incident reports from the 12 months preceding the audit.

Reported Allegations – External Investigating Agencies:

The Auditor was informed by the Management Analyst there were six allegations of sexual abuse and/or harassment. Of those reports two inmates who reported sexual abuse were current inmates. Each of the Administrative Investigations were completed within 30 days of the reported allegation.

Facility Staff:

The Auditor requested rosters to include volunteers, contracted personnel and staff roster to include staff names, position and years of service. The following staff names and information was received for:

1. Volunteers (none during COVID), Contractors
2. Random staff;
3. Health Authority and medical staff;
4. All employees who serve as first responders and mandatory reporters;
5. Receiving staff who complete intake documentation to include risk assessments;
6. Shift supervisors (Day and evening Duty Supervisors), on all shifts;
7. Staff who conduct unannounced rounds;
8. Retaliation monitors;
9. Sexual abuse review team members;
10. Employee Development Manager;
11. Facility Investigators;
12. Human Resource Manager;
13. PREA Coordinator;
14. PREA Compliance Manager;
15. Contract Administrator
16. Warden
17. Agency Head

Outside Services:

The following agency contact number is posted:

Center for Prevention of Abuse

PO Box 3855
Peoria, Illinois 61612-3855
309.691.0551

OSF Saint Francis Medical Center
530 NE Glen Oak Ave
Peoria, IL 61637
309.655.2000

Agency website: [BOP: www.bop.gov](http://www.bop.gov)

Research:

Through internet and the agency website research, there were no negative findings.

Approximately two weeks before the onsite phase of the audit, this Auditor supplied the facility with a final on-site schedule. Due to the Bureau of Prisons rules and regulations, audits must consist of three eight hour days, being conducted Tuesday through Thursday.

Onsite Audit Phase

On Tuesday, September 21, 2021 at 7:00 am, the Auditor arrived at the training center to be screened for COVID and proceeded to the FCI for the opening introductions. Those in attendance in the morning debrief consisted of the Auditor, Management Analyst, Acting Warden, Captain, Special Investigating Services Lieutenant, Acting Assistant Warden, Executive Assistant and two ACA auditors. After introductions, this Auditor requested staff and inmate rosters. Once rosters were received, names were chosen by highlighting every tenth name on each inmate roster and selecting most available staff names on the staff schedule. Due to the facility having several staff working overtime shifts, as many names as possible were chosen. Due to time constraints with being provided 24 hours for the audit in entirety, all specialized staff were asked to complete specific interview questions via electronically.

Tour:

The tour of the Administrative building took place directly after the person to person introductions of facility administrative staff. The Auditor was granted access to all areas of each building where inmates frequented for programming and where staff conducted day to day business. *(Reference specific facility information in the facility characteristics section below for a thorough walk through explanation.)*

Processes:

Day one, after introductions and the choosing of names for interviews and file review, consisted of touring both the FCI and Camp. Let it be known during the tour, each department head and their staff met this Auditor and were interviewed. In addition, there were a total of 10 informal inmate interviews and 25 informal staff interviews. Day one ended at 4:45 pm with a debrief with the Administrative Team

Day two the Auditor began at 8:30 am, meeting the Acting Associate Warden in the Administrative Office. Employee files were reviewed with the Human Resource Administrative Assistant. Next the 39 allegations and six investigations were reviewed with the Staff Investigation Services Lieutenant. Next we began interviewing inmates in the FCI until the day ended at 5:15 pm where a final debrief with the Administrative Team consisting the Auditor, Management Analyst, Acting Warden, Captain, Staff Investigating Services Lieutenant, Acting Assistant Warden, Executive Assistant and two ACA auditors.

Day three began at 6:00 am to complete staff and inmate interviews at the FCI and Camp. Once interviews were completed, inmate file review was completed and a final debrief concluded at 2:15 pm.

The Auditor was allowed access to all areas of each building and access to all requested records. All interviews were successful although due to scheduling issues, original staff chosen were replaced by secondary choices for many staff members.

The staff and inmates were helpful, kind and made the Auditor to feel quite welcome during the entire onsite process. There were a total of three inmates who chose to not answer interview questions.

Other processes:

1. Inmates were able to report PREA concerns via cop outs to the Warden or staff or their choice; verbally report to staff; however, their main choice to report was the Operations and/or Activities Lieutenant and/or report via the TRULink computers available.
2. Cross gender announcements were made by female and male staff by stating male on range or female on range.
3. Phones banks were available on each 'range'. Inmates were able to make calls of their choice; however, toll free numbers could not be made on inmate phones. If inmates wanted to make phone calls to the outside advocate, those calls were made with the help of psychology staff, in psychology offices.
4. The auditor was allowed to speak with staff and inmates during the site review. Interview results for both inmates and staff are documented in applicable standards.

Interviews:

The auditor requested a current position control roster showing staff name, title, tenure, shift and position assignment. Random names were chosen based on the above criteria. Due to staff being interviewed being different from staff chosen due to staff shortage issues, some staff files were different during the file review. (Before each interview with staff and inmates, the Auditor introduced herself, explained the audit process, ensured those being interviewed were comfortable being interviewed and understood the process. All interviews were conducted in a private area in either a sitting area outdoors or a private office area.

Staff Interview Category	Completed
Superintendent: Warden/Facility Head	1
Agency PREA Coordinator	1
Facility PREA Compliance Manager	1
Random Staff: All staff are responsible for supervision of inmates if segregated, first responders, searches and mandatory reporters	12
Specialized Staff	
Intermediate or higher-level staff responsible for conducting and documenting unannounced rounds – Supervisors from both shifts	2
Education staff	1
Program staff who work with youthful inmates – same as random staff in this review	N/A
Medical staff – RN	1
Mental health staff – Mental Health Authority	1
Non-medical staff involved in cross-gender searches – same as random staff in this facility	Random staff
Human Resource staff – Human Resource Manager,	1
Sexual Assault Forensic Examiner (SAFE) and Sexual Assault Nurse Examiner (SANE) staff – OSP Medical Center	1
Volunteers	N/A
Investigative staff at agency level –not applicable for this facility	N/A
Investigative staff at facility level – investigator(s)	2
Staff who perform screening for risk of victimization and abusiveness – Psychology Services	1
Staff who supervise inmates in segregated housed – same as random staff at this facility	1

Staff on the sexual abuse incident review team	1
Designated staff member charged with monitoring retaliation	1
First responders, security staff – all staff serve as first responders	All staff
First responders, non-security staff – all staff serve as first responders	All staff
Intake staff	1
Total Specialized staff	29

Staff training files:

Staff training files were conducted by utilizing the PREA Audit – Adult Prison and Jails Documentation Review Employee Files Records template. Review of staff training files demonstrated staff had refresher training exceeding the requirement of every two years. Each staff file reviewed had completed all PREA training topics through facility PowerPoint Presentations. Electronically during the year of COVID and/or in-person outside of COVID. All staff had been trained on transgender or intersex pat down searches.

Personnel files:

Staff personal files was conducted by utilizing the PREA Audit – Adult Prison and Jails Documentation Review - Employee Files Records template. Personal files reviewed were 100% compliant with initial and five year requirements, where applicable. Although institutional questions were asked by the Agency, these records were not available at the facility; however, confirmed by the agency Management Analyst.

Inmate Interviews:

On the first day of the on-site review, the auditor requested a current inmate roster detailing housing assignment and select targeted inmates. The auditor highlighted inmate names based on living unit, length and targeted categories. There were sixteen total inmate interviews. Of the inmates interviewed two to five inmates were interviewed from each living unit. There were three targeted inmates in the facility who identified as transgender, gay or bi-sexual.

Total population during on-site review 1167	Total bed capacity 1200
Overall minimum number of inmate interviews 40	Numbered required 45
Minimum number of random inmate interviews 40	Number interviewed 45
Minimum number of targeted inmate interviews 16	Numbered interviewed 16
Breakdown of required targeted inmate interviews	
Inmates with a physical disability - 0	Number interviewed 0 – no targeted inmates at this facility
Inmates who are blind, deaf, or hard of hearing - 0	Number interviewed 0 – no targeted inmates at this facility
Inmates who are LEP - 0	Number interviewed 0 – no targeted inmates at this facility
Inmates with a cognitive disability – 0	Number interviewed 0 – no targeted inmates at this facility
Inmates who identify as lesbian, gay, or bisexual - 2	Number interviewed 4
Inmates who identify as transgender or intersex – 5	Number interviewed 5
Inmates in isolation –	Number interviewed 4
Inmates who reported sexual abuse – 1	Number interviewed 1
Inmates who reported sexual victimization during risk screening - 1	Numbered interviewed 1
Inmates who disclosed prior sexual victimization after screening - 2	Number interviewed 1
Inmates who wrote to the Auditor - 2	Numbered interviewed 2

Inmate files reviewed were of those inmates interviewed. The Auditor utilized the PREA Audit Adult Prisons and Jails Facilities Documentation Review Inmate Files/Records template. Inmate files reviewed did not suggest 10-day trainings were completed timely.

Other documents and information requested or reviewed:

Incident reports from the 12 months preceding the audit	6
All allegations of sexual abuse and sexual harassment reported for investigation in the 12 months preceding the audit	6
All hotline calls made during the 12 months preceding the audit	None reported from facility or hotline

The auditor's description of the audited facility should include details about the facility type, demographics and size of the inmate, resident or detainee population, numbers and type of staff positions, configuration and layout of the facility, 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.

Facility Characteristics:

As is described above - FCI Pekin, Illinois, is a medium security level facility for male offenders. The facility has an adjacent SCP for minimum security level female offenders known as the Camp. The Pekin facility houses approximately 1178 inmates within both the FCI and the Camp. In total, the campus employs 268 employees. The facility was opened in 1994 as a minimum security level facility for females and was converted to a male facility in 2011.

When entering the FCI Pekin, you first enter through the front lobby. Once processed through the Warden's complex, the Armory are down the left corridor and the Business Office and Human Resources is down the right corridor.

When entering the secure confines, individuals proceed from the front lobby and are identified by the Control Room. Upon entering the Control Room, this auditor was able to view the facility cameras. Camera review demonstrated staff could not see into inmate rooms or into the shower area. One area in question, with a strong recommendation to rectify, is the phone banks next to the shower area as the area is a blind spot. In addition, all cameras were in working order. Once past the sally port, individuals proceed to the compound and all housing, programming and operational areas of the FCI which are in a circular format.

Order of accessibility is as follows for the FCI:

- Visitation: visitation remains no contact during the pandemic. Inmates sit inside of a Plexiglas area with visitors sitting on the exterior. PREA announcements and Zero-tolerance postings were visible to visitors. The large visiting room had four cameras throughout the visiting area.
- Housing units Illinois H1 and H2, (H2 currently used for quarantine was not toured at this Auditors request.) Indiana H1 and H2, Iowa H1 and H2, Missouri H1 and H2 each had a bulletin board upon entry with PREA Zero-tolerance posters, Auditor Notices and Crisis Intervention Services posting, which is separate from the agency and the facility. Male staff guiding the tour announced the Auditor's presence as 'Female on Range' as we entered each living unit. During informal interviews with inmates, this Auditor learned inmates are allowed to stop at bulletin boards and gather any information they may request. Each living unit has 88 two man cells and three 10 man cells. Each cell has a toilet out of line of site of cameras. Through informal interviews with inmates, this Auditor learned inmates' alert officers they are urinating and defecating by placing a piece of paper in their windows. Through informal interviews with inmates the Auditor learned each living unit has a bank of computers for inmates to use for emailing internal staff with options to notify the facility staff of sexual harassment and/or sexual abuse. Each living unit had three showers near the phone bank that was out of line of sight of

cameras, staff and other inmates. The shower and phone bank area is a blind spot on both levels of the housing units. Each living unit has up to seven cameras each, providing line of sight to all other areas of the living unit.

- The Special Housing Unit (SHU) has a bulletin board near the entry with PREA Zero-tolerance posters, Auditor Notices and Crisis Intervention Services posting, which is separate from the agency and the facility. The SHU has four ranges; each range has a dedicated correctional officer. There are a total of 75 double cells, each with their own toilet and shower. Cells with inmates have a shower curtain blocking view of inmates private plates and chests while showering. During informal interviews with inmates, this Auditor learned inmates are allowed to stop at bulletin boards and gather any information they may request.
- The indoor recreation area consists of a large gymnasium, a large open room with pool tables, free weights not being used during COVID, an art room, leather making area, ceramic shop and an education area for First Step classes. Although no cameras in this area, mirrors were strategically placed throughout the recreation area. There was one inmate bathroom without a door. This Auditor recommended the toilet in full view of those passing by was covered to indicate it could not be used.
- The Chapel is home to 18 different faith groups. During COVID inmates are able to watch religious videos in the large chapel room and meet with the Chaplain one on one. PREA Zero-tolerance postings were posted in the entry.
- Education area is on the opposite end of the building from the Chapel. PREA Zero-tolerance, Auditor notices and Crisis Intervention Services postings were posted. The education area had rooms down a short hallway where inmates met for educational needs. Cameras were placed at each end of the hallway with no apparent blind spots.
- UNICOR is a large factory area which was currently renovated from a metal shop to a textile factory. In this area are over 200 sewing machines where shorts and jackets are made for the United States Military personnel. Cameras are placed throughout the factory and there were no apparent blind spots.
- Vocational Trades was a large area with PREA Zero-tolerance, Audit notices and Crisis Intervention postings. This area had one large area for working inmates and two large rooms off to the side for trades for small groups of inmates. The area had cameras throughout with no apparent blind spots.
- The Captain Complex had PREA Zero-tolerance, Audit notices and Crisis Intervention postings upon entry. This area is only allowed one inmate for cleaning purposes who is never unsupervised as staff offices are throughout the area.
- Receiving and Discharge had PREA Zero-tolerance, Audit Notices and Crisis Intervention postings. This area includes the mailroom, records department, four intake tanks (dirty tanks – before inmates are processed), two medical screening offices, two intake screening rooms with all necessary forms used at intake to include the inmate handbooks and PREA training upon intake. This area is also known as Admission and/orientation and staff educate new admissions on facility rules and PREA upon entry. This area has a strip search room with two curtains, one staff searching one inmate. Transgender searches are done by the corresponding staff. Transgender inmates may request to be searched by opposite gender staff through the copout system to the Warden. In the main intake tank the camera does not show the toilet behind the half wall. Inmates are brought into the front lobby of the complex, where COVID testing is done. Inmates are then moved to the dirty tank; correctional services complete a visual search then inmates go through the Secure Pass machine which blurs out inmate private plates. Inmates are then fingerprinted and seen by the unit team to include medical, Special Investigative Services, Psychology and are then moved to the 'clean' tank. Once seen by all services they are transferred to the quarantine unit then dispersed to housing units where they will reside.
- The Medical Department had PREA Zero-tolerance, Audit Notices and Crisis Intervention postings. Offices in this area consist of an urgent care room, laboratory, dentist office with two dental chairs, radiology, medical supplies closet, observation area, medical isolation, two

pressure rooms for defecating, medical records, pharmacy, inmate waiting area and exam rooms where the blinds are closed during examination where two staff are always present with one inmate. Cameras are placed throughout this area and areas with inmate toilets are not in view of staff or cameras.

- Facilities: Inmates work throughout a common area and/or in shops adjacent to the common area. had PREA Zero-tolerance, Audit Notices and Crisis Intervention postings. This area has a toilet area without a door at the end of a hall. The first urinal is in view of others, should anyone be in the hall; however, once a body is moved up to the urinal, the private plate is not exposed.
- Safety has one orderly at a time in a small area where cleaning supplies are prepared for housing units, each day. Inmates are walked back to their unit if they need to use the toilet. There are no cameras in this area.
- Laundry and clothing exchange had PREA Zero-tolerance, Audit Notices and Crisis Intervention postings. Inmates fold and distribute clothing in this area where no cameras are present. Due to the openness of the area mirrors seem to hinder possible blind spots.
- The Barber Shop was closed due to COVID and we did not enter the area as one could see through the windows that this small area could easily be viewed by anyone passing by.
- The commissary was a small area with shelving. Due to the shelving blocking full view of the isles the Auditor requested a mirror be placed in the far back in order for staff to have full view of the area.
- Food service area had PREA Zero-tolerance, Audit Notices and Crisis Intervention postings. Seating accommodates up to 325 inmates at one sitting. Due to COVID, grab and go meals are prepared and inmates retrieve their own meals. 30 inmates work in the kitchen during the A.M. shift with two staff present. 20-22 inmates work the P.M. shift with up to five staff. Inmates work throughout the kitchen area with a compliment of cameras throughout the area. In the butcher shop there is one inmate who is locked in when in use.

Order of accessibility is as follows for the Camp:

- Cameras are placed at emergency exits, one facing the compound, and one facing the volleyball area. The camera facing the volleyball area has the capability to also view the softball area, outdoors.
- The camp has two housing units, Kansas and Nebraska. Upon entry, PREA Zero-tolerance, Audit Notices and Crisis Intervention postings are present. The Nebraska living unit has two ranges with 16 cubicles and 32 beds. The Kansas living unit has one range with three bed cubicle's, housing 42 beds and one range with two bed cubicles, housing 30 beds. Bathrooms in both units are equipped with shower curtains completely out of line of site of anyone passing this area. Male staff were witnessed to have announced their presence upon entry into the both housing units.
- The camp has a laundry and commissary. A toilet area for inmates is available; however, current practice is inmates return to living area when in need. Two to four inmates can be working in the laundry and commissary at one time with one staff each.
- The Warehouse could have up to four inmates working with one to two staff, depending on availability. Due to the height of the shelving, the Auditor suggested either stacking items at shoulder lever, as most of the product was currently stacked and/or place a mirror at the back of the area in order to fully view the area from any point of the area.
- The Education area had two classrooms, a library and a law library, all accessed by inmates at the time of the tour. No apparent blind spots were noted.
- The Recreation area currently had modified programming due to COVID. The area consisted of a large working space for projects, a music room and lockers for inmate projects. No apparent blind spots were noted.
- The Gymnasium was one large court. Although a bathroom was present, inmates are required to return to housing units when in need. There were no apparent blind spots in the area.

- The food service area had a large eating area; however, due to COVID, meals are grab and go. The serving line, dish wash area and cooking areas were manned by inmates throughout staffed by one Food Service Administrator. The butcher shop had one inmate locked in the area while in use. The bakery was an open area, not currently in use at this time of day, with a locked room for spices that are kept out reach due possibility of misuse.
- The medical department is comprised of a pharmacy, urgent care room, doctor and dentist office. Two chair dental area and an exam room, inmate waiting area, laboratory and COVID room. Mirrors were strategically placed throughout and no apparent blind spots.
- The Administrative area had a visiting area with PREA Zero-tolerance, Audit Notices and Crisis Intervention postings. Non-contact visiting area was set up behind Plexiglas.

Summary of Audit Findings

The following issues were noted on the issue log during the pre-onsite audit phase.

1. 115.13: Supervision and Monitoring: The Agency provided two individual documents, one describing the annual review of the staffing plan and a second document of staff schedules. The two documents provided were not inclusive of the required eleven components of the staffing plan. Upon further conversation, the agency provided the following documents to demonstrate each required component of the staffing plan was adhered to.
 - a. FCI Annual Salary/Workforce Utilization Plan Committee Meeting Fiscal Year 2021
 - b. PEK 5324.12D – addressing responsibilities for the PREA Compliance Manager, Annual
2. 115.33 (a)-1: Resident Education: Inmate training was requested. Training completed within 72 hours was reviewed during the on-site portion of the audit. During the on-site and post audit phases, inmate 30-day education was requested by the facility. During the post audit phase, Inmate Acknowledgements for Receipt of Inmate Handbook on Sexual Abuse/Assault Prevention and Intervention pamphlet for 25 of the 42 inmates were received. Although additional rosters were also provided, inmate acknowledgment does not seem to be evident. In addition, all names on the rosters are redacted which does not allow for cross walking inmate files reviewed. The Acting Warden provided a memo instructing staff to implement new protocols to ensure 30-day Inmate Education and a revised Inmate Acknowledgement of PREA Education be implemented.
3. 115.53 (a)-1: Inmate access to outside confidential support services. Through the pre-audit and on-site audit phase the determination was concluded that inmates and staff alike were not aware of external advocate services. Inmates and staff were made aware during the on-site phase of the audit through updated postings and training of staff and inmates.
4. 115.66 (a)-1: Preservation of ability to protect inmates from contact with abusers. The Master Agreement provided is dated July 2017 to July 2017. The Management Analyst stated this Master Agreement was in effect until a new agreement comes into play.

During the onsite phase of the audit the following issues were noted.

1. 115.67 Agency protection against retaliation: The team on-site were unsure which personnel were responsible for monitoring and documenting retaliation monitoring. Protection against retaliation monitoring for inmate documentation was received demonstrating monitoring documentation has been in place throughout the year 2020 and 2021. Personnel responsible for monitoring and documenting retaliation is now the PREA Compliance Manager.
2. 115.86 Sexual abuse incident reviews. The team on-site were unaware of which staff were on the incident review team and who was responsible for documenting the required provisions for such reviews. The Acting Warden provided a memorandum for PREA Documentation, subject 115.86 describing protocol to be implemented for Sexual Abuse Incident Reviews, dated September 23, 2021. The facility provided six completed Sexual Abuse Incident Reviews not previously completed before the on-site phase of the audit. The Sexual Abuse Incident Review team is now comprised of the Acting Warden over Correction Services, PREA Compliance Manager, Captain, Chief Psychologist, Health Service Administrator, and the SIA/SIS.

3. The Auditor strongly recommends areas not normally used by inmates be locked when not in use. Such areas include maintenance closets in living areas, and bathrooms in work areas out of line of sight of staff.

Standards Exceeded

Number of Standards Exceeded: 1

List of Standards Exceeded: Standard 115.15: Limits to Cross Gender Viewing and Searches.

Standards Met

Number of Standards Met: 44

Standards Not Met

Number of Standards Not Met: 0

List of Standards Not Met: N/A

PREVENTION PLANNING

Standard 115.11: Zero-tolerance of sexual abuse and sexual harassment; PREA coordinator

115.11 (a)

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

115.11 (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 facilities?
 Yes No

115.11 (c)

- If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.) Yes No NA
- Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)
 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*)

Document Review:

1. FCI Pekin PAQ
2. PEK 5324.12, Program Statement, dated June 4, 2015: Sexually Abusive Behavior Prevention and Intervention Program
3. BOP Institutional Supplement, dated June 23, 2020: Sexually Abusive Behavior Prevention and Intervention Program – Purpose of Scope

4. BOP Institutional Supplement, dated June 23, 2020: Sexually Abusive Behavior Prevention and Intervention Program – Sexually Abusive Behavior Prevention and Intervention Overview for Offenders, (English and Spanish versions)
5. BOP Program Statement 5270.09, dated July 8, 2011: Inmate Discipline Program
6. BOP Memorandum for Abigail G. Harris, Female Offender Program Administrator PREA Coordinator Assignment, dated March 11, 2013
7. Reentry Services Division Assistant Directors Office Organizational Chart, not dated
8. Updated Crisis Intervention postings, facility personnel training memo, dated September 22, 2021

Interviews:

1. Random Inmates
2. Targeted Inmates
3. FCI Correctional and Non-Correctional Officers
4. Supervisory staff
5. Acting Associate Warden of Programs (PREA Compliance Manager)

Site Review Observation:

During the tour the Auditor noted areas in the Warehouse and Commissary needing additional mirrors to ensure blind spots were not apparent. In addition, phone banks next to the shower area is out of line of sight, creating a blind spot where inmates congregate.

During the tour of the facility, the Auditor witnessed PREA Zero-tolerance, Audit Notices and Crisis Intervention posters in housing units and throughout the compound in highly trafficked areas. Posters were inventive, tasteful, creative and included hotline and advocate contact information. Through interviews with Inmates and staff and review of Inmate and staff files, it was evident that this facility interweaves requirements for this standard in their daily protocol. Both Inmates and staff could speak to most facility PREA practices and protocols being used as is described in the facility's Program Statement on Sexually Abusive Behavior Prevention and Intervention Program. Formal and informal interviews with staff and inmates demonstrated outside advocacy services were not known or apparent. In order to remedy this issue, on September 22, 2021, facility staff replaced current Crisis Intervention Postings, trained inmates through the TRULink computer system used by inmates and a facility wide email.

115.11

- (a) The FCI Pekin PAQ states the BOP Program Statement, Sexually Abusive Behavior Prevention and Intervention Program, dated June 4, 2015, mandates zero-tolerance toward all forms of sexual abuse and sexual harassment in the facility it operates and those directly under contract. BOP Program Statement, Sexually Abusive Behavior Prevention and Intervention Program, page 13 section 115.11, paragraphs (a) states:

An agency shall have a written policy mandating zero-tolerance toward all forms of sexual abuse and sexual harassment and outlining the agency's approach to preventing, detecting, and responding to such conduct.

The intent of this policy is to ensure that:

- Staff and inmates are informed that this policy implements the Bureau's "zero-tolerance" of sexually abusive behavior, and sexual harassment, as defined in this policy;
- Standard procedures are in place to detect and prevent sexually abusive behavior and sexual harassment at all Bureau facilities;
- Victims of sexually abusive behavior and sexual harassment receive timely and

- effective responses to their physical, psychological, and security needs;
- Allegations of sexually abusive behavior and sexual harassment receive timely intervention upon report; and
- The perpetrators of sexually abusive behavior and sexual harassment will be disciplined and, when appropriate, prosecuted in accordance with Bureau policy and Federal law.

(b) BOP Program Statement, Sexually Abusive Behavior Prevention and Intervention Program, page 13-14, section 115.11 paragraphs (b) states:

An agency shall employ or designate an upper-level, agency-wide PREA coordinator with sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities.

National PREA Coordinator. The National PREA Coordinator's responsibilities include developing, implementing, and overseeing the Bureau's compliance with PREA. The National PREA Coordinator provides oversight to all Regional PREA Coordinators. The National PREA Coordinator assists the Information, Policy, and Public Affairs (IPPA) Division in providing the required information to the U.S. Department of Justice, Bureau of Justice Statistics, through their collection agent (U.S. Census Bureau), of all incidents of sexually abusive behavior. The National PREA Coordinator also coordinates with the Privatization Management and Residential Reentry Branches to ensure contract facilities are in compliance with PREA Standard § 115.11.

The agency employs an upper-level, National PREA Coordinator. The PREA Coordinator demonstrates she has sufficient time and authority to develop, implement and oversee agency efforts to comply with the PREA standards in all of its facilities. The PREA Coordinator is in the agency organization chart, provided by the Agency, who reports to the Correctional Program Officer Administrative RRM Branch.

Regional PREA Coordinator. The Regional PREA Coordinator ensures policy guidelines are addressed in institutions within each region. Given the sensitivity required when defining and reporting cases as substantiated, a background in investigations is preferred when selecting a Regional PREA Coordinator.

(c) BOP Program Statement, Sexually Abusive Behavior Prevention and Intervention Program, page 14, section 115.11, paragraphs (c) states:

Where an agency operates more than one facility, each facility shall designate a PREA compliance manager with sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards.

The Warden at each institution must ensure that all aspects of this Program Statement are implemented, including maintaining a current Institution Supplement. He/she must assign an Institution PREA Compliance Manager, who except in rare circumstances will be an Associate Warden, for the overall responsibility of the program.

The Institution PREA Compliance Manager maintains responsibility for the Sexually Abusive Behavior Prevention and Intervention Program. He/she must provide supervisory oversight to ensure the coordination of institution departments in prevention, detection, intervention, and response, as specified in this Program Statement. The Warden may appoint supervisory staff as PREA points of contact in each key department (Correctional Services, Psychology Services,

Health Services, etc.), in order to assist the Institution PREA Compliance Manager with the implementation of this policy.

The FCI Pekin PAQ states the facility has a facility Associate Warden of Programs who also serves as the PREA Compliance Manager. This position is shown on the facility organization chart as the Associate Warden.

Through such reviews, the facility met the standards requirements.

Standard 115.12: Contracting with other entities for the confinement of inmates

115.12 (a)

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

115.12 (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 inmates.) 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*)

Document Review:

1. FCI Pekin PAQ
2. BOP 5324.12, Program Statement, dated June 4, 2015: Sexually Abusive Behavior Prevention and Intervention Program
3. DOJ, BOP, Privatized Corrections Contracting Award/Contract, dated January 27, 2018
4. DOJ, BOP, Privatized Corrections Contracting Award/Contract, dated January 23, 2013
5. DOJ, BOP, Privatized Corrections Contracting Amendment of Solicitation, dated August 15, 2012
6. BOP Memorandum for the Administrator External Auditing Branch, dated July 12, 2013
7. BOP Memorandum for the Administrator External Auditing Branch, dated July 12, 2013

Interviews:

1. Management Analyst

During the pre-audit phase, the Management Analyst conveyed the agency did have privatized contracts. Such contracts do contain language mandating each private provider comply with PREA standards. In addition, unionized staff are mandated to comply with PREA standards and disciplinary action would swiftly take place should noncompliance exist.

115.12

- (a) The FCI Pekin PAQ states the FCI Pekin does contract with private agencies for confinement services of their Inmates. BOP Program Statement, Sexually Abusive Behavior Prevention and Intervention Program, Section 115.12 page 14, paragraphs (a) states: "A public agency that contracts for the confinement of its inmates with private agencies or other entities, including other government agencies, shall include in any new contract or contract renewal the entity's obligation to adopt and comply with the PREA standards."

The Agency provided DOJ, BOP, Privatized Corrections Contracting Award/Contract, wherein language states, "We are in receipt of Modification No. 0043 which incorporates the Prison Rape Elimination Act (PREA) into the referenced Contract."

The Agency provided DOJ, BOP, Privatized Corrections Contracting Award/Contract, wherein the document includes language, "Add the following PREA language to the SOW/PWS – Section I. Security and Control, directly under the title "Sexual Assault": "The contractor shall comply with the Prison Rape Elimination Act of 2003 and the National Standards to Prevent, Detect, and Respond to Prison Rape as contained in 28 CFR Part 115."

The Agency provided DOJ, BOP, Privatized Corrections Contracting Amendment of Solicitation, dated August 15, 2012 wherein the document includes language, "The contractor shall comply with the Prison Rape Elimination Rape Act of 2003 and the National Standards to Prevent, Detect, and Respond to Prison Rape as contained in 28 CFR art 115."

The Agency provided BOP Memorandum for the Administrator External Auditing Branch, which states, "As of February 1, 2013, all 14 of the private prison contracts were modified to incorporate the PREA Language to the Performance of Work Statement (PWS), Section I, Security and Control, under the title "Sexual Assault,"

The Agency provided BOP Memorandum for the Administrator External Auditing Branch, dated July 12, 2013, wherein the document includes language, "In Chapter 2 – Personnel – of the SOW add the following language: P.L. 108-79, Prison Rape Elimination Act of 2003 (PREA), seeks to eliminate sexual assaults and sexual misconduct of offenders in correctional facilities to include all community based facilities."

- (b) BOP Program Statement, Sexually Abusive Behavior Prevention and Intervention Program, page 14, section 115.12, paragraphs (b) states: "Any new contract or contract renewal shall provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards." "Bureau must ensure its contracts with secure privatized facilities, jails, juvenile facilities, and Residential Reentry Centers include their obligation to adopt and comply with the PREA standards. Privatization Management Branch and Residential Reentry Management Branch field staff must include PREA compliance monitoring within their scheduled contract monitoring activity."

Through such reviews, the facility meets this standards requirements.

Standard 115.13: Supervision and monitoring

115.13 (a)

- Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?
 Yes No
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?
 Yes No
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy? Yes No
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies? Yes No
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies? Yes No
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)? Yes No
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population? Yes No
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?
 Yes No
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?
 Yes No NA
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any applicable State or local laws, regulations, or standards? Yes No
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse? Yes No
- In calculating adequate staffing levels and determining the need for video monitoring, does the

staffing plan take into consideration: Any other relevant factors? Yes No

115.13 (b)

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

115.13 (c)

- In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, 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 facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies? Yes No
- In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan? Yes No

115.13 (d)

- Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment? Yes No
- Is this policy and practice implemented for night shifts as well as day shifts? Yes No
- Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility? 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*)

Document Review:

1. FCI Pekin PAQ
2. BOP 5324.12, Program Statement, dated June 4, 2015: Sexually Abusive Behavior Prevention and Intervention Program
3. FCI Pekin, IL 3rd Quarter Salary Workforce Minutes, dated June 12, 2021, (FCI Pekin Salary Subcommittee Communication.

4. BOP FCI, Office of the Warden Memorandum for PREA Audit 2021, dated July 15, 2021
5. BOP FCI, Office of the Warden Memorandum for PREA Audit 2021, dated August 30, 2019
6. BOP Institution Supplement, dated June 23, 2020, Sexually Abusive Behavior Prevention and Intervention Program
7. Unannounced Institution Rounds for the weeks of February 2-8, 2021, December 28, 2020, February 9-16, 2021, March 2, 2021, April 6-12, 2021, April 20-26, 2021, May 4, 2021, May 18, 2021, May 24, 2021, and June 29, 2021.
8. Annual Salary/Workforce Utilization Plan Committee Meeting Fiscal Year 2021
9. PEK 5324.12D, dated June 25, 2018

Interviews:

1. Acting Associate Warden of Programs (PREA Compliance Manager)
2. PREA Coordinator
3. Random inmates
4. Targeted inmates
5. FCI Correctional and Non-Correctional Officers
6. Activity and Operations Lieutenants

Staff and inmates interviewed could attest to supervisory staff conducting unannounced rounds, each day, often occurring multiple times per day. Activity Lieutenant and the Operations Lieutenant both attested to completing unannounced rounds in all areas of the facility. Both staff attested to completing rounds at random times and through random direction. The Activity Lieutenant also stated that rounds at the first of each day and last round of the day were consistent and necessary for programmatic purposes.

Site review observation:

Staff were consistently noticed driving through and around the perimeter of the campus throughout the morning, afternoon and evening. Unannounced Rounds documentation demonstrated rounds are documented several times during all shifts, exceeding the standard requirement. In addition, Control staff complete constant monitoring of all areas of the facility and all cameras in the Control Room were in working order. Cameras viewed also demonstrated Control staff could not see into inmate cells and/or shower areas in any of the housing units throughout either the FCI and/or Camp.

115.13

- (a) The FCI Pekin PAQ states the agency requires the facility to develop, document and make its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing, and, where applicable, video monitoring, to protect inmates against abuse. The daily number of inmates, based on the facility website on August 20, 2021 is 965 (FCI) / 187 (SCP) and the staffing plan was predicated on the same number of inmates as is shown on the facility website.

The BOP 5324.12, Program Statement: Sexually Abusive Behavior Prevention and Intervention Program, page 14-15, section 115.13 (a), states, "The agency shall ensure that each facility it operates shall develop, document, and make its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing, and, where applicable, video monitoring, to protect inmates against sexual abuse. In calculating adequate staffing levels and determining the need for video monitoring, facilities shall take into consideration:

1. Generally accepted detention and correctional practices;
2. Any judicial findings of inadequacy;
3. Any findings of inadequacy from Federal investigative agencies;

4. Any findings of inadequacy from internal or external oversight bodies;
5. All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated);
6. The composition of the inmate population;
7. The number and placement of supervisory staff;
8. Institution programs occurring on a particular shift;
9. Any applicable State or local laws, regulations, or standards;
10. The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and
11. Any other relevant factors.

The Human Resource Management Division and Administration Division, Central Office, must consider PREA factors and safety, in general, when allocating overall staffing resources. At the institution, the Salary/Workforce Utilization Committee Meeting Minutes serves as the staffing plan.

The Agency provided two individual documents, one describing the annual review of the staffing plan and a second document of staff schedules. The two documents provided were not inclusive of the required eleven components of the staffing plan. Upon further conversation, the agency provided the following documents to demonstrate each required component of the staffing plan was adhered to.

- a. FCI Annual Salary/Workforce Utilization Plan Committee Meeting Fiscal Year 2021
- b. PEK 5324.12D – addressing responsibilities for the PREA Compliance Manager, Annual Review, unannounced round protocols and incident review
- c.

The facility provided FCI Pekin, IL 3rd Quarter Salary Workforce Minutes, (FCI Pekin Salary Sub-Committee Communication, demonstrating communication between the facility and the local union.

- (b) The FCI Pekin PAQ states each time the staffing plan is not complied with, the facility documents and justifies deviations. The facility did not have any deviations from the required ratios of their staffing plan. The BOP 5324.12, Program Statement, dated June 4, 2015: Sexually Abusive Behavior Prevention and Intervention Program, page 15, Section 115.13 (b), states, "In circumstances where the staffing plan is not complied with, the facility shall document and justify all deviations from the plan. Deviations are documented in the remarks section of the Salary/Workforce Utilization Committee Meeting Minutes. For example, if an allocated position is not filled for budgetary or other reasons, the reasons should be noted in remarks section."

The Agency provided BOP FCI, Office of the Warden Memorandum for PREA Audit 2021, stating, "There have been no deviations from the Staffing Plan at FCI Pekin."

- (c) The FCI Pekin PAQ states at least once every year the facility/agency, in collaboration with the PREA coordinator, reviews the staffing plan to whether adjustments are needed in (a) the staffing, (b) the deployment of monitoring technology, or (c) the allocation of agency/facility resources to commit to the staffing plan to ensure compliance with the staffing plan.

The BOP 5324.12, Program Statement, dated June 4, 2015: Sexually Abusive Behavior Prevention and Intervention Program, page 15-16, Section 115.13 (c), states, "Whenever necessary, but no less frequently than once each year, for each facility the agency operates, in consultation with the PREA coordinator required by § 115.11, the agency shall assess, determine, and document whether adjustments are needed to:

1. The staffing plan established pursuant to paragraph (a) of this section;
2. The facility's deployment of video monitoring systems and other monitoring technologies; and
3. The resources the facility has available to commit to ensure adherence to the staffing plan.

At a minimum, the most recent Salary/Workforce Utilization Committee Meeting Minutes (which include a review of the staffing plan) are annually compiled by the Regional PREA Coordinator by May 1, and submitted to the National PREA Coordinator by June 1.

The Facility provided, BOP FCI, Office of the Warden Memorandum for PREA Audit 2021, states, "As the PREA Compliance Manager, I have reviewed and assessed our staffing plan via Budget and Salary meeting."

- (d-e) The FCI Pekin PAQ states facility requires that intermediate level or higher-level staff conduct unannounced rounds to identify and deter staff sexual abuse and sexual harassment. BOP 5324.12, Program Statement: Sexually Abusive Behavior Prevention and Intervention Program, page 16, Section 115.13 (d), states, "Each agency operating a facility shall implement a policy and practice of having intermediate-level or higher level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment. Such policy and practice shall be implemented for night shifts as well as day shifts. Each agency shall have a policy to prohibit staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility." "Unannounced rounds by supervisory staff conducted with the intent of identifying and deterring sexual abuse and sexual harassment are conducted every week, including all shifts and all areas. The Institution Duty Officer (IDO) conducts and documents the unannounced rounds. At the end of the IDO's tour week, the documentation is forwarded to the Institution PREA Compliance Manager for retention."

The Facility provided BOP Institution Supplement, Sexually Abusive Behavior Prevention and Intervention Program, which states, "Unannounced rounds by supervisory staff conducted with the intent of identifying and deterring sexual abuse and sexual harassment are conducted every week. Including all shifts and all areas where inmates are present. The Institution Duty Officer (IDO) conducts and documents the unannounced rounds. At the end of the IDO's tour week, the documentation is forwarded to the Institution PREA Compliance Manager for retention."

The Facility provided Unannounced Institution Rounds for the weeks of February 2-8, 2021, December 28, 2020, February 9-16, 2021, March 2, 2021, April 6-12, 2021, April 20-26, 2021, May 4, 2021, May 18, 2021, May 24, 2021, and June 29, 2021. Although documented rounds are completed in several departments this Auditor requests if rounds are completed in areas where Trustee's may be allowed to work, outside of areas where inmates are programmed.

Through such reviews, the facility met the standards requirements.

Standard 115.14: Youthful inmates

115.14 (a)

- Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other

common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates [inmates <18 years old].) Yes No NA

115.14 (b)

- In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates [inmates <18 years old].) Yes No NA
- In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates [inmates <18 years old].) Yes No NA

115.14 (c)

- Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates [inmates <18 years old].) Yes No NA
- Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates [inmates <18 years old].) Yes No NA
- Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates [inmates <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*)

Document Review:

1. FCI Pekin PAQ
2. BOP 5324.12, Program Statement, dated June 4, 2015: Sexually Abusive Behavior Prevention and Intervention Program

Interviews:

1. Acting Associate Warden of Programs (PREA Compliance Manager)
2. Management Analyst

The PAQ provided by the facility stated this facility did not house youthful inmates. Through discussions with both the PREA Compliance Manager and Management Analyst demonstrated youthful inmates were not housed at this facility.

Site Observation:

The facility tour and formal and informal interviews with inmates and staff demonstrated youthful inmates had not been at this facility for many years.

115.14

- (a) The FCI Pekin PAQ states the agency does not house youthful inmates. The BOP 5324.12, Program Statement: Sexually Abusive Behavior Prevention and Intervention Program, page 16, Section 115.14 (a-c), states, “
- a. A youthful inmate shall not be placed in a housing unit in which the youthful inmate will have sight, sound, or physical contact with any adult inmate through use of a shared dayroom or other common space, shower area, or sleeping quarters.
 - b. In areas outside of housing units, agencies shall either:
 1. Maintain sight and sound separation between youthful inmates and adult inmates, or
 2. Provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact.
 - c. Agencies shall make best efforts to avoid placing youthful inmates in isolation to comply with this provision. Absent exigent circumstances, agencies shall not deny youthful inmates daily large-muscle exercise and any legally required special education services to comply with this provision. Youthful inmates shall also have access to other programs and work opportunities to the extent possible.

Standard 115.15: Limits to cross-gender viewing and searches

115.15 (a)

- Does the facility 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

115.15 (b)

- Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)
 Yes No NA
- Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.) Yes No NA

115.15 (c)

- Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches? Yes No
- Does the facility document all cross-gender pat-down searches of female inmates? (N/A if the facility does not have female inmates.) Yes No NA

115.15 (d)

- Does the facility have Directives that enables inmates 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 facility have procedures that enables inmates 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 facility require staff of the opposite gender to announce their presence when entering an inmate housing unit? Yes No

115.15 (e)

- Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status? Yes No
- If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, 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

115.15 (f)

- Does the facility/agency train correctional officers 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 facility/agency train correctional officers in how to conduct searches of transgender and intersex inmates 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*)

Document Review:

1. FCI Pekin PAQ

2. BOP 5324.12, Program Statement, dated June 4, 2015: Sexually Abusive Behavior Prevention and Intervention Program
3. BOP Program Statement 5521.06, dated June 4, 2015
4. BOP Memorandum for PREA Documentation, dated July 15, 2021
5. BOP Memorandum for PREA Documentation, dated July 15, 2021
6. Course completion rosters for Search and Restraint Procedures for Special Populations. Dates of trainings from June 14, 2015 through August 18, 2021
7. Lesson Plan Escort Procedures, Annual Training 2021, Instructor Guide
8. BLU/Video Portion of Training 2021, Individual Correctional Staff documentation, dated April 25, 2021 through June 18, 2021.

Interviews:

1. Random inmates
2. Targeted inmates
3. FCI Correctional and Non-Correctional Officers
4. Activities and Operations Lieutenants
5. Medical staff
6. Intake staff
7. Acting Associate Warden of Programs (PREA Compliance Manager)

Interviews with transgender, bi-sexual, gay and random inmates and staff, Lieutenants, medical staff, intake staff and the PREA Compliance Manager demonstrated cross gender searches were only conducted in exigent circumstances. In addition, all inmates reported their initial and any subsequent searches were typically respectfully conducted. One Transgender inmate expressed a search during a cell search resulted in search where she was exposed in full view of her cellie. The transgender reported this instance and a full investigation was completed for this allegation, action steps were taken to place a Plexiglas partition between the cages where the strip search took place and the inmate was notified verbally once procedure changes were implemented. Interviews with other transgender, gay and bisexual inmates stated each had the option of forwarding a copout request to the Warden if they preferred different gendered staff completed their searches. In addition, those inmates who are approved for different gendered staff searches are either holding a sign in their identification badges stating such and/or a red square is in the corner of the picture on the identification badge. Staff interviewed who had completed such searches stated if the transgender had transitioned genitalia, a different sex staff would search from the waist up or waist down, depending on the current status of the transgender.

Site Review Observation:

1. Intake area
2. Search area

During the tour of the facility the Auditor observed the Intake department. This area is also known as Admission and/or orientation and staff educate new admissions on facility rules and PREA upon entry. This area has a strip search room with two curtains, one staff searching one inmate. Transgender searches are done by the corresponding staff. In the main intake tank the camera does not show the toilet behind the half wall. Inmates are brought into the front lobby of the complex, where COVID testing is done. Inmates are then moved to the dirty tank; correctional services complete a visual search then inmates go through the Secure Pass machine which blurs out inmate private plates. Searches appear to be humane and private on all accounts.

115.15

- (a) FCI Pekin PAQ states the facility does not conduct cross-gender strip or cross-gender visual body cavity searches of their Inmates. In the past 12 months the facility has conducted zero cross-gender strip or cross-gender visual body cavity searches of Inmates.

BOP Program Statement 5324.12, page 1, Purpose of scope states, "In order to further the safe, secure, and/orderly running of its institutions, the Bureau of Prisons conducts searches of inmates and of inmate housing and work areas to locate contraband and to deter its introduction and movement. Staff shall employ the least intrusive method of search practicable, as indicated by the type of contraband and the method of suspected introduction.

BOP Program Statement 5324.12, page 17, section 115.15 (a), states, "The facility shall not conduct cross-gender strip searches or cross-gender visual body cavity searches (meaning a search of the anal or genital opening) except in exigent circumstances or when performed by medical practitioners." "(See the Program Statement Searches of Housing Units, Inmates, and Inmate Work Areas, or current version of this policy.)"

The facility provided a BOP Memorandum for PREA Documentation, 2021, which states, "FCI Pekin follows the national policy, as dictated by Program Statement 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, which enables inmates to shower, perform bodily functions, and change clothing without on-medical 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. FCI Pekin has had zero instances of exigent circumstances for this standard.

- (b) FCI Pekin PAQ states the facility does not permit cross-gender pat-down searches of female inmates, absent exigent circumstances. BOP Program Statement 5324.12, page 17, section 115.15 (b), states, "As of August 20, 2015, or August 21, 2017 for a facility whose rated capacity does not exceed 50 inmates, the facility shall not permit cross-gender pat-down searches of female inmates, absent exigent circumstances. Facilities shall not restrict female inmates' access to regularly available programming or other out- of-cell opportunities in order to comply with this provision." (See the Program Statement Searches of Housing Units, Inmates, and Inmate Work Areas, or current version of this policy.)

"Post assignments may not be restricted on the basis of gender. Institutions will evaluate operational concerns consistent with collective bargaining obligations, the Master Agreement, and other laws, rules, and regulations. The agency will continue to comply with Title VII and other Equal Employment Opportunity Commission authorities in implementing this policy."

- (c) FCI Pekin PAQ states the facility policy requires that all cross-gender strip searches, cross-gender visual body cavity searches, and cross-gender pat-down searches be documented and justified.

BOP Program Statement 5324.12, page 17, section 115.15 (c), states, "The facility shall document all cross-gender strip searches and cross-gender visual body cavity searches, and shall document all cross-gender pat-down searches of female inmates. (Note. This provision's requirement to document cross-gender pat-down searches of female inmates is not implemented by this policy.)"

- (d) FCI Pekin PAQ states the facility has implemented policies and procedures that enable Inmates to shower, perform bodily functions, and change clothing without non-medical 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 (this includes viewing via video camera).

BOP Program Statement 5324.12, page 17-18, section 115.15 (d), states, “The facility shall implement policies and procedures that enable inmates 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. Such policies and procedures shall require staff of the opposite gender to announce their presence when entering an inmate housing unit. This section applies only to inmate housing units. Further, this section is to provide notice in a housing unit; specific notice to individual inmates is not required. The Bureau operates Medical Centers, which include medical housing units. This provision does not apply to medical staff working on these units. Inmates will be appropriately clothed in all common areas of the institution. Inmates should only shower, perform bodily functions, and change clothing in designated areas (e.g. cells, shower rooms, bathrooms). Housing unit officers of the opposite gender, or any other cross-gender staff, may view breasts, buttocks, or genitalia only in an exigent circumstance, or when incidental to security checks of these designated areas of the housing unit.

Staff are not required to make announcements when responding to temporary and unforeseen circumstances that require immediate action in order to combat a threat to the security or institutional order of a facility, or when incidental to routine cell checks, to include circumstances such as responding to alarms, contraband detection, or detecting behavior that would constitute an inmate prohibited act, for example.

Inmates will be notified of the presence of opposite-gender staff members in several ways:

- Inmates are advised of the requirement to remain clothed, and the presence of cross-gender staff generally, during the Intake Screening process and the Admission and/orientation process.
- The following notice must be posted on inmate bulletin boards and signs within housing units, including segregated housing areas: “NOTICE TO INMATES: Male and female staff routinely work and visit inmate housing areas.”
- For housing unit officers, an announcement is made at the beginning of primary shifts, or other appropriate time to be determined locally (e.g., 10:00 count instead of morning watch). The verbal announcement to each housing unit, including segregated housing areas, will be “Notice: Opposite-gender staff will be in housing units during this shift.” This announcement is made using the general public address system (e.g., from Control or Lieutenants’ Office). If the public address system does not cover these areas, an individual announcement in each housing area, including segregated housing areas, is made.
- For staff members with offices in the housing units; e.g., the Unit Team, the most recent schedule is posted in the unit so inmates are aware when opposite-gender staff are present. (Note: this provision does not affect local scheduling procedures – quarterly, annually, 18 months, etc.)

As the agency has provided at least four ways to notify inmates that opposite-gender staff are present in the housing units, the only time an announcement is made is if a public address

system is not working, or an opposite-gender staff member comes into a unit area who is not the assigned housing unit officer, or unit team member working there, and must go into individual cells, showers, or bathroom areas.

Any other announcement mechanism at the local level will be determined through collective bargaining in the local Institution Supplement.

Nothing in this section should preclude opposite-gender staff from viewing live or recorded video, or participating in an inmate suicide watch.”

- (e) The FCI Pekin PAQ states the facility has a policy prohibiting staff from searching or physically examining a transgender or intersex Inmate for the sole purpose of determining the Inmate’s genital status. Such searches did not occur in the past 12 months. BOP Program Statement 5324.12, page 19, section 115.15 (e), states, “The facility shall not search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate’s genital status. If the inmate’s genital status is unknown, it may be determined during conversations with the inmate, 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. This provision does not limit searches of inmates to ensure the safe and/orderly running of the institution.”

The facility provided a BOP Memorandum for PREA Documentation, dated July 15, 2021 which states, “FCI Pekin follows the national policy as dictated by Program Statement 5324.12, Sexually Abusive Behavior Prevention and Intervention Program; prohibiting staff from searching or physically examining a transgender or intersex inmate for the sole purpose of deterring the inmate’s genital status.

- (f) The FCI Pekin PAQ states 100% of security staff receive training on conducting cross-gender pat-down searches and searches of transgender and intersex Inmates in a professional and respectful manner. BOP Program Statement 5324.12, page 19, section 115.15 (f), states, “The agency shall train security staff in how to conduct cross-gender pat-down searches, and searches of transgender and intersex inmates, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs. The Correctional Services Branch updates and maintains training materials on conducting pat- down searches of transgender and intersex inmates.”

The facility provided:

- Sample documentation of course completion rosters for Search and Restraint Procedures for Special Populations. Dates of trainings from June 14, 2015 through August 18, 2021
- Lesson Plan Escort Procedures, Annual Training 2021, Instructor Guide which speaks to Escort Procedures, Transgender Offender Manual, quoting Program Statement 5200.04, CN-1; Female Offender Manual, quoting Program Statement 5200.04, CN-1; Searches to include Transgender and Cross-Gender Pat Searches
- BLU/Video Portion of Training 2021, Individual Correctional Staff documentation, dated April 25, 2021 through June 18, 2021. Sample documentation of completed training includes Sexually Abusive Behavior Prevention and Intervention Program (PREA)

Through such reviews, the facility exceeds this standards requirements.

Standard 115.16: Inmates with disabilities and inmates who are limited English proficient

115.16 (a)

- Does the agency take appropriate steps to ensure that inmates 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: inmates who are deaf or hard of hearing? Yes No
- Does the agency take appropriate steps to ensure that inmates 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: inmates who are blind or have low vision? Yes No
- Does the agency take appropriate steps to ensure that inmates 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: inmates who have intellectual disabilities? Yes No
- Does the agency take appropriate steps to ensure that inmates 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: inmates who have psychiatric disabilities? Yes No
- Does the agency take appropriate steps to ensure that inmates 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: inmates who have speech disabilities? Yes No
- Does the agency take appropriate steps to ensure that inmates 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 inmates 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 inmates with disabilities including inmates 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 inmates with disabilities including inmates 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 inmates with disabilities including inmates who: Are blind or have low vision? Yes No

115.16 (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 inmates 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

115.16 (c)

- Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate'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*)

Document Review:

1. FCI Pekin PAQ
2. BOP 5324.12, Program Statement, dated June 4, 2015: Sexually Abusive Behavior Prevention and Intervention Program
3. BOP Memorandum for PREA Documentation, for PREA Standard 115.16(a)-1, dated July 15, 2021
4. BOP Memorandum for Chief Executive Officers, dated October 7, 2014, Subject: DOJ Blanket Purchase Agreement Available for Telephonic Language Translations

Interviews:

1. Psychologist
2. Random inmates
3. Targeted inmates
4. FCI Correctional and Non-Correctional Officers
5. Acting Associate Warden of Programs (PREA Compliance Manager)

During interviews with targeted inmates, correctional staff, PREA Compliance Manager and the Psychologist each stated inmates were not used for translation services, outside of inmate to inmate mentoring. Language barriers were not apparent during interviews and/or the facility tour. One random

inmate interview revealed a strong accent; however, the inmate verified he understood me and was able to answer all questions asked of him.

115.16

- (a) The FCI Pekin PAQ states the agency has established procedures to provide disabled Inmates equal opportunities to be provided with and learn about the agency's efforts to prevent, detect and respond to sexual abuse and sexual harassment. BOP Program Statement 5324.12, page 19, section 115.16 (a), states, "The agency shall take appropriate steps to ensure that inmates with disabilities (including, for example, inmates who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech 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. Such steps shall include, when necessary to ensure effective communication with inmates who are deaf or hard of hearing, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary. In addition, the agency shall ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities, including inmates who have intellectual disabilities, limited reading skills, or who are blind or have low vision. An agency is not required to take actions that it can demonstrate would result in a fundamental alteration in the nature of a service, program, or activity, or in undue financial and administrative burdens, as those terms are used in regulations promulgated under title II of the Americans with Disabilities Act, 28 CFR 35.164."

"The Institution PREA Compliance Manager should reach out to local disabilities assistance offices, as a resource, to ensure the facility is providing effective communication accommodations when a need for such an accommodation is known. Staff take reasonable action to ensure that available methods of communication are provided to all inmates with disabilities for complete access to its efforts of preventing, detecting, and responding to sexual abuse and sexual harassment."

The facility provided BOP Memorandum for PREA Documentation, for PREA Standard 115.16(a)-1, dated July 15, 2021 stating instruction on how inmates who are hearing and visually impaired and those with limited reading skills are provided with resources for those individual needs.

The facility provided BOP Memorandum for PREA Documentation, for PREA Standard 115.16(a)-1, stating instruction on how inmates who are hearing and visually impaired and those with limited reading skills are provided with resources for those individual needs when given the Sexually Abusive Behavior Prevention and Intervention pamphlet and Admission and/or orientation Handbook they are provided upon arrival to the facility.

The facility provided BOP Memorandum for Chief Executive Officers, dated October 7, 2014, Subject: DOJ Blanket Purchase Agreement Available for Telephonic Language Translations. The DOJ has set up a Blanket Purchase Agreement for on-demand, over-the-phone interpreter services.

- (b) The FCI Pekin PAQ states the agency has established procedures to provide Inmates with limited English 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. The FCI Pekin addresses compliance for this measure, in measure (a) of this provision.

BOP Program Statement 5324.12, page 20, section 115.16 (b), states, “The agency shall 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 inmates who are limited English proficient, including steps to provide interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary.”

“The Institution PREA Compliance Manager should reach out to available interpretation services to ensure the facility is providing effective communication accommodations when a need for such an accommodation is known. Staff take reasonable action to ensure that available methods of communication are provided to all inmates who are limited English proficient for complete access to its efforts of preventing, detecting, and responding to sexual abuse and sexual harassment.”

- (c) The FCI Pekin PAQ states the agency prohibits the use of Inmate interpreters. In the last 12 months the facility has had zero instances where Inmates were used for interpreters. BOP Program Statement 5521.06, page 20, section 115.16 (c), states, “The agency shall not rely on inmate interpreters, inmate readers, or other types of inmate assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate’s safety, the performance of first response duties under § 115.64, or the investigation of the inmate’s allegations.”

Through such reviews, the facility meets this standards requirements.

Standard 115.17: Hiring and promotion decisions

115.17 (a)

- Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)? Yes No
- Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates 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 inmates 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 inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)? Yes No
- Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates 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 inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the question immediately above? Yes No

115.17 (b)

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

115.17 (c)

- Before hiring new employees, who may have contact with inmates, does the agency perform a criminal background records check? Yes No
- Before hiring new employees who may have contact with inmates, 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

115.17 (d)

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

115.17 (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 inmates or have in place a system for otherwise capturing such information for current employees? Yes No

115.17 (f)

- Does the agency ask all applicants and employees who may have contact with inmates 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 inmates 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

115.17 (g)

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

115.17 (h)

- 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*)

Document Review:

1. FCI Pekin PAQ
2. BOP 5324.12, Program Statement, dated June 4, 2015: Sexually Abusive Behavior Prevention and Intervention Program
3. U.S. DOJ, BOP, General Information Resource Guide, not dated, Background Investigations
4. BOP Questionnaire for Public Trust Positions, not dated
5. BOP Memorandum for Human Resource Managers, dated February 28, 2014; Subject PREA Record Requests by Prospective Employers Regarding Former BOP Employees
6. PREA-Reference Check Background Materials; 28 CFR 115.17(h), not dated

Interviews:

1. Acting Associate Warden of Programs (PREA Compliance Manager)
2. Human Resource Assistant

Interviews with the Associate Warden of Programs (PREA Compliance Manager), and Human Resource Assistant demonstrated applicants determined to have been convicted of sexual abuse or sexual harassment charges were screened out during the application review process. Additionally, applicants who were terminated in past institutions for sexual abuse and/or sexual harassment were not considered for employment or promotion.

Site Review Observation:

During review of staff personnel files reviewed, this Auditor noted that institutional references were not completed for applicable staff at the facility. Facility staff were unaware of this process. Upon speaking to the Office of Personnel, this Auditor learned this process was completed at the Agency level.

In addition, files reviewed demonstrated each had criminal and applicable background checks conducted upon hire and within five years of hire date; however, due to the lengthy investigation

process completed in tandem with the criminal background checks, many employees had a letter demonstrating their criminal background check had been cleared. The same practice of background check process exists for all contractors and volunteers who have contact with Inmates. At this time, due to COVID, the facility did not have any volunteers.

115.17

(a) The FCI Pekin PAQ states the agency policy prohibits hiring or promoting anyone who may have contact with inmates, and prohibits enlisting the services of any contractor who may have contact with inmates who has engaged in or been convicted in or administratively adjudicated in sexual activity described in paragraph (a)(2) of this standard. BOP Program Statement 5324.12, section 115.17 (a), states, "The agency shall not hire or promote anyone who may have contact with inmates, and shall not enlist the services of any contractor, who may have contact with inmates, who:

1. Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997);
2. Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or
3. Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (a)(2) of this section.

The Agency provided U.S. DOJ, BOP, General Information Resource Guide, Background Investigations entailing employment with the BOP is subject to satisfactory completion of a background investigation to determine suitability for employment as a law enforcement official.

The Agency provided BOP Questionnaire for Public Trust Positions, entailing the investigative process for background investigations conducted using applicant responses on the form to develop information as to if applicants are reliable, trustworthy, of good conduct and character and loyal to the United States.

(b) The FCI Pekin PAQ states agency policy requires the consideration of any incidents of sexual harassment when determining to hire and/or promote anyone, or to enlist services of any contractor, who may have contact with Inmates. BOP Program Statement 5324.12, page 20, section 115.17 (b), states, "The agency shall consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates."

For the purposes of this section, consideration of incidents of sexual harassment of inmates will not automatically preclude any current staff member from being transferred into another position or promoted within the Bureau, in accordance with its disciplinary/adverse action process and collective bargaining agreement, and applicable laws, rules, and regulations. During the pre-audit phase, the PREA Analyst explained any staff who was currently being investigated for sexual harassment or sexual abuse would not be considered for transfer until such investigation was closed.

(c) The FCI Pekin PAQ states Agency policy requires background checks are conducted with all new hires who have contact with inmates and makes 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. In the past 12

months 21 persons hired may have contact with Inmate who have had criminal background checks. BOP Program Statement 5324.12, page 20, section 115.17 (c), states, "Before hiring new employees who may have contact with inmates, the agency shall:

1. Perform a criminal background records check; and
2. 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.

- (d) The FCI Pekin PAQ states the agency policy requires that a criminal background records check be completed before enlisting the services of any contractor who may have contact with inmates. In the past 12 months there were 21 contracts for services where criminal background record checks were conducted on all contractors covered in the contract who might have contact with inmates. BOP Program Statement 5521.06, page 21, section 115.17 (d), states, "The agency shall also perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates."
- (e) The FCI Pekin PAQ states the agency requires background checks to be completed every five years. BOP Program Statement 5324.12, page 21, section 115.17 (e), states, "The agency shall either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees."

During the pre-audit phase, the PREA Analyst explained the system in place is maintained by the Office of Personnel completed background 'E-QIP Database' provides Human Resources and indicator which subsequently notifies individual personnel a requirement to complete necessary documentation to begin the five-year background check. Once the background investigation is complete, the results are stored in the JSTAR database.

- (f) BOP Program Statement 5324.12, page 21, section 115.17 (f), states, "The agency shall ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions and in any interviews or written self-evaluations conducted as part of reviews of current employees. The agency shall also impose upon employees a continuing affirmative duty to disclose any such misconduct." "For current employees, the "reviews" referenced in this section mean the five-year background checks in section (e)."
- (g) The FCI Pekin PAQ states that agency policy states that material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination. BOP Program Statement 5521.06, page 21, section 115.17 (g), states, "Material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination."
- (h) The BOP Program Statement 5324.12, page 21, section 115.17 (h), states, "Unless prohibited by law, the agency shall provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work." The Bureau complies with the Federal Privacy Act and Freedom of Information Act, and all other applicable laws, rules, and regulations."

The Agency provided BOP Memorandum for Human Resource Managers, dated February 28, 2014; Subject PREA Record Requests by Prospective Employers Regarding Former BOP

Employees where in language states, “As many of you are aware, PREA requires all institutional employers to make its “best efforts” to contact all prior institutional employers regarding any substantiated allegations of sexual abuse or harassment.”

Through such reviews, the facility meets this standards requirements.

Standard 115.18: Upgrades to facilities and technologies

115.18 (a)

- If the agency designed or acquired any new facility 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 inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)
 Yes No NA

115.18 (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 inmates from sexual abuse? (N/A if agency/facility 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*)

Document Review:

1. FCI Pekin PAQ
2. BOP 5324.12, Program Statement, dated June 4, 2015: Sexually Abusive Behavior Prevention and Intervention Program

Interviews:

1. Acting Associate Warden of Programs (PREA Compliance Manager)

Site Review Observation:

1. Control area
2. Camera monitors on the Special Housing Unit

During a tour of the Master Control Area, the Auditor witnessed all cameras being operable. Cameras are placed in such a manner as to not allow staff to view Inmates while utilizing toilets and showers.

115.18

- (a) The FCI Pekin PAQ states the facility has not acquired a new facility or made substantial expansions or modifications to existing facilities since the last PREA audit. The BOP Program Statement 5324.12, page 21, section 115.18 (a), states, “When designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, the agency shall consider the effect of the design, acquisition, expansion, or modification upon the agency’s ability to protect inmates from sexual abuse.”
- (b) The FCI Pekin PAQ states the facility has not installed electronic surveillance system since the last PREA audit. The BOP Program Statement 5324.12, page 22, section 115.18 (b), states, “When installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the agency shall consider how such technology may enhance the agency’s ability to protect inmates from sexual abuse.” “All new facility designs and upgrades of technology will include consideration of how it could enhance the Bureau’s ability to protect against sexual abuse.”

Through such reviews, the facility meets this standards requirements.

RESPONSIVE PLANNING

Standard 115.21: Evidence protocol and forensic medical examinations

115.21 (a)

- If the agency is responsible for investigating allegations of sexual abuse, 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/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)
 Yes No NA

115.21 (b)

- Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility 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/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.) Yes No NA

115.21 (c)

- Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiary 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

115.21 (d)

- Does the agency attempt to make available to the victim a victim advocate from a rape crisis center? Yes No
- If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based

organization, or a qualified agency staff member? (N/A if the agency *always* makes a victim advocate from a rape crisis center available to victims.) Yes No NA

- Has the agency documented its efforts to secure services from rape crisis centers?
 Yes No

115.21 (e)

- As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews? Yes No
- As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals? Yes No

115.21 (f)

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

115.21 (g)

- Auditor is not required to audit this provision.

115.21 (h)

- If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency *always* makes a victim advocate from a rape crisis center available to victims.) 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*)

Document Review:

1. FCI Pekin PAQ
2. BOP 5324.12, Program Statement, dated June 4, 2015: Sexually Abusive Behavior Prevention and Intervention Program
3. U.S. DOJ, Policy Memorandum, dated July 9, 2014, Subject: Prison Rape Elimination Act Investigative Policy

4. Memorandum of Understanding Between the Federal Bureau of Investigation and The Federal Bureau of Prisons on Violations of Federal Criminal Statutes, dated August 23, 1996
5. U.S. DOJ, FBI Letter addressed to the Assistant Director, Program Review Division, Subject: FBI Criminal Investigation Processes, dated April 2, 2014
6. Guide for First Responders, not dated
7. BOP FCI, Office of the Associate Warden, Memorandum for PREA Documentation, dated July 15, 2021, Subject: PREA Standard 115.21(c)-2
8. Agreement between The Federal Bureau of Prisons, FCI Pekin, Pekin, Illinois and The Center for Prevention of Abuse, dated March 12, 2019.
9. Certificates of Completion: Forensic Medical Exams, dated June 10, 2015, February 16, 2021, March 15, 2021
10. Credentials for two staff Psychologists
11. BOP FCI, Office of the Associate Warden, Memorandum for PREA Documentation, dated July 15, 2021, Subject: PREA Standard 115.21(e)-1
12. BOP FCI, Office of the Associate Warden, Memorandum for PREA Documentation, dated July 15, 2021, Subject: PREA Standard 115.21(f)-1
13. DOJ/OIG PREA Training Topic List, dated January 14, 2014
14. A current Forensic Medical Exam: An Overview for Victim Advocates PEK roster was received post audit and demonstrates 14 staff completed training between 1998 and 2021.
15. Link to the Federal Bureau of Investigation Domestic Investigations and Operations Guide (DIOG) <http://vault.fbi.gov/FBI%20Domestic%20Investigations%20and%20Operations%20Guide%20%28DIOG%29>
16. Lesson Plan: Forensic Medical Examinations: As Overview for Victim Advocates, dated April 14, 2014
17. Email regarding Mandatory PREA Training Requirements for Victorville PREA, dated January 14, 2014
18. Email regarding protocol for the Center for Prevention of Abuse, dated September 21, 2021. (email listing of read receipt status for 261 employees.)
19. Revised color flyers for the Center for Prevention of Abuse

Interviews:

1. Random Inmates
2. Targeted Inmates
3. FCI Correctional and Non-Correctional Officers
4. Supervisory staff
5. Contracted Nurse
6. Acting Associate Warden of Programs (PREA Compliance Manager)
7. Facility Investigators

Interviews:

Interviews with all Inmates and staff interviewed demonstrated all were clearly unaware of reporting protocols for sexual harassment and abuse. Of those interviewed, each were comfortable reporting internally; however, neither inmates or staff interviewed informally and formally were aware of the outside advocate. Upon research, the staff realized the flyers posted for external intervention services was faded and the phone number was no longer visible. On September 21, 2021, during the on-site phase, the Warden addressed an email to PEK-All Staff stating, "The Center for Prevention of Abuse has a local number available for inmate reporting. Inmates cannot dial this number so staff will need to assist in dialing this number. The number is 309.691.0551 for inmates to report abuse or other concerns. In addition, revised colored flyers for the Center for Prevention of Abuse were reposted on inmate bulletin boards.

Every staff interviewed clearly articulated first responder duties to include protecting, preserving and reporting. When each were asked where this information was located, responses included bulletin boards and staff PREA cards.

Site Review Observation:

There were six criminal investigations reported in the last 12 months. Of those six investigations, all were reported timely with the victim and perpetrator separated immediately following the allegation and completed within 30 days.

115.21

- (a) The FCI Pekin PAQ states the facility is responsible for conducting Administrative and Criminal Investigations. The BOP Program Statement 5324.12, page 22, section 115.21 (a), states, "To the extent the agency is responsible for investigating allegations of sexual abuse, the agency shall follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions."

The Agency provided a U.S. DOJ, Policy Memorandum stating, "The purpose of this policy memorandum is to incorporate existing guidance and training into Inspector General Manual (IGM) policy concerning the processing and investigation of allegations of sexual abuse in confinement settings. These policies are in conformance with the Prison Rape Elimination Act."

The Facility provided a "Guide for First Responders". This Guide is intended for the Operations Lieutenant when approached with an inmate allegation of sexual abuse or harassment.

- (b) The FCI Pekin PAQ states the protocol being developmentally appropriate for is not applicable as the facility does not house youthful offenders. BOP Program Statement 5324.12, page 22, section 115.21 (b), states, "The protocol shall be developmentally appropriate for youth where applicable, and, as appropriate, shall be 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." "The Bureau's response to sexual assault follows the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," dated April 2013, or the most current version."
- (c) The FCI Pekin PAQ states the facility offers all Inmates who experience sexual abuse access to forensic medical examinations. Forensic examinations are offered at no cost to the victim. Where possible, all examinations are conducted by SAFE or SANE examiners. There have been zero medical exams, SAFE/SANE exams performed in the last 12 months. BOP Program Statement 5324.12, page 22, section 115.21 (c), states, "The agency shall offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, 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 can be performed by other qualified medical practitioners. The agency shall document its efforts to provide SAFEs or SANEs." "When there is a report of a recent incident of sexual abuse, or there is a strong suspicion that a recent serious assault may have been sexual in nature, a physical examination of the alleged victim is conducted. The victim is provided the opportunity for a forensic examination as soon as possible. Physical evidence collection may also include an examination of and

collection of physical evidence from the suspected perpetrator(s). For further information, see sections 115.64, 115.65, and 115.81-83. In the case of inmate-on-staff sexual abuse, community medical/mental health resources and services will be made available to the staff member immediately.”

The Facility provided an Agreement between The Federal Bureau of Prisons, FCI Pekin, Pekin, Illinois and The Center for Prevention of Abuse, dated March 12, 2019.

On August 21, 2021 at 10:22 MST, the Auditor phoned the Center for Prevention of Abuse at 309.691.0551 and spoke with Operator Taylor F. who stated she was aware of the relationship between the Advocacy Center and the FCI Pekin. The Operator stated she had taken many calls and her processes were to open her Rule Binder and complete a report which is immediately forwarded to the Head Medical/Legal Advocate for Sexual Assaults. The department head then immediately contacts the FCI Pekin facility to be placed in contact with the inmate and begin advocacy processes.

BOP FCI, Office of the Associate Warden, Memorandum for PREA Documentation, Subject: PREA Standard 115.21(c)-2, states FCI Pekin transports inmates to OSF Saint Francis Medical Center in the event of a medical emergency, sexual abuse examination or health concerns that require further evaluation.

On August 21, 2021 at 10:29 am, the Auditor phoned OSF Saint Francis Medical Center at 309.655.2000. This Auditor spoke to the Charge Nurse Lauren N. who explained the OSF has an agreement with surrounding facilities and they serve as transfer center. The Charge Nurse stated the OSF Saint Francis Medical Center does have a SAFE/SANE unit and they would care for inmates from the FCI Pekin.

- (d) The FCI Pekin PAQ states the facility attempts to make a victim advocate from a rape crisis center available to the victim, in-person or by other means. All efforts are documented. If a rape crisis center is not available to provide victim advocate services, the facility provides a qualified staff or community member. BOP Program Statement 5324.12, page 23, section 115.21 (d), states, “The agency shall attempt to make available to the victim a victim advocate from a rape crisis center. If a rape crisis center is not available to provide victim advocate services, the agency shall make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member. Agencies shall document efforts to secure services from rape crisis centers. For the purpose of this standard, a rape crisis center refers to an entity that provides intervention and related assistance, such as the services specified in 42 U.S.C. 14043g(b)(2)(C), to victims of sexual assault of all ages. The agency may utilize a rape crisis center that is part of a governmental unit as long as the center is not part of the criminal justice system (such as a law enforcement agency) and offers a comparable level of confidentiality as a nongovernmental entity that provides similar victim services.” “The Institution PREA Compliance Manager, with the assistance of Psychology Services, attempts to enter into agreement with a rape crisis center to make available a victim advocate to inmates being evaluated for the collection of forensic evidence. If an agreement is not reached, efforts must be documented. Properly trained Psychology or Chaplaincy Services staff members may provide victim services locally, if a rape crisis center is not available.”

The facility provided three personnel Certificates of Completion: Forensic Medical Exams, dated June 10, 2015, February 16, 2021, March 15, 2021. The facility also provided Psychologist credentials for two of the three above personnel.

- (e) The FCI Pekin PAQ states a qualified staff or community member accompanies and supports the victim through the forensic medical examination process and investigatory interviews and provides emotional support, crisis intervention, information and referrals. FCI Pekin policy, BOP Program Statement 5324.12, page 23, section 115.21 (e), states, “As requested by the victim, the victim advocate, qualified agency staff member, or qualified community-based organization staff member shall accompany and support the victim through the forensic medical examination process and investigatory interviews and shall provide emotional support, crisis intervention, information, and referrals.” “Victim advocates from the community used by the Bureau are preauthorized by the agreement established in section (d). The victim advocate serves as emotional and general support, navigating the inmate through the treatment and evidence collection process. The victim advocate has access to the inmate similar to that of medical staff at the facility. He/she is not authorized to make decisions regarding inmate care, or interfere with escort procedures as outlined in the Program Statement Escorted Trips.”

The facility provided a BOP FCI, Office of the Associate Warden, Memorandum for PREA Documentation, Subject: PREA Standard 115.21(e)-1 which states, “In the last 12 months, FCI Pekin has had zero instances of a victim advocate, qualified agency staff member, or qualifies community-based organizations staff member to accompany and support the victim through the forensic medical examination process and investigatory interview and provide emotional support, crisis intervention information and referrals.

- (f,g,h) The FCI Pekin PAQ states the agency is responsible for Administrative and Criminal investigations. The agency does request provision a-e of this standard are considered when conducting all investigations. FCI Pekin policy, BOP Program Statement 5324.12, page 24, section 115.21 (f-h), states, “To the extent the agency itself is not responsible for investigating allegations of sexual abuse, the agency shall request that the investigating agency follow the requirements of paragraphs (a) through (e) of this section. The requirements of paragraphs (a) through (f) of this section shall also apply to:

1. Any State entity outside of the agency that is responsible for investigating allegations of sexual abuse in prisons or jails; and,
2. Any Department of Justice component that is responsible for investigating allegations of sexual abuse in prisons or jails.
3. For the purposes of this section, a qualified agency staff member or a qualified community-based staff member shall be an individual who has been screened for appropriateness to serve in this role and has received education concerning sexual assault and forensic examination issues in general.

A qualified agency staff member meets the education requirement of this section by virtue of his/her degree or vocational training, or through specialized training offered by the Bureau.

The Agency provided a Memorandum of Understanding Between the Federal Bureau of Investigation and The Federal Bureau of Prisons on Violations of Federal Criminal Statutes, which states, “the purpose of this Memorandum of Understanding (MOU) is to establish interagency operational procedures and guidelines for the Federal Bureau of Investigation (FBI) and Federal Bureau of Prison (BOP) with regard to violations of federal criminal statutes occurring in BOP facilities, on BOP property or which involve OP staff.”

The Agency provided a U.S. DOJ, FBI letter addressed to the Assistant Director, Program Review Division which states, “...the FBI does not operate any confinement facilities for which the

regulations apply, nor does the FBI conduct administrative investigations of officials employed by any agency that operates such facilities. Though rare, relative to the scope and nature of other matters handled by the agency, the FBI does pursue criminal investigations related to sexual assault in BOP facilities pursuant to the Memorandum of Understanding, executed in August 1996, which defined the respective roles and responsibilities of the BOP and the FBI when a federal crime occurs in a BOP facility. Nevertheless, I am pleased to confirm that the FBI policy, training, and practice comply with the implementing regulations to the extent those regulations apply to the FBI.”

The Agency provided DOJ/OIG PREA Training Topic List, titled Part 1: PREA Presentation and Part 2: Case Studies and Lessons Learned, each encompassing relevant information regarding PREA definitions and directives of the investigative processes.

The Agency provided the following link to the Federal Bureau of Investigation Domestic Investigations and Operations Guide (DIOG).

<http://vault.fbi.gov/FBI%20Domestic%20Investigations%20and%20Operations%20Guide%20%28DIOG%29>

The Agency provided Lesson Plan: Forensic Medical Examinations: An Overview for Victim Advocates. The lesson plan references U. S. Department of Justice (2004), A National Protocol for Sexual Assault Medical Forensic Examination, Adults/Adolescents. Washington, D.C.: Office on Violence Against Women

5. The Agency provided an email containing certification from the Office of the Inspector General for their agents receiving PREA training. This email is addressed to a PREA Auditor on January 14, 2014. This Auditor requested an updated email. A current Forensic Medical Exam: An Overview for Victim Advocates PEK roster was received post audit and demonstrates 14 staff completed training between 1998 and 2021.

The Facility provided a BOP FCI, Office of the Associate Warden, Memorandum for PREA Documentation, Subject: PREA Standard 115.21(f)-1 stating, “FCI Pekin conducts both criminal and administrative investigations. Should the need arise, The Federal Bureau of Investigation (FBI) or the Office of the Inspector General (OIG) are involved. Investigations are done in conduction with the Special Investigative Services (SIS) and coordinated by the SIS Lieutenant or Captain. FCI Pekin defers to Program Statement 1350.01, Criminal Matter Referrals, for policy regarding criminal referrals.

Through such reviews, the facility meets this standards requirements.

Standard 115.22: Directives to ensure referrals of allegations for investigations

115.22 (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

115.22 (b)

- Does the agency have a directive and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior? Yes No
- Has the agency published such directive on its website or, if it does not have one, made the directive available through other means? Yes No
- Does the agency document all such referrals? Yes No

115.22 (c)

- If a separate entity is responsible for conducting criminal investigations, does the directive describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).) Yes No NA

115.22 (d)

- Auditor is not required to audit this provision.

115.22 (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*)

Document Review:

1. FCI Pekin PAQ
2. BOP 5324.12, Program Statement, dated June 4, 2015: Sexually Abusive Behavior Prevention and Intervention Program
3. Office of the Attorney General, Memorandum for Department of Justice Employees, dated April 12, 2002, Subject: Duty to Report Misconduct and Cooperate with Investigators
4. Rules and Regulations Department of Justice 28 CFR Parts 0 and 45. Instruction on Reporting Violations to the Office of the Inspector General and the Office of Professional Responsibility; Delegations of Authority, dated Friday, September 15, 2006.
5. BOP Program Statement 5508.02, dated December 12, 1996. Section: Hostage Saturations or Criminal Actions Requiring FBI Presence

Interviews:

1. Random Inmates
2. Targeted Inmates
3. FCI Correctional and Non-Correctional Officers
4. Supervisory staff
5. Facility Investigators

Inmate and staff interviews demonstrated each can report incidents of sexual abuse and sexual harassment through the grievance process, placing a note in the grievance boxes available, reporting to staff or utilizing the hotline. Each stated being comfortable reporting incidents of sexual harassment and assault. Staff reported all allegations of sexual abuse or sexual harassment are documented in the electronic Rite Track database.

Site Review Observation:

1. Investigation (*referred for criminal investigation*)

There were six administrative investigations reported in the last 12 months. Of those six investigations, all were reported timely with the victim and perpetrator separated immediately following the allegation and completed within 30 days.

115.22

- (a) The FCI Pekin PAQ states the agency insures that an administrative or criminal investigations are completed for all allegations of sexual abuse and sexual harassment. In the past 12 months the facility has had 18 allegations of sexual abuse and sexual harassment that were received. In the past 12 months 6 allegations resulted in an Administrative Investigation.

FCI Pekin policy, BOP Program Statement 5324.12, page 24, section 115.22 (a), states, "The agency shall ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment."

- (b) The FCI Pekin PAQ states the agency has policy that requires allegations of sexual abuse or harassment to be referred for investigation to an agency with the legal authority to conduct criminal investigations. FCI Pekin policy, BOP Program Statement 5324.12, page 24, section 115.22 (b), states, "The agency shall have in place a policy to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior. The agency shall publish such policy on its Web site or, if it does not have one, make the policy available through other means. The agency shall document all such referrals." "Under this section, criminal investigations are referred consistent with the Program Statement Criminal Matter Referrals."

The Agency provided an Office of the Attorney General, Memorandum for Department of Justice Employees which states, "As employees of the U.S. Department of Justice, we share a responsibility to hold ourselves to the highest standards of conduct. In this regard, I want to remind all Department employees of their obligation to report allegations of criminal or administrative misconduct, waste, fraud, and abuse involving Department of Justice employees or programs. In July 2001, I expanded the Office of the Inspector General's (OIG's) jurisdiction to include investigating allegations made against employees in the Federal Bureau of Investigation and the Drug Enforcement Administration. Consequently, the OIG now has the authority to conduct criminal and administrative investigations throughout the Department.

The Agency provided Rules and Regulations Department of Justice 28 CFR Parts 0 and 45. Instruction on Reporting Violations to the Office of the Inspector General and the Office of Professional Responsibility; Delegations of Authority, dated Friday, September 15, 2006.

The Agency provided a BOP Program Statement 5508.02, Subject: Hostage Situations or Criminal Actions Requiring FBI Presence which states, "Purpose and Scope: To implement procedures for the Memorandum of Understanding (MOU) signed on October 25 and 25, 1996, between the Federal Bureau of Prison (Bureau) and Federal Bureau of Investigation (FBI) concerning successful resolution of hostage situations or criminal actions which require FBI presence at Bureau facilities.

- (c) FCI Pekin policy, BOP Program Statement 5324.12, page 24, section 115.22 (c-e), states, "
- (a) If a separate entity is responsible for conducting criminal investigations, such publication shall describe the responsibilities of both the agency and the investigating entity.
 - (b) Any State entity responsible for conducting administrative or criminal investigations of sexual abuse or sexual harassment in prisons or jails shall have in place a policy governing the conduct of such investigations.
 - (c) Any Department of Justice component responsible for conducting administrative or criminal investigations of sexual abuse or sexual harassment in prisons or jails shall have in place a policy governing the conduct of such investigations.

Through such reviews, the facility meets this standards requirements.

TRAINING AND EDUCATION

Standard 115.31: Employee training

115.31 (a)

- Does the agency train all employees who may have contact with inmates on its zero-tolerance directive for sexual abuse and sexual harassment? Yes No
- Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response Directives and procedures? Yes No
- Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment Yes No
- Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment? Yes No
- Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement? Yes No
- Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims? Yes No
- Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse? Yes No
- Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates? Yes No
- Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates? Yes No
- Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities? Yes No

115.31 (b)

- Is such training tailored to the gender of the inmates at the employee's facility? Yes No
- Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa? Yes No

115.31 (c)

- Have all current employees who may have contact with inmates received such training?
 Yes No
- Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment Directives and procedures? Yes No
- In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment Directives? Yes No

115.31 (d)

- 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*)

Document Review:

1. FCI Pekin PAQ
2. BOP 5324.12, Program Statement, dated June 4, 2015: Sexually Abusive Behavior Prevention and Intervention Program
3. Sexually Abusive Behavior Preventing & Intervention Program Annual Training, dated 2014
4. Annual Training 2021; Sexually Abusive Behavior Prevention and Intervention Program, PowerPoint
5. Annual Training Agenda, dated 2021
6. PREA Training Acknowledgments
7. Training Sign-in Sheets
8. BLI/Video Portion of Annual Training 2021 Acknowledgments
9. PEK FCI Institution Supplement 5232.12A, dated June 23, 2020. Subject: Sexually Abusive Behavior Prevention and Intervention Program
10. Introduction to Correctional Techniques Phase 1 – Lesson: Tab: Sexually Abusive Behavior Prevention and Intervention Program, dated July 2013

Interviews:

1. FCI Correctional and Non-Correctional Officers
2. Human Resource Manager
3. Human Resource Assistant

Interviews:

Interviews with random and targeted staff demonstrated each were aware of and received initial and booster training annually or annual PREA training. Each stated one-year training occurred online and the next year training was conducted in-person.

Site Observation:

Review of personnel files demonstrated staff had received PREA training upon hire and annually thereafter.

115.31

(a) The FCI Pekin PAQ states the agency trains all employees who may have contact with Inmates in all required provisions of this standard. FCI Pekin policy, BOP Program Statement 5324.12, page 24-25, section 115.31 (a), states, "The agency shall train all employees who may have contact with inmates on:

- (1) Its zero-tolerance policy for sexual abuse and sexual harassment;
- (2) How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures;
- (3) Inmates' right to be free from sexual abuse and sexual harassment;
- (4) The right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment;
- (5) The dynamics of sexual abuse and sexual harassment in confinement;
- (6) The common reactions of sexual abuse and sexual harassment victims;
- (7) How to detect and respond to signs of threatened and actual sexual abuse;
- (8) How to avoid inappropriate relationships with inmates;
- (9) How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates; and
- (10) How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.

Staff training includes a component on crime scene preservation for first responders, taking into consideration the physical design of the institution, as indicated in section 115.64."

The facility provided a PowerPoint training, inclusive of areas 1-10 above. In addition, the facility provided PREA Training Acknowledgments in relation to Program Statement 5324.12, Sexually Abusive Behavior Prevention and Intervention Program.

The facility provided:

- Annual Training 2021 - Sexually Abusive Behavior Prevention and Intervention Program, PowerPoint
- Annual Training Agenda for 2021
- Samples of personnel annual training acknowledgments and annual training sign-in sheets.
- BLU/Video Portion of Annual Training 2021 Acknowledgments
- A BOP FCI Institution Supplement, explaining Agency initiatives on Sexually Abusive Behavior Prevention and Intervention Program
- Introduction to Correctional Techniques Phase 1 – Lesson: Tab: Sexually Abusive Behavior Prevention and Intervention Program, dated July 2013, was provided during post audit.

(b) The FCI Pekin PAQ states training is tailored to the unique needs and attributes and gender of Inmates at the facility. FCI Pekin policy, BOP Program Statement 5324.12, page 25, section 115.31 (b), states, "Such training shall be tailored to the gender of the inmates at the employee's facility. The employee shall receive additional training if the employee is reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa." "Annual

refresher training takes the gender of the inmate population at each facility into account. Transferring staff members receive gender-appropriate training, as needed.”

(c) The FCI Pekin PAQ states 260 staff currently employed by the facility, who may have contact with Inmates, were trained or retrained on the PREA requirements enumerated above. Employees who have contact with inmates receive annual training. FCI Pekin policy, BOP Program Statement 5324.12, page 25-26, section 115.31 (c), states, “All current employees who have not received such training shall be trained within one year of the effective date of the PREA standards, and the agency shall provide each employee with refresher training every two years to ensure that all employees know the agency’s current sexual abuse and sexual harassment policies and procedures. In years in which an employee does not receive refresher training, the agency shall provide refresher information on current sexual abuse and sexual harassment policies.”

- **New Employees.** For new employees, a discussion of the Sexually Abusive Behavior Prevention and Intervention Program must be a part of Introduction to Correctional Techniques Phase I and Phase II. Specific staff responsibilities included in policy are outlined.
- **Current Employees.** For current staff, information about the program is included yearly as a part of Annual Training. Each Warden designates a staff member to conduct this training from the areas responsible for policy implementation (e.g., the Institution PREA Compliance Manager, or supervisory staff from Correctional Services, Psychology Services, Health Services, etc.).
- **Specialized Training.** Discipline-specific training is available at the institution level to staff who are likely to be most involved in the management and treatment of sexually abused victims and the perpetrators (Health Services staff, Psychologists, Lieutenants, etc.). Specialized training is provided to these disciplines as part of their comprehensive training. Further information on required specialized training is provided below.

(d) The FCI Pekin PAQ states the agency documents that employees who may have contact with Inmates, understand the training they have received through employee signature or electronic verification. FCI Pekin policy, BOP Program Statement 5324.12, page 25-26, section 115.31 (c), states, “The agency shall document, through employee signature or electronic verification, that employees understand the training they have received. “Participation must be documented through employee signature or electronic verification. Participation documentation will note that employees understood the training they have received. At the conclusion of the training, employees are asked to seek additional supervisory direction, if necessary, to ensure understanding of the training.”

Through such reviews, the facility meets this standards requirements.

Standard 115.32: Volunteer and contractor training

115.32 (a)

- Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency’s sexual abuse and sexual harassment prevention, detection, and response Directives and procedures? Yes No

115.32 (b)

- Have all volunteers and contractors who have contact with inmates been notified of the agency’s zero-tolerance directive regarding sexual abuse and sexual harassment and informed

how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)? Yes No

115.32 (c)

- Does the agency maintain documentation confirming that volunteers and contractors 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*)

Document Review:

1. FCI Pekin PAQ
2. BOP 5324.12, Program Statement, dated June 4, 2015: Sexually Abusive Behavior Prevention and Intervention Program
3. Signed - Contractor New/Refresher Training Agenda 8:00 am – 12:00 pm, not dated
4. Volunteer and Contractor Reporting Participant Listing. Training dates August 2019 – July 22, 2021
5. Federal Correctional Institution Pekin, IL Volunteer and Contractor Training Acknowledgments
6. U.S. DOJ, FCI Office of the Associate Warden, Memorandum for PREA Documentation, dated July 15, 2021. Subject: 115.32 (c)-1

Interviews:

1. Contracted Pharmacy Technician
2. Psychology Staff
3. Health Services Department staff

The contracted medical provider interviewed stated she served as a pharmacy technician. The contractor remembered her initial training and stated she received training on an annual basis. The contractor stated she would never have an issue confronting or stopping abuse if she witnessed such an event and stated she would report to supervisory staff once the situation was safe to do so.

115.32

- (a) The FCI Pekin PAQ states all volunteers and contractors who have contact with Inmates have been trained on their responsibilities under the agency's policies and procedures regarding sexual abuse and harassment prevention, detection, and response. 25 FCI / 73 FCP contractors and volunteers, how have contact with Inmates, have completed the required training.

BOP Program Statement 5324.12, page 26, section 115.32(a), states, "The agency shall ensure that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures.

The Facility provided

- Signed - Contractor New/Refresher Training Agenda 8:00 am – 12:00 pm, not dated

- Volunteer and Contractor Reporting Participant Listing. Training dates demonstrated August 2019 through July 22, 2021
- Federal Correctional Institution Pekin, IL signed Volunteer and Contractor Training Acknowledgments

- (b) The FCI Pekin PAQ states all volunteers and contractors who have contact with Inmates have been notified of the agency’s zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents. BOP Program Statement 5324.12, page 26, section 115.32(b), states, “The level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates, but all volunteers and contractors who have contact with inmates shall be notified of the agency’s zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents.”
- (c) The FCI Pekin PAQ states the agency maintains documentation confirming that the volunteers and contractors understand the training they have received. BOP Program Statement 5324.12, page 26, section 115.32(c), states, “The agency shall maintain documentation confirming that volunteers and contractors understand the training they have received.” “Participation must be documented through volunteer and contractor signature or electronic verification, and will indicate that the volunteer and contractor understood the training they have received. At the conclusion of the training, volunteers and contractors are asked to seek additional direction from Bureau staff, if necessary, to ensure understanding of the training.”

The facility provided a U.S. DOJ, FCI Office of the Associate Warden, Memorandum for PREA Documentation, Subject: 115.32 (c)-1, stating, “FCI Pekin has not conducted annual PREA Training for contractors and volunteers over the past 12 months due to COVID-19.” Although this memo was provided, review of contractor files revealed annual training was completed on March 21, 2021.

Through such reviews, the facility meets this standards requirements.

Standard 115.33: Inmate education

115.33 (a)

- During intake, do inmates receive information explaining the agency’s zero-tolerance directive regarding sexual abuse and sexual harassment? Yes No
- During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment? Yes No

115.33 (b)

- Within 30 days of intake, does the agency provide comprehensive education to inmates either in-person or through video regarding: Their rights to be free from sexual abuse and sexual harassment? Yes No
- Within 30 days of intake, does the agency provide comprehensive education to inmates either in-person or through video regarding: Their rights to be free from retaliation for reporting such incidents? Yes No

- Within 30 days of intake, does the agency provide comprehensive education to inmates either in-person or through video regarding: Agency Directives and procedures for responding to such incidents? Yes No

115.33 (c)

- Have all inmates received the comprehensive education referenced in 115.33(b)?
 Yes No
- Do inmates receive education upon transfer to a different facility to the extent that the Directives and procedures of the inmate's new facility differ from those of the previous facility?
 Yes No

115.33 (d)

- Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient? Yes No
- Does the agency provide inmate education in formats accessible to all inmates including those who are deaf? Yes No
- Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired? Yes No
- Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled? Yes No
- Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills? Yes No

115.33 (e)

- Does the agency maintain documentation of inmate participation in these education sessions?
 Yes No

115.33 (f)

- In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats? 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*)

Document Review:

1. FCI Pekin PAQ
2. BOP 5324.12, Program Statement, dated June 4, 2015: Sexually Abusive Behavior Prevention and Intervention Program
3. FCI Pekin Admission & Orientation Handbook, English and Spanish versions, dated January 2019
4. Documentation of Admission and/orientation (A&O) Program Involvement, dated July 7, 2013
5. U.S. DOJ Federal Bureau of Prisons FCI Memorandum for Record, Subject: November 1, 2021
6. Acknowledgement of PREA Information, not dated

Interviews:

1. Random Inmates
2. Targeted Inmates
3. FCI Correctional and Non-Correctional Officers
4. Intake staff
5. Acting Associate Warden of Programs (PREA Compliance Manager)

Interviews with the sixteen (16) Inmates targeted and random Inmates, each reported their knowledge on PREA, reporting options to staff, the grievance boxes, telling a friend, notifying a parent and the hotline numbers posted on Zero-tolerance Posters throughout the facility.

Site Observation:

Of the 49 Inmate files reviewed, each demonstrated evidence of PREA education within 72 hours of intake. In regard to 30-day training, this Auditor noted that of the 49 files reviewed, none of the inmates received additional 30-day training due to quarantine.

Training completed within 72 hours was reviewed during the on-site portion of the audit. 30-day training was requested by the facility. During the post audit phase, Acknowledgements for Receipt of Inmate Handbook on Sexual Abuse/Assault Prevention and Intervention pamphlet for 25 of the 42 inmates were received. Although rosters were also provided, acknowledgment of understanding and having an opportunity to ask questions does not seem to be evident. In addition, all names are redacted which does not allow for cross walking the inmate files reviewed. The Warden provided a memo instructing protocols to be followed for 30-day Inmate Education and a revised Inmate Acknowledgement of PREA Education.

115.33

- (a) The FCI Pekin PAQ states Inmates receive information at time of intake about the zero-tolerance policy and how to report incidents or suspicions of sexual abuse or sexual harassment. 654 Inmates admitted in the past 12 months were given information at intake. BOP Program Statement 5324.12, page 26, section 115.33(a), states, "During the intake process, inmates shall receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment." "The Bureau's Admission and/orientation (A&O) Pamphlet on Sexually Abusive Behavior Prevention and Intervention is provided to each inmate at intake screening. It describes the key elements of the program and informs inmates of the Bureau's zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents of sexual abuse. It also provides inmates notice that male and female staff routinely work and visit inmate housing areas. This pamphlet is available to staff on the PREA Sallyport site."

The facility provided FCI Pekin Admission & Orientation Handbook. The Handbook is in both English and Spanish. The Handbook explains:

- How to Prevent;

- Reporting (internally and externally) with an address to the Office of Inspector General (OIG); email instructions to the OIG through the TRULINCS Request to Staff tab and such emails are not traced and are confidential
- what inmates can do next steps if sexually assaulted
- Third Party Reporting
- Understanding the Investigative Process
- Counseling Programs for Victims of Sexually Abusive Behavior
- Management Program for Inmate Assailants
- Policy and Definitions

During the on-site and post audit phases, inmate 30-day education was requested by the facility. During the post audit phase, Inmate Acknowledgements for Receipt of Inmate Handbook on Sexual Abuse/Assault Prevention and Intervention pamphlet for 25 of the 42 inmates were received. Although additional rosters were also provided, inmate acknowledgment does not seem to be evident. In addition, all names on the rosters are redacted which does not allow for cross walking inmate files reviewed. The Acting Warden provided a memo instructing staff to implement new protocols to ensure 30-day Inmate Education and a revised Inmate Acknowledgement of PREA Education be implemented.

- (b) The FCI Pekin PAQ states within the past 12 months, 654 inmates received age appropriate PREA education within 30 days of intake. BOP Program Statement 5324.12, page 27, section 115.33(b), states, "Within 30 days of intake, the agency shall provide comprehensive education to inmates either in-person or through video regarding their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents, and regarding agency policies and incidents." "During the A&O Program, a staff member, designated by the Warden, presents the Sexually Abusive Behavior Prevention and Intervention Program. This presentation must include:
- Definitions of sexually abusive behavior and sexual harassment.
 - Prevention strategies the inmate can take to minimize his/her risk of sexual victimization while in BOP custody.
 - Methods of reporting an incident of sexually abusive behavior against oneself, and for reporting allegations of sexually abusive behavior involving other inmates, including reporting procedures directly to Regional Staff, if desired.
 - Methods of reporting an incident of sexual harassment against oneself, and for reporting allegations of sexual harassment involving other inmates.
 - Treatment options and programs available to inmate victims of sexually abusive behavior and sexual harassment.
 - Monitoring, discipline, and prosecution of sexual perpetrators.
 - Notice that male and female staff routinely work and visit inmate housing areas.

In addition, where inmates do not participate in a formal A&O program (e.g., WITSEC, pretrial, or SHU inmates), the Warden designates a staff member to ensure these inmates receive information on the Bureau's Sexually Abusive Behavior Prevention and Intervention Program within 30 days of intake. This is documented in the same manner as for inmates who participated during the regularly scheduled A&O session.

- (c) The FCI Pekin PAQ states of those who were not educated during 30 days of intake, all inmates have been educated subsequently. BOP Program Statement 5324.12, page 27, section 115.33(c), states, "Current inmates who have not received such education shall be educated within one year of the effective date of the PREA standards, and shall receive education upon

transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility."

- (d) The FCI Pekin PAQ states Inmate PREA education is available in accessible formats for all inmates including those who are limited English proficient, deaf, visually impaired, otherwise disabled or have limited reading skills. BOP Program Statement 5324.12, page 27, section 115.33(d), states, "The agency shall provide inmate education in formats accessible to all inmates, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to inmates who have limited reading skills."
- (e) The FCI Pekin PAQ states the facility maintains documentation of inmate participation in PREA education sessions. BOP Program Statement 5324.12, page 28, section 115.33(e), states, "The agency shall maintain documentation of inmate participation in these education sessions." "The A&O forms are filed in the Inmate Central File or pretrial/holdover files."

The Agency provided documentation of A&O Program Involvement, which states, "Staff must document that the inmate has received a copy of the institution's inmate handouts and has completed the institution's A&O Program. Staff will have the inmate sign and date a copy of this document. The original document is to be placed in the Inmate's Central File. Completion of A&O programming will be documented on both the Institution A&O Checklist from (BP-S518) and the Unit A&O Checklist form (BP-S597).

- (f) The FCI Pekin PAQ states The agency ensures that key information about the agency's PREA policies is continuously and readily available or visible through posters, inmate handbooks, or other written formats. BOP Program Statement 5324.12, page 28, section 115.33(f), states, "In addition to providing such education, the agency shall ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats." "In each housing unit, the following will be posted:
 - A notice to inmates stating, "Male and female staff routinely work and visit inmate housing areas."
 - A poster reflecting the BOP's zero-tolerance for sexual abuse and harassment and contact information for inmate reporting of sexual abuse allegations.

Through such reviews, the facility meets this standards requirements.

Standard 115.34: Specialized training: Investigations

115.34 (a)

- In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive 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 115.21(a).) Yes No NA

115.34 (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 115.21(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 115.21(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 115.21(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 115.21(a).) Yes No NA

115.34 (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 115.21(a).) Yes No NA

115.34 (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*)

Document Review:

1. FCI Pekin PAQ
2. BOP 5324.12, Program Statement, dated June 4, 2015: Sexually Abusive Behavior Prevention and Intervention Program
3. Course Completion roster for PREA Investigating Sexual Abuse in a Confinement Setting (NIC) (NIC-5137-BXXX) PEK, dated 05/04/2020-05/04/2021

Interviews:

1. Facility Investigators
2. Staff Investigative Services Lieutenant

Interviews with facility investigators, the Staff Investigator Lieutenant and personnel file review demonstrated that each investigator interviewed had completed annual investigator training. Each investigator interviewed clearly articulated their role in an investigation and process steps to be taken as is described in the facility flow chart.

115.34

- (a) The FCI Pekin PAQ states the agency policy requires that investigators are trained in conducting sexual abuse investigations in confinement settings. BOP Program Statement 5324.12, page 27, section 115.34(a) states, "In addition to the general training provided to all employees pursuant to §

115.31, the agency shall ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators have received training in conducting such investigations in confinement settings.”

The Chief of Correctional Services ensures his/her Special Investigative Supervisor/Special Investigative Agents are appropriately trained under this section. The Chief of the Office of Internal Affairs ensures his/her staff are appropriately trained under this section.

The facility provided a Course Completion roster for PREA Investigating Sexual Abuse in a Confinement Setting through the National Institute of Corrections. There are total of five investigators shown as completing the training from May 2020 through May 2021. (b-d) The FCI Pekin PAQ states the agency maintains documentation showing that investigators have completed the required training. BOP Program Statement 5324.12, page 27, section 115.34(b-d) states,

(b) “Specialized training shall include techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral.”

“The Bureau trains on the rights and warnings applicable in the Federal sector, and as referenced in the Master Agreement.”

- (c) The FCI Pekin PAQ states the agency shall maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations.”

Through such reviews the facility exceeds this standards requirements.

Standard 115.35: Specialized training: Medical and mental health care

115.35 (a)

- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.) Yes No NA
- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.) Yes No NA
- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.) Yes No NA
- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or suspicions of sexual abuse and sexual harassment? (N/A if the agency does not have any full-

or part-time medical or mental health care practitioners who work regularly in its facilities.)

Yes No NA

115.35 (b)

- If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.)
 Yes No NA

115.35 (c)

- Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.) Yes No NA

115.35 (d)

- Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)
 Yes No NA
- Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.) 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*)

Document Review:

1. FCI Pekin PAQ
2. BOP 5324.12, Program Statement, dated June 4, 2015: Sexually Abusive Behavior Prevention and Intervention Program
3. BOP Required PREA and Psychology Services Training worksheet not dated
4. Course Completion for PREA for Medical and Mental Health Care – BOP, dated July 15, 2021

Interviews:

1. Contracted Pharmacy Technician
2. Health Services Department Staff
3. Psychologist

During interviews the Pharmacy Technician and Psychologist each were able to demonstrate procedural steps to follow during a sexual abuse investigation. Each could articulate how they would ensure the inmate understood the processes, how to notify the proper authorities, the SANE/SAFE hospital being used and that each occurrence would be documented in the medical database used by mental health staff.

Site Observation:

During file review of the medical and mental health staff training records, each had completed specialized medical and mental health training as well as annual training thereafter.

115.35

(a) The FCI Pekin PAQ states the agency has a policy related to the training of medical and mental health practitioners who work regularly in its facilities. 100% of FCI Pekin medical and mental health staff who work at the facility have received training required by agency policy. BOP Program Statement 5324.12, page 27-28, section 115.35(a) states, "The agency shall ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in:

1. How to detect and assess signs of sexual abuse and sexual harassment;
2. How to preserve physical evidence of sexual abuse;
3. How to respond effectively and professionally to victims of sexual abuse and sexual harassment; and
4. How and to whom to report allegations or suspicions of sexual abuse and sexual harassment.

The Health Services Division ensures medical staff are appropriately trained under this section. The Reentry Services Division ensures mental health staff are appropriately trained under this section.

Please note, training under this section does **not** refer to certifications needed to conduct forensic examinations.

The Agency provided a Course Completion for PREA for Medical and Mental Health Care to include links for training and videos mandated for training.

(b) The FCI Pekin PAQ states their medical staff do not conduct forensic medical exams. FCI Pekin policy BOP Program Statement 5324.12, page 28, section 115.35(b) states, "If medical staff employed by the agency conduct forensic examinations, such medical staff shall receive the appropriate training to conduct such examinations."

(c) The FCI Pekin PAQ states the agency maintains documentation showing that medical and mental health practitioners have completed the required training. BOP Program Statement 5324.12, page 28, section 115.35(b) states, "The agency shall maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere. Medical and mental health care practitioners shall also receive the training mandated for employees under § 115.31 or for contractors and volunteers under §115.32, depending upon the practitioner's status at the agency."

Through such reviews the facility meets the standard requirements.

SCREENING FOR RISK OF SEXUAL VICTIMIZATION AND ABUSIVENESS

Standard 115.41: Screening for risk of victimization and abusiveness

115.41 (a)

- Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates? Yes No
- Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates? Yes No

115.41 (b)

- Do intake screenings ordinarily take place within 72 hours of arrival at the facility?
 Yes No

115.41 (c)

- Are all PREA screening assessments conducted using an objective screening instrument?
 Yes No

115.41 (d)

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?
 Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?
 Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child? Yes No

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes? Yes No

115.41 (e)

- In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency, prior acts of sexual abuse? Yes No
- In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency, prior convictions for violent offenses? Yes No
- In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency, history of prior institutional violence or sexual abuse? Yes No

115.41 (f)

- Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening? Yes No

115.41 (g)

- Does the facility reassess an inmate's risk level when warranted due to a referral? Yes No
- Does the facility reassess an inmate's risk level when warranted due to a request? Yes No
- Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse? Yes No
- Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness? Yes No

115.41 (h)

- Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section? Yes No

115.41 (i)

- Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates? 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*)

Document Review:

1. FCI Pekin PAQ
2. BOP 5324.12, Program Statement, dated June 4, 2015: Sexually Abusive Behavior Prevention and Intervention Program
3. Federal Bureau of Prisons Intake Screening Forms, dated September 2017 – June 2021
4. Email Instructing PEK Units Iowa & Missouri on Re-Assessments, dated April 20, 2021
5. Attachment A: PREA Intake Objective Instrument, dated January 6, 2014
6. U.S. DOJ, BOP Reentry Services Division Memorandum from Assistant Director of Reentry Services Division, dated September 11, 2021

Interviews:

1. Intake staff
2. Psychology staff

Interviews with intake and psychology staff demonstrated that risk assessments are completed with each Inmate within 72 hours of admission. Intake and Psychology staff stated that the inmate risk level is communicated to Mental Health, Medical and departmental staff on a need to know basis.

Site Observation:

During review of 49 inmate files, this Auditor noted each inmate had received screening within 72 hours of admission, primarily on the day of admission. Of the 49 files reviewed, no inmate was reassessed within 30 days of admission; however, inmates involved in an allegation of sexual harassment or abuse were reassessed and housed properly thereafter.

115.41

- (a) The FCI Pekin PAQ states the facility has a policy that requires screening, upon admission or transfer, for risk of sexual abuse victimization or sexual abusiveness toward other Inmates. In the past 12 months 654 inmates whose length of stay was longer than 72 hours, were screened for risk of sexual victimization or risk of sexually abusing other Inmates within 72 hours of their entry into the facility.

BOP Program Statement 5324.12, page 29-30, section 115.41(a) states, "All inmates shall be assessed during an intake screening and upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates."

All inmates entering an institution are screened as directed by Health Services, Psychology Services, and Unit Management policies. Further information on intake mental health screenings is in section 115.81, below. The following steps should be taken:

- Inmates with a history of sexual victimization while in BOP custody. When, during the intake screening process, staff identify inmates with a history of sexual victimization within BOP custody (e.g., from self-report or from review of available documents, such as judgment and commitment orders, criminal records, pre-sentence investigation reports, Inmate Central File data, etc.), they must refer the inmate to Psychology Services. If not previously documented on BOP records, staff must notify the Chief of Correctional Services of the inmate's report of victimization to ensure that appropriate steps (investigation, documentation, CIMS concerns, etc.) have been taken. The Chief of Correctional Services also updates any current SENTRY STG assignment pertaining to the alleged victim.
- Inmates with a history of sexual victimization while in a non-BOP setting. If victimization occurred in a non-BOP setting, staff should document information, and appropriate psychological treatment and monitoring will be provided if needed.
- Inmates with a history of sexual predation. When, during the intake screening process, staff identify inmates with a history of sexual predation (e.g., from self-report or from review of available documents such as judgment and commitment orders, criminal records, pre-sentence investigation reports, Inmate Central File data, etc.), staff must refer the inmate to Psychology Services.

If incidents of sexual predation have not previously been documented on BOP records, staff must notify the Chief of Correctional Services of the inmate's history of predation to ensure that appropriate steps (investigation, documentation, CIMS concerns, etc.) have been taken. The Chief of Correctional Services also updates a current SENTRY STG assignment pertaining to the alleged perpetrator. In addition, inmates identified as perpetrators will be included in the Posted Picture file, pursuant to policy."

- (b) The FCI Pekin PAQ states the number of inmates entering the facility (either through intake or transfer) within the past 12 months (whose length of stay in the facility was for 72 hours or more) who were screened for risk of sexual victimization or risk of sexually abusing other inmates with 72 hours of their entry into the facility was 654. The FCI Pekin PAQ states the facility conducts risk assessments by using an objective screening instrument. BOP Program Statement 5324.12, page 30-31, section 115.41(b) states, "Intake screening shall ordinarily take place within 72 hours of arrival at the facility."
- (c) The FCI Pekin PAQ states the risk assessment is conducted using an objective screening instrument. BOP Program Statement 5324.12, page 30, section 115.41(c) states, "Such assessments shall be conducted using an objective screening instrument."

Staff are required to use the Bureau's Program Statement Intake Screening, which outlines issues and steps to take during the intake screening process generally, including issues

concerning sexual abuse and sexual assault. The Unit Team uses the Intake Screening Form during the intake process.

To complete the Intake Screening Form, the staff must use the PREA Intake Objective Screening Instrument, Attachment A, for guidance. The PREA Intake Objective Screening Instrument encompasses all factors listed in section (d) of this subsection. Ample copies of the PREA Intake Objective Screening Instrument will be maintained in the area of the institution where intake is conducted by Unit Management.

The PREA Intake Objective Screening Instrument should be completed using only information available to staff at the time of intake, and with the purpose of referring the inmate for further assessment if needed.

After applying the criteria on the PREA Intake Objective Screening Instrument, staff complete the "Intake Screening Form" and must note any specific information in the comment section applicable to victimization or abusiveness. If none of the PREA Intake Screening Objective Instrument criteria apply, staff make an entry stating, "No apparent PREA criteria met," in the comment section applicable to victimization or abusiveness.

If further assessment is needed after documenting and applying the criteria, an inmate is considered "at-risk" until a final determination is made by Psychology Services or Correctional Services. Referrals to Psychology Services or Correctional Services are documented at the local level.

Inmates are encouraged to disclose as much information as possible for the agency to provide the most protection possible under this policy. If an inmate chooses not to respond to questions relating to his/her level of risk, he/she may not be disciplined, as described in section (h) of this subsection.

Sensitive information is limited to staff who have a need to know."

The facility provided and email addressed to PEK Units Iowa and Missouri, which states, "This is to provide clarity regarding the reassessment of the PREA risk factors for inmates transferring to another institution. When an inmate transfers from one institution to another the REA Reassessment should be conducted in INSIGHT by the Unit Team at the inmate's first Program Review Meeting at the new (transfer) facility."

(d) BOP Program Statement 5324.12, page 30-31, section 115.41(d) states, "The intake screening shall consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization:

Whether the inmate has a mental, physical, or developmental disability;
The age of the inmate;
The physical build of the inmate;
Whether the inmate has previously been incarcerated;
Whether the inmate's criminal history is exclusively nonviolent;
Whether the inmate has prior convictions for sex offenses against an adult or child;

Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming;

Whether the inmate has previously experienced sexual victimization;

The inmate's own perception of vulnerability; and

Whether the inmate is detained solely for civil immigration purposes.

Some inmates are “at risk” for victimization due to one or a combination of factors such as physical appearance (small in stature, effeminate, etc.); demeanor (weak/nonassertive, anxious, depressed); special situations (e.g., high-profile, sexual activity with a child, first-time offender); or special needs (cognitive limitations, social inadequacy, developmental disability, etc.).”

The Agency provided a memorandum from the Assistant Director of Reentry Services Division stating, “This memorandum provides additional guidance for staff to follow when conducting intake screening of inmates pursuant to the policy on Sexually Abusive Behavior Prevention and Intervention Program.” During the intake process, staff will ask inmates the following specific question, ‘Do you wish to self-identify your sexual orientation, gender identity, any disabilities, and/or self-perception of vulnerability?’

The Agency provided a PREA Intake Screening Instrument explaining Risk of Victimization Factors, Objectives Criteria and Referral Guidance.

The facility provided a large sample of completed Bureau of Prisons Inmate Screening and Psychology Services Risk of Sexual Victimization Screening forms.

- (e) BOP Program Statement 5324.12, page 31-32, section 115.41(e) states, “The initial screening shall consider prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known to the agency, in assessing inmates for risk of being sexually abusive.
- (f) The FCI Pekin PAQ states the policy requires that the facility reassess each inmate’s risk of victimization or abusiveness within a set time period, not to exceed 30 days after the inmate’s arrival at the facility, based upon any additional, relevant information received by the facility since the intake screening. The number of inmates entering the facility (either through intake or transfer) within the past 12 months (whose length of stay in the facility was for 30 days or more) who were reassessed for their risk of sexual victimization or of being sexually abusive with 30 days after their arrival at the facility based upon any additional relevant information received since intake was 572.

The BOP Program Statement 5324.12, page 31-32, section 115.41(e) states, some inmates pose a serious risk of engaging in sexually abusive behavior while in BOP custody because of their history of sexually abusive behaviors while in prison (stalking, excessive sexual preoccupation, etc.), or from the criminal history. In the case of inmates “at risk” for perpetration, Correctional Services should be notified by Psychology Services.

BOP Program Statement 5324.12, page 31-32, section 115.41(g-i) states,

- An inmate’s risk level shall be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate’s risk of sexual victimization or abusiveness. Psychology Services staff reassess the inmate’s risk level whenever warranted based upon receipt of additional relevant information (e.g., incident of sexual abuse, protective custody request, recent diagnosis of gender dysphoria, etc.).
- Inmates may not be disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section. If an inmate refuses to respond or elects not to disclose information that applies only to questions about disabilities; Gay, Lesbian, Bisexual, Transgender, Intersex (LGBTI) status; gender nonconformance; previous sexual victimization; and the inmate’s self-perception of vulnerability, he/she may not be disciplined.

- The agency shall implement appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates. Any information related to sexual victimization or abusiveness, including the information entered into the comment section of the Intake Screening Form, is limited to a need-to-know basis for staff, only for the purpose of treatment and security and management decisions, such as housing and cell assignments, as well as work, education, and programming assignments.”

Through such reviews, the facility meets this standards requirements.

Standard 115.42: Use of screening information

115.42 (a)

- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments? Yes No
- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments? Yes No
- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments? Yes No
- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments? Yes No
- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments? Yes No

115.42 (b)

- Does the agency make individualized determinations about how to ensure the safety of each inmate? Yes No

115.42 (c)

- When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the **agency** consider, on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by directive or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)? Yes No

- When making housing or other program assignments for transgender or intersex inmates, does the agency consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems?
 Yes No

115.42 (d)

- Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?
 Yes No

115.42 (e)

- Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments? Yes No

115.42 (f)

- Are transgender and intersex inmates given the opportunity to shower separately from other inmates? Yes No

115.42 (g)

- Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.) Yes No NA
- Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.) Yes No NA
- Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)
 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*)

Document Review:

1. FCI Pekin PAQ
2. BOP 5324.12, Program Statement, dated June 4, 2015: Sexually Abusive Behavior Prevention and Intervention Program
3. BOP FCI Memorandum for PREA Documentation PREA Standard 115.42(a)-1, dated July 15, 2021
4. BOP FCI Memorandum for PREA Documentation PREA Standard 115.42(e)-1, dated July 15, 2021
5. CIM Clearance and Separate Data Sheets, dated February 18, 2021
6. Form BP-A1002, Safeguarding of Inmates Alleging Sexual Abuse/Assault Allegation, not dated

Interviews:

1. Targeted Inmates
2. Random Inmates
3. FCI Correctional and Non-Correctional Officers
4. Supervisory staff
5. Intake Staff

Interviews with intake and supervisory staff demonstrated inmate risk level is communicated through the facility/agency TRUSCOPE database. Targeted and random inmates speak to the intake process being respectable. Targeted inmates and Intake staff state upon admission, same sex staff search same sex inmates. Inmates preferring to be searched by opposite gender staff due to inmate identification must complete a copout request to the Warden. If the Warden has approved the inmate request the inmate will have a red square on his/her identification badge indicated such approval has been granted.

Site Observation:

During review of 49 Inmate files, this Auditor noted each inmate had received screening on the day of admission.

115.42

- (a) The FCI Pekin PAQ states the facility uses information from the risk screening required by §115.341 to inform housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive. BOP Program Statement 5324.12, page 33, section 115.42(a) states, "The agency shall use information from the risk screening required by § 115.41 to inform housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive."

Once an inmate has been identified as a victim or perpetrator, or as "at risk" for victimization or perpetration, Unit Management should review classification options. These options may include transfer to a special treatment program (e.g., Sex Offender Management Program), transfer to a greater or lesser security facility (e.g., management variable), application of a PSF (e.g., sex offender), or changes in housing units, cell assignments, work assignments, and/or education assignments."

The facility provided a Memorandum from the Warden, subject: PREA Standard 115.42(a)-1, stating, "When an inmate at FCI Pekin is determined to be at high risk of sexual victimization or sexual abusiveness, the Psychology Services department notifies the appropriate unit manager and captain via email. Additionally, a "PREA at Risk" assignment is added to TRUSCOPE which all staff have access to. Staff utilize this information when making housing, bed, work, education and program assignments with the goal of keeping these inmates separate."

- (b) The FCI Pekin PAQ states the agency/facility makes individualized determinations about how to ensure the safety of each inmate.

The facility provided CIM Clearance and Separate Data sheets demonstrating the Designations & Sentence Computation Center with the Transgender Executive Council (TEC), specifically, the initial designations and transfers of transgender inmates should be reviewed by the council. Attachments of these documents demonstrate inmates are designated as TEC and approved for assignments throughout the facility.

BOP Program Statement 5324.12, page 33, section 115.42(b) states, "The agency shall make individualized determinations about how to ensure the safety of each inmate."

- (c) The FCI Pekin PAQ states the agency/facility makes housing and program assignments for transgender, or intersex inmates in the facility on a case-by-case bases. BOP Program Statement 5324.12, page 33, section 115.42(c) states, "In deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, and in making other housing and programming assignments, the agency shall consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether the placement would present management or security problems."
- (d) BOP Program Statement 5324.12, page 33, section 115.42(d) states, "Placement and programming assignments for each transgender or intersex inmate shall be reassessed at least twice each year to review any threats to safety experienced by the inmate." The Facility provided Form BP-A1002, Safeguarding of Inmates Alleging Sexual Abuse/Assault Allegation. This form guides staff in assessing and considering all appropriate alternatives for safeguarding alleged inmate violations."
- (e) BOP Program Statement 5324.12, page 33, section 115.42(e) states, "A transgender or intersex inmate's own views with respect to his or her own safety shall be given serious consideration."

The facility provided a memorandum from the Warden, subject PREA Standard 115.43(e)-1, stating, "In the past 12 months, FCI has had zero instances of placing an inmate at high risk for sexual victimization in involuntary segregated housing after an assessment of all available alternatives had been made and a determination had been made that there was no available alternative means of separation from likely abusers."

- (f) BOP Program Statement 5324.12, page 33, section 115.42(f) states, "Transgender and intersex inmates shall be given the opportunity to shower separately from other inmates."
- (g) BOP Program Statement 5324.12, page 33, section 115.42(g) states, "The agency shall not place lesbian, gay, bisexual, transgender, or intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status, unless such placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting such inmates."

Through such reviews, the facility meets this standards requirements.

Standard 115.43: Protective Custody

115.43 (a)

- Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers? Yes No
- If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment? Yes No

115.43 (b)

- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible? Yes No
- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible? Yes No
- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible? Yes No
- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible? Yes No
- If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility *never* restricts access to programs, privileges, education, or work opportunities.) Yes No NA
- If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility *never* restricts access to programs, privileges, education, or work opportunities.) Yes No NA
- If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility *never* restricts access to programs, privileges, education, or work opportunities.) Yes No NA

115.43 (c)

- Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged? Yes No
- Does such an assignment not ordinarily exceed a period of 30 days? Yes No

115.43 (d)

- If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document the basis for the facility's concern for the inmate's safety? Yes No
- If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document the reason why no alternative means of separation can be arranged? Yes No

115.43 (e)

- In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS? 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*)

Document Review:

1. FCI Pekin PAQ
2. BOP 5324.12, Program Statement, dated June 4, 2015: Sexually Abusive Behavior Prevention and Intervention Program
3. BOP FCI Memorandum from the Warden, subject: PREA Standard 115.42(e)-1, dated July 15, 2021
4. Program Statement 3420.90, dated February 5, 1999

Interviews:

1. Targeted Inmates
2. Random Inmates
3. FCI Correctional and Non-Correctional Officers
4. Supervisory staff
5. Intake Staff

Interviews with intake and supervisory staff demonstrated inmate risk level is communicated through the facility/agency TRUSCOPE database. Through interviews this Auditor learned placement of inmates in seclusion is typically done only as a result of an allegation. Targeted inmates in and out of the Special Housing Unit spoke to receiving services while in segregation and such placement was primarily the choice of the inmate.

Site Observation:

During review of 49 inmate files, this Auditor noted each Inmate had received screening on the day of admission.

115.43

- (a) The FCI Pekin PAQ states the agency has a policy prohibiting the placement of inmates at high risk for sexual victimization in involuntary segregated housing unless and an assessment of all available alternatives has been made and a determination has been made that there is not available alternative means of separation from likely abusers. BOP Program Statement 5324.12, page 33-34, section 115.43(a) states, "Inmates at high risk for sexual victimization shall not be placed in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers. If a facility cannot conduct such an assessment immediately, the facility may hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment. Inmates are placed in administrative detention in accordance with the Program Statement Special Housing Units."

The facility provided a Memorandum from the Warden, subject PREA Standard 115.43 (e)-1, stating, "In the past 12 months, FCI Pekin has had zero instances of placing an inmate at high risk for sexual victimization in involuntary segregated housing after an assessment of all available alternative had been made and a determination had been made that there was no available alternative means of separation from likely abusers."

- (b) BOP Program Statement 5324.12, page 34, section 115.43(b) states, "Inmates placed in segregated housing for this purpose shall have access to programs, privileges, education, and work opportunities to the extent possible. If the facility restricts access to programs, privileges, education, or work opportunities, the facility shall document:

1. The opportunities that have been limited;
2. The duration of the limitation; and
3. The reasons for such limitations.

When an inmate is placed in special housing involuntarily, access to programs, privileges, education, or work should not be interrupted, to the extent possible. If they are limited, the Chief of Correctional Services ensures that documentation exists reflecting the limitation, duration, and rationale for limitation."

- (c) The FCI Pekin PAQ states the number of inmates at risk of sexual victimization who were assigned to involuntary segregated housing in the past 12 months, for longer than 30 days while awaiting alternative placement was zero. BOP Program Statement 5324.12, page 34, section 115.43(c) states, "The facility shall assign such inmates to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed a period of 30 days."

- (d) The FCI Pekin PAQ states inmates at risk of sexual victimization who were held in involuntary segregated housing in the past 12 months, the number of case files that include BOTH (a) a statement of the basis for facilities concern for the inmate's safety, and (b) the reason or reason why alternative means of separation could not be arranged was zero. BOP Program Statement 5324.12, page 34-35, section 115.43(d) states, "If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, the facility shall clearly document:

1. The basis for the facility's concern for the inmate's safety; and
- 2, The reason why no alternative means of separation can be arranged.

When determining an appropriate method of safeguarding the inmate assigned "at risk" for victimization, the Warden ensures all options are considered by completing, signing, and dating form BP-A1002, Safeguarding of Inmates Alleging Sexual Abuse/Assault Allegation. The

Warden should evaluate the least restrictive methods for separation of the alleged victim and alleged perpetrator.

The completed BP-A1002 is stamped "FOI EXEMPT" and placed in the Privacy Section of the Inmate Central File to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates. If information gathered leads to an investigation, the BP-A1002 becomes part of the investigative file. The completed form is e-mailed to BOP-CPD/PREA COORDINATOR and filed with the investigative case.

Psychologists are responsible for crisis intervention, assessment of treatment needs, documentation of the evaluation results, treatment, psychiatric referral, and other treatment options related to the alleged at-risk inmate."

The Agency provided Program Statement 3420.09, pages 2-3 and 3.i., section 2.f. stating, "Employees will immediately report at violation or apparent violation, of standards of conduct to their Chief Executive Officer, (CEO) or another appropriate authority." "Immediately report to their CEO's or other appropriate authorities, such as the Office of Internal Affairs or the Inspector General's Office, any violation or apparent violation of these standards."

- (e) The FCI Pekin PAQ states if an involuntary segregated housing assignment is made, the facility affords each such inmate a review every 30 days to determine whether there is a continuing need for separation from the general population. BOP Program Statement 5324.12, page 35, section 115.43(e) states, "Every 30 days, the facility shall afford each such inmate a review to determine whether there is a continuing need for separation from the general population. The inmate's status is reviewed during weekly Special Housing Unit meetings."

Through such reviews, the facility meets this standards requirements.

REPORTING

Standard 115.51: Inmate reporting

115.51 (a)

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

115.51 (b)

- Does the agency also provide at least one way for inmates 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 inmate reports of sexual abuse and sexual harassment to agency officials? Yes No
- Does that private entity or office allow the inmate to remain anonymous upon request? Yes No
- Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility *never* houses inmates detained solely for civil immigration purposes) Yes No NA

115.51 (c)

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

115.51 (d)

- Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates? 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*)

Document Review:

1. FCI Pekin PAQ
2. BOP 5324.12, Program Statement, dated June 4, 2015: Sexually Abusive Behavior Prevention and Intervention Program
3. BOP Sexually Abusive Behavior Prevention and Intervention, An Overview for Offenders, dated July 2018
4. BOP Memorandum, subject: PREA Standard 115.51(c)-1, dated July 15, 2021
5. BOP Memorandum, subject: PREA Standard 115.51(c)-2, dated July 15, 2021
6. Email regarding protocol for the Center for Prevention of Abuse, dated September 21, 2021. (email listing of read receipt status for 261 employees.)
7. Revised color flyers for the Center for Prevention of Abuse

Interviews:

1. FCI Correctional and Non-Correctional Officers
2. Random Inmates
3. Targeted Inmates

Staff and inmates were comfortable reporting internally to the Activities and/or Operations Lieutenants; however, neither inmates or staff interviewed informally and formally were aware of the outside advocate. Upon research, the staff realized the flyers posted for external intervention services was faded and the phone number was no longer visible. On September 21, 2021, during the on-site phase, the Acting Warden addressed an email to all staff, stating, "The Center for Prevention of Abuse has a local number available for inmate reporting. Inmates cannot dial this number so staff will need to assist in dialing this number. The number is 309.691.0551 for inmates to report abuse or other concerns. In addition, revised colored flyers for the Center for Prevention of Abuse were reposted on inmate bulletin boards. Staff and inmates interviewed stated they were comfortable verbally reporting to any staff.

Each of the six allegations of sexual harassment and/or sexual abuse were reviewed during the on-site phase. Of the inmates remaining at the facility who reported sexual harassment and/or abuse allegations believed the facility acted promptly and satisfied the allegations reported.

Site Observations:

During the tour and random inmate interviews, inmates were able to demonstrate through the inmate computer system how they could report internally to the Warden or the Activities and Operations Lieutenants.

115.51

(a) The FCI Pekin PAQ states The agency has established procedures allowing for multiple internal ways for Inmates to report privately to agency officials about sexual harassment, abuse, retaliation and/or any type of neglect. BOP Program Statement 5324.12, page 35, section 115.51(a) states, "The agency shall provide multiple internal ways for inmates to privately report sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents. Bureau inmates are encouraged to report allegations to staff at all levels, including local, regional and Central Office. They are also currently provided with avenues of internal reporting, such as telephonically to a specific department (such as the Special Investigative lieutenant), or by mail

to an outside entity. Inmates are provided information on reporting mechanisms as noted in section 115.33.”

The Agency provided the Sexually Abusive Behavior Prevention and Intervention, An Overview for Offenders handbook documenting internal and external avenues for inmate reporting of sexual abuse and/or sexual harassment.

On August 21, 2021 at 10:22 MST, the Auditor phoned the Center for Prevention of Abuse at 309.691.0551 and spoke with Operator Taylor F. who stated she was aware of the relationship between the Advocacy Center and the FCI Pekin. The Operator stated she had taken many calls and her processes were to open her Rule Binder and complete a report which is immediately forwarded to the Head Medical/Legal Advocate for Sexual Assaults. The department head then immediately contacts the FCI Pekin facility to be placed in contact with the inmate and begin advocacy processes.

- (b) The FCI Pekin PAQ states facility provides at least one way for Inmates to report abuse or harassment to a public or private entity or office that is not part of the agency. The agency has a policy requiring inmates detained solely for civil immigration purposes be provided information on how to contact relevant consular officials and relevant officials of the Department of Homeland Security.

BOP Program Statement 5324.12, page 35, section 115.51(b) states, “The agency shall also provide at least one way for inmates to report abuse or harassment to a public or private entity or office that is not part of the agency, and that is able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials, allowing the inmate to remain anonymous upon request. Inmates detained solely for civil immigration purposes shall be provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security. Inmates are provided contact information and access to the Office of the Inspector General to make such reports.”

- (c) The FCI Pekin PAQ states the agency has a policy mandating that staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously and from third parties. The agency has a policy mandating that staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously and from third parties.

BOP Program Statement 5324.12, page 35, section 115.51(c) states, “Staff shall accept reports made verbally, in writing, anonymously, and from third parties and shall promptly document any verbal reports.”

The Facility provided a Memorandum from the Warden, subject: PREA Standard 115.51(c)-1, stating, “FCI Pekin follows national policy, as dictated by Program Statement 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, mandating that staff accept reports of sexual assault and sexual harassment made verbally, in writing, anonymously and from third parties.”

The Facility provided a Memorandum from the Warden, subject: PREA Standard 115.51(c)-2, stating, “FCI Pekin has had a total of 6 PREA cases within the reviewing period, 4 of them were unsubstantiated and 2 were substantiated. Documentation will be available on-site for the PREA Auditor to review.”

- (d) The FCI Pekin PAQ states the agency has established procedures for staff to privately report sexual abuse and sexual harassment of inmates. Staff are informed of these procedures in the

following ways. "The agency shall provide a method for staff to privately report sexual abuse and sexual harassment of inmates. Staff reporting requirements are addressed in the Program Statement Standards of Employee Conduct. For the purposes of this section, staff may contact any supervisory staff at the local institution, Regional staff, or Central Office staff, including the Regional PREA Coordinators and the National PREA Coordinator. Allegations involving staff members may also be reported to the Office of Internal Affairs or the Office of the Inspector General, as appropriate.

Through such reviews, the facility meets this standards requirements.

Standard 115.52: Exhaustion of administrative remedies

115.52 (a)

- Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit directive, the agency does not have an administrative remedies process to address sexual abuse. Yes No

115.52 (b)

- Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.) Yes No NA
- Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.) Yes No NA

115.52 (c)

- Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.) Yes No NA
- Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.) Yes No NA

115.52 (d)

- Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.) Yes No NA
- If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate

decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)

Yes No NA

- At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.) Yes No NA

115.52 (e)

- Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.) Yes No NA
- Are those third parties also permitted to file such requests on behalf of inmates? (If a third-party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.) Yes No NA
- If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.) Yes No NA

115.52 (f)

- Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.) Yes No NA
- After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.) Yes No NA
- After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.) Yes No NA
- After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.) Yes No NA
- Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.) Yes No NA
- Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.) Yes No NA

- Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.) Yes No NA

115.52 (g)

- If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.) 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*)

Document Review:

1. FCI Pekin PAQ
2. BOP 5324.12, Program Statement, dated June 4, 2015: Sexually Abusive Behavior Prevention and Intervention Program
3. U.S. DOH, BOP, Program Statement 1330.18, dated January 6, 2014: Administrative Remedy Program
4. BOP Sexually Abusive Behavior Prevention and Intervention, An Overview for Offenders, dated July 2018
5. BOP Memorandum, subject: PREA Standard 115.52(d)-4, dated July 15, 2021

Interviews:

1. Random Inmates
2. Targeted Inmates
3. PREA Coordinator

Inmates interviewed were aware of the grievance procedures and understood they could complete an Administrative Remedy. In the last 12 months there were zero grievances files for sexual harassment or sexual abuse.

Site Observation:

Inmates were able to file Administrative Remedy's through the inmate computer systems, verbally tell a staff, and/or write a copout and hand to staff and/or have the Request forwarded to the Warden.

115.52

- (a) The FCI Pekin PAQ states the agency has an administrative procedure for dealing with Inmate grievances regarding sexual abuse. BOP Program Statement 5324.12, page 36, section 115.52(a) states, "See the Program Statement Administrative Remedy Program, or current version of the policy."

BOP Program Statement 1330.18, page 1, section 1 – Purpose and Scope §542.10, states, "Purpose. The purpose of the Administrative Remedy Program is to allow an inmate to seek formal review of an issue relating to any aspect of his/her own confinement. An inmate may not submit a Request or Appeal on behalf of another inmate. Inmates seeking a formal review of issues relating

to sexual abuse should use the regulations promulgated by the Department of Justice under the Prison Rape Elimination Act, 42 U.S.C. § 15606, et seq. These procedures are provided in Section 16 of this Program Statement.”

- (b) Agency policy does not require an inmate to use an informal grievance process, or otherwise to attempt to resolve with staff, an alleged incident of sexual abuse.

BOP Program Statement 1330.18, page 6, section 4. d. (1) Initial Filing §542.14, states, “Sensitive Issues. If the inmate reasonably believes the issue is sensitive and the inmate's safety or well-being would be placed in danger if the Request became known at the institution, the inmate may submit the Request directly to the appropriate Regional Director. The inmate shall clearly mark "Sensitive" upon the Request and explain, in writing, the reason for not submitting the Request at the institution. If the Regional Administrative Remedy Coordinator agrees that the Request is sensitive, the Request shall be accepted. Otherwise, the Request will not be accepted, and the inmate shall be advised in writing of that determination, without a return of the Request. The inmate may pursue the matter by submitting an Administrative Remedy Request locally to the Warden. The Warden shall allow a reasonable extension of time for such a resubmission.”

- (c) The FCI Pekin PAQ states the agency's policy and procedure allows an inmate to submit a grievance alleging sexual abuse without submitting it to the staff member who is the subject of the complaint. The agency's policy and procedure requires that an inmate grievance alleging sexual abuse not be referred to the staff member who is the subject of the complaint.

- (d) The FCI Pekin PAQ states the agency's policy and procedures that require a decision on the merits of any grievance or portion of a grievance alleging sexual abuse be made within 90 days of the filing of the grievance. In the past 12 months:
- there have been zero grievances filed alleging sexual abuse;
 - zero cases where the agency requested an extension of the 90-day period to respond to a grievance.
 - zero grievances alleging sexual abuse that involved extensions because final decision was not reached within 90 days.

The agency always notifies an inmate in writing when the agency files for an extension, including notice of the date by which a decision will be made.

The facility provided a memorandum from the Warden, subject: PREA Standard 115.52(d)-4, stating, “In the past 12 months, FCI Pekin has had zero grievances alleging sexual abuse that involved extensions because the final decisions were not reached within 90 days.”

- (e) The FCI Pekin PAQ states agency policy and procedure permits third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse and to file such requests on behalf of inmates. Agency policy and procedure requires that if an inmate declines to have third-party assistance in filing a grievance alleging sexual abuse, the agency documents the inmate's decision to decline. The number of grievances alleging sexual abuse filed by inmates in the past 12 months in which the inmate declined third-party assistance, containing documentation of the inmate's decision to decline was three. BOP Program Statement 5324.12, page 35, section 115.51(c) states, “Staff shall accept reports made verbally, in writing, anonymously, and from third parties and shall promptly document any verbal reports.”

The Agency provided the BOP Sexually Abusive Behavior Prevention and Intervention, An Overview for Offenders, which states, "File an Administrative Remedy – You can file a Request for Administrative Remedy. If you determine your complaint is too sensitive to file with the Warden, you have the opportunity to file your administrative remedy directly with the Regional Director (BP-01). You can get the forms from your counselor or other unit staff.

- (f) The FCI Pekin PAQ states the facility has a policy and established procedures for filing an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse. The facilities policy and procedures for emergency grievances alleging substantial risk of imminent sexual abuse require an initial response within 48 hours. The facilities policy and procedure for emergency grievances alleging substantial risk of imminent sexual abuse require that a final agency decision be issued within 5 days. No grievances were received alleging substantial risk of imminent sexual abuse, that were filed in the past 12 months, reached final decisions within five days.
- (g) The FCI Pekin PAQ states the facility has a written policy that limits its ability to discipline an inmate for filing a grievance alleging sexual abuse to occasions where the agency demonstrates that the Inmate filed the grievance in bad faith. In the past 12 months, there have been zero grievances alleging sexual abuse to occasions where the agency demonstrated that the Inmate filed the grievance in bad faith.

Through such reviews, the facility meets this standards requirements.

Standard 115.53: Inmate access to outside confidential support services

115.53 (a)

- Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations? Yes No
- Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility *never* has persons detained solely for civil immigration purposes.) Yes No NA
- Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible? Yes No

115.53 (b)

- Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws? Yes No

115.53 (c)

- Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse? Yes No
- Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements? 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*)

Document Review:

1. FCI Pekin PAQ
2. BOP 5324.12, Program Statement, dated June 4, 2015: Sexually Abusive Behavior Prevention and Intervention Program
3. BOP Sexually Abusive Behavior Prevention and Intervention, An Overview for Offenders, dated July 2018
4. BOP Memorandum for Regional Director North Central Regional Office, Subject: PREA – Gratuitous Services Agreement, dated February 14, 2019
5. PEK-2019-001 Agreement Between the Federal Bureau of Prisons, FC Pekin, Pekin, Illinois and The Center for Prevention of Abuse, dated March 12, 2019
6. Email regarding protocol for the Center for Prevention of Abuse, dated September 21, 2021. (email listing of read receipt status for 261 employees.)
7. Revised color flyers for the Center for Prevention of Abuse

Interviews:

1. Random Inmates
2. Targeted Inmates
3. Psychology staff

Staff and inmates interviewed informally and formally were unaware of the outside advocate. Upon research, the staff realized the flyers posted for external intervention services was faded and the phone number was no longer visible. On September 21, 2021, during the on-site phase, the Warden addressed an email to PEK-All Staff stating, “The Center for Prevention of Abuse has a local number available for inmate reporting. Inmates cannot dial this number so staff will need to assist in dialing this number. The number is 309.691.0551 for inmates to report abuse or other concerns. In addition, revised colored flyers for the Center for Prevention of Abuse were reposted on inmate bulletin boards.

Site Observation:

During the on-site phase, this Auditor recognized revised crisis intervention flyers had been posted.

115.53

- (a) The FCI Pekin PAQ states the facility provides Inmates with access to outside victim advocates for emotional support services related to sexual abuse by:

- Giving inmates (by providing, posting, or otherwise making accessible) mailing addresses and telephone numbers (including toll-free hotline numbers where available) of local, State, or national victim advocacy or rape crisis organizations.
- Giving inmates mailing addresses and telephone number (including toll-free hotline numbers where available) for immigrant services agencies for persons detained solely for civil immigration purposes; and
- Enables reasonable communication between Inmates and these organizations, in as confidential manner as possible.

BOP Program Statement 5324.12, page 36, section 115.53(a) states, “The facility shall provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations, and, for persons detained solely for civil immigration purposes, immigrant services agencies. The facility shall enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible.

The Institution PREA Compliance Manager, with the assistance of Psychology Services staff, seeks to establish an agreement with community service providers who are able to provide confidential emotional support services as it relates to sexual abuse. If an agreement is not feasible, the attempts are documented. Staff take reasonable action to ensure that information on available resources is provided to all inmates so that they have access to the Bureau’s efforts in preventing, detecting, and responding to sexual abuse and sexual harassment. Staff also provide contact information and confidential communication services, as reasonably as possible.

“Confidential” communications under this section are distinguished from privileged communications, such as in attorney-client relationship. Communications are monitored in a manner consistent with agency security practices, and should be addressed in any memorandum of understanding with the outside victim advocacy organization.”

The Agency provided Sexually Abusive Behavior Prevention and Intervention, An Overview for Offenders which includes a flyer for the Center for Prevention of Abuse Crisis Hotline, and address and local telephone number.

- (b) The FCI Pekin PAQ states the facility informs Inmates, prior to giving them access to outside support services, the extent to which such communications will be monitored. The facility informs inmates, prior to giving them access to outside support services, of the mandatory reporting rules governing privacy, confidentiality, and/or privilege that apply for disclosures of sexual abuse made to outside victim advocates, including any limits to confidentiality under relevant Federal, State, or local law.

BOP Program Statement 5324.12, page 36, section 115.53(b) states, “The facility shall inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws.”

- (c) The FCI Pekin PAQ states the facility maintains memoranda of understanding with community service providers that are able to provide inmates with emotional support services related to sexual abuse. BOP Program Statement 5324.12, page 36, section 115.53(c) states, “The agency shall maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support

services related to sexual abuse. The agency shall maintain copies of agreements or documentation showing attempts to enter into such agreements.”

The Facility provided an Agreement between The Federal Bureau of Prisons, FCI Pekin, Pekin, Illinois and The Center for Prevention of Abuse, dated March 12, 2019.

On August 21, 2021 at 10:22 MST, the Auditor phoned the Center for Prevention of Abuse at 309.691.0551 and spoke with Operator Taylor F. who stated she was aware of the relationship between the Advocacy Center and the FCI Pekin. The Operator stated she had taken many calls and her processes were to open her Rule Binder and complete a report which is immediately forwarded to the Head Medical/Legal Advocate for Sexual Assaults. The department head then immediately contacts the FCI Pekin facility to be placed in contact with the inmate and begin advocacy processes.

Through such reviews, the facility meets this standards requirements.

Standard 115.54: Third-party reporting

115.54 (a)

- Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment? Yes No
- Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate? 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*)

Document Review:

1. FCI Pekin PAQ
2. BOP 5324.12, Program Statement, dated June 4, 2015: Sexually Abusive Behavior Prevention and Intervention Program
3. Zero-tolerance Flyer, not dated
4. Agency website for Third Party reporting:
www.bop.gov/inmates/custody_and_care/sexual_abuse_prevention.jsp
5. Email from PEK-ExecAssist-S, subject: Voice a Complaint, Third Party Complaint, dated August 31, 2021

Interviews:

1. Random Inmates
2. Targeted Inmates

3. FCI Correctional and Non-Correctional Officers
4. Supervisory staff

Inmates and staff interviewed demonstrated their reporting knowledge of third party reporting stating that inmate family members, friends and/or legal counsel could report sexual harassment or sexual abuse allegations.

Site Observation:

During tours of visitation areas for both the FCI and the Camp, PREA Zero-tolerance flyers were present. Although Third Party flyers were not posted, third parties do have reporting access through the agency website.

115.54

- (a) The FCI Pekin PAQ states the facility provides a method to receive third-party reports of inmate sexual abuse or sexual harassment. The agency publicly distributes information on how to report Inmate sexual abuse or sexual harassment on behalf of Inmates. BOP Program Statement 5324.12, page 37, section 115.54(a) states, "The agency shall establish a method to receive third-party reports of sexual abuse and sexual harassment and shall distribute publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate." "The Bureau posts publicly, and maintains, the third-party reporting avenue on its public website."

The Facility provided a BOP Zero-tolerance flyer; however, the flyer does not speak to Third Party Reporting.

On August 29, 2021 at 2:01 pm MST, this Auditor accessed the web address listed in the inmate handbook, www.bop.gov/inmates/custody_and_care/sexual_abuse_prevention.jsp and found addresses available for a Third Party reports to be sent U.S. mail; however there was not an option for immediate reporting and/or Third Party Reporting Form available. This Auditor did send a request via the "Voice your inmate concerns" link as an attempt to make a Third Party Report. On August 29, 2021 at 2:03 pm MST, a response from auto-reply@bop.gov was received, which stated, "This message was generated from an automated email account on www.bop.gov. Please do not reply to this message, you will not get a response. If you have questions or concerns, please use the "Contact Us" area on the BOP website www.bop.gov/contact. TimeStamp SunAug29 1603:15EDT 2021. During the on-site phase, the Executive Assistant provided the Auditor with a response email dated August 31, 2021, stating, "Any third party can email this box. It is monitored daily and emails are routed to the appropriate person's as related to the correspondence."

Through such reviews, the facility meets this standards requirements.

OFFICIAL RESPONSE FOLLOWING AN INMATE REPORT

Standard 115.61: Staff and agency reporting duties

115.61 (a)

- Does the agency require all staff to report immediately and according to agency directive any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency? Yes No
- Does the agency require all staff to report immediately and according to agency directive any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment? Yes No
- Does the agency require all staff to report immediately and according to agency directive 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

115.61 (b)

- Apart from reporting to designated supervisors or officials, does 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 directive, to make treatment, investigation, and other security and management decisions? Yes No

115.61 (c)

- Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section? Yes No
- Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services? Yes No

115.61 (d)

- 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

115.61 (e)

- Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility'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*)

Document Review:

1. FCI Pekin PAQ
2. BOP 5324.12, Program Statement, dated June 4, 2015: Sexually Abusive Behavior Prevention and Intervention Program

Interviews:

1. Warden
2. Acting Associate Warden of Programs (PREA Compliance Manager)
3. Activity and Operations Lieutenants
4. Nurse
5. Psychologist
6. FCI Correctional and Non-Correctional Officers
7. Facility Investigators

Interviews with the Warden, PREA Coordinator, supervisory staff, investigators, Nurse, Psychologist, Correctional and Non-Correctional Staff and inmates demonstrated each actively practices and understood the importance of immediately reporting all allegations of sexual abuse and sexual harassment.

Site Observations:

Staff reporting documentation of inmate information, incident reports and investigations being completed in the facility database demonstrated reports of allegation are addressed timely. The Acting Associate Warden of Programs (PREA Compliance Manager) provided a tour of information stored within the facility database documenting completed reports and investigations regarding reported allegations. This tour demonstrated inmate information, incidents and investigations to be stored as reported.

115.61

- (a) The FCI Pekin PAQ states the agency requires all staff to report immediately and according to agency policy any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency. The agency requires all staff to report immediately and according to agency policy any retaliation against Inmates or staff who reported such an incident. The agency requires all staff to report immediately and according to agency policy any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.

BOP Program Statement 5324.12, page 37-38, section 115.61(a) states, "The agency shall 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 a facility, whether or not it is part of the agency; retaliation against inmates or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.

All staff must report information concerning incidents or possible incidents of sexual abuse or sexual harassment to the Operations Lieutenant, or, where appropriate, in accordance with the Program Statement Standards of Employee Conduct.

Staff provide a written follow-up memorandum to the Operations Lieutenant to document such a report, in accordance with Article 6 of the Master Agreement.

The Operations Lieutenant notifies the PREA Compliance Manager.

Allegations of inmate-on-inmate and inmate-on-staff sexual abuse must be entered in TRUIINTEL via the Report of Incident form (BP-A0583). Reports must indicate whether the allegation involved Abusive Sexual Contact or a Non-Consensual Sexual Act. The Institution PREA Compliance Manager will forward a copy of the BP-A0583 to the appropriate Regional PREA Coordinator; the number of BP-A0583's that pertain to inmate-on-inmate and inmate-on-staff sexual abuse will be sent to the National PREA Coordinator.

Once reported, an evaluation by the Institution PREA Compliance Manager of whether a full response protocol is needed will be made (see section 115.65).

In addition to reporting information, staff intervene as appropriate (e.g., writing an incident report), in behaviors that may subsequently lead to an incident of sexual abuse.

Staff should be aware of the following in determining what information to report:

Detection requires an awareness by staff of institution or unit climate and the reputations and behaviors of inmates – through actively paying attention to the following, for example:

- Inmate communications.
- Comments to staff.
- Posted picture files, and Correctional Services “confidential.”
- Inmate interactions.
- Changes in inmate behavior (eating, sleeping, hygiene, work habits, etc.).
- Isolated or “hot” areas of the institution.

By observing factors such as these, staff are able to better detect sexually abusive behavior, and possibly deter problems before they occur, or before they escalate.”

- (b) The FCI Pekin PAQ states, “Apart from reporting to designated supervisors or official and designated state or local service agencies, agency policy prohibits staff from revealing any information related to a sexual abuse report to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions.” BOP Program Statement 5324.12, page 38, section 115.61(b) states, “Apart from reporting to designated supervisors or officials, staff shall not reveal any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions.

The information concerning the identity of the alleged inmate victim and the specific facts of the case are limited to staff who need to know because of their involvement with the victim’s welfare and the investigation of the incident. This is important not only to preserve the victim’s privacy but to preserve maximum flexibility to investigate the allegations. It is appropriate under this section to forward reports to the Operations Lieutenant through the staff member’s supervisor.”

- (c) BOP Program Statement 5324.12, page 38, section 115.61(c) states, “Unless otherwise precluded by Federal, State, or local law, medical and mental health practitioners shall be required to report

sexual abuse pursuant to paragraph (a) of this section and to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services."

- (d) BOP Program Statement 5324.12, page 38, section 115.61(d) states, "If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons' statute, the agency shall report the allegation to the designated State or local services agency under applicable mandatory reporting laws."
- (e) BOP Program Statement 5324.12, page 38, section 115.61(d) states, "The facility shall report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators. Staff must report and respond to allegations of sexually abusive behavior, regardless of the source of the report (e.g., "third party"). "The Institution PREA Compliance Manager refers the incident for investigation to the appropriate office, and reviews the incident for any further response. As the severity of the sexually abusive behavior increases, so should the level of response."

Through such reviews, the facility meets this standards requirements.

Standard 115.62: Agency protection duties

115.62 (a)

- When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate? 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*)

Document Review:

1. FCI Pekin PAQ
2. BOP 5324.12, Program Statement, dated June 4, 2015: Sexually Abusive Behavior Prevention and Intervention Program
3. BOP Memorandum for PREA Documentation, subject: PREA Standard 116.62(a)-2, (a)-3, (a)-4, dated July 15, 2021

Interviews:

1. Acting Associate Warden of Programs (PREA Compliance Manager)
2. Facility Investigators
3. Targeted inmates

Interviews with the Acting Associate Warden of Programs (PREA Compliance Manager) and facility investigators demonstrated the facility staff acts promptly and responds properly at the discovery of the incident. Inmates interviewed who had reported allegations of abuse, concurred allegations were responded to promptly and thoroughly and were satisfied with the facilities response protocols.

Site Observation:

Review of 39 allegations revealed, where applicable, inmates were separated when appropriate or safety plans were put in place to ensure inmates remained separated. Of the 39 allegations reviewed, four were unsubstantiated and two substantiated. Of the 39 allegations, six investigations were completed within 30 days of the reported allegation.

115.62

(a) The FCI Pekin PAQ states when the agency or facility learns that an inmate is subject to a substantial risk of imminent sexual abuse, it takes immediate action to protect the Inmate. In the past 12 months, the facility reports five Inmates were subject to substantial risk of imminent sexual abuse. Upon discovery of Inmate being subject to substantial risk, the facility immediately separates the victim from the perpetrator, made notification and completed incident reporting requirements.

BOP Program Statement 5324.12, page 38-39, section 115.62(a) states, "When an agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, it shall take immediate action to protect the inmate.

In cases where the alleged perpetrator is another inmate, the Operations Lieutenant is notified immediately and immediately safeguards the inmate (which will vary depending on the severity of the alleged sexually abusive behavior and could include monitoring the situation, changing housing assignments, changing work assignment, placing alleged victim and perpetrator in Special Housing, etc.). The Operations Lieutenant promptly refers all inmates reported or suspected of being the victim of sexually abusive behavior to Psychology Services for assessment of vulnerability and treatment needs. The Operations Lieutenant also notifies the Institution PREA Compliance Manager.

If the alleged perpetrator is a staff member, all options for safeguarding the inmate should be considered as described in the above paragraph. The decisions made to safeguard the inmate should take impact on staff member into account, in accordance with the Master Agreement. Removal from the facility is an extreme measure, and other options include reassignment to another unit or post, or other measures that will effectively separate the staff member from the inmate.

If the alleged perpetrator is an inmate, and a staff member is the subject of abuse or harassment, all options for safe-guarding the staff member should be considered. Options should include reassignment of the inmate to another housing unit, writing incident reports, assignment to the Special Housing Unit, criminal prosecution if appropriate, etc., in accordance with the Program Statements Inmate Discipline Program and Special Housing Units, among other options that will effectively separate the inmate from the staff member."

The Facility provided a memorandum for PREA documentation from the Warden, subject PREA Standard 115.62(a)-2, (a)-3, (a)-4, which states, "When FCI Pekin staff learn that an inmate is subject to a substantial risk of imminent sexual abuse, they take immediate action to protect the inmate. There have been zero occurrences of this in the last 12 months."

Through such reviews the facility meets this standards requirements.

Standard 115.63: Reporting to other confinement facilities

115.63 (a)

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

115.63 (b)

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

115.63 (c)

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

115.63 (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*)

Document Review:

1. FCI Pekin PAQ
2. BOP 5324.12, Program Statement, dated June 4, 2015: Sexually Abusive Behavior Prevention and Intervention Program

Interviews:

1. Warden

The interview with the Warden demonstrated that he was aware that upon receiving an allegation that an inmate was sexually abused while confined at another facility, he had the responsibility to notify the head of the facility where the allegation occurred. The Warden supplied the following supporting documentation, during the on-site phase, demonstrating outside facilities had been contacted.

- Letters to external facilities accounting events reported by inmates to include inmate name, date of birth, and arrival date to Pekin FCI.
- Responses from external facilities acknowledging receipt and status of outcome of the external investigation.
- Inmate screening intake form
- BOP Health Services Clinical Encounter Evaluation forms
- BOP Psychology Services Sexual Abuse Intervention Referral notes and Evaluation

115.63

- (a) The FCI Pekin PAQ states the agency has a policy requiring that, upon receiving an allegation that an inmate was sexually abused while confined at another facility, the head of the facility must notify

the head of the facility or appropriate office of the agency or facility where sexual abuse is alleged to have occurred. The agency's policy also requires that the head of the facility notify the appropriate investigative agency. In the past 12 months, the facility has received six allegations that an inmate was abused while in confinement at another facility.

BOP Program Statement 5324.12, page 39, section 115.63(a) states, "Upon receiving an allegation that an inmate was sexually abused while confined at another facility, the head of the facility that received the allegation shall notify the head of the facility or appropriate office of the agency where the alleged abuse occurred.

In cases where there is an allegation that sexually abusive behavior occurred at another Bureau facility, the Warden (or his/her designee) of the victim's current facility reports the allegation to the Warden of the identified institution. In cases alleging sexual abuse by staff at another institution, the Warden of the inmate's current facility refers the matter directly to the Office of Internal Affairs. During the pre-audit phase, the Management Analyst explained that the 'acting Warden' would be the only designee for this occurrence.

For non-Bureau secure privatized facilities, jails, juvenile facilities, and Residential Reentry Centers, the Warden will contact the appropriate office of the facility, and notify the Privatization Management or the Residential Reentry Management Branches, as appropriate.

For non-Bureau facilities, the Warden (or his/her designee) contacts the appropriate office of that correctional agency.

- (b) The FCI Pekin PAQ states agency policy requires that the facility head provides such notification as soon as possible, but no later than 72 hours after receiving the allegation. BOP Program Statement 5324.12, page 39, section 115.63(b) states, "Such notification shall be provided as soon as possible, but no later than 72 hours after receiving the allegation."
- (c) The FCI Pekin PAQ states the facility documents that it has provided such notification within 72 hours of receiving the allegation. BOP Program Statement 5324.12, page 40, section 115.63(c) states, "The agency shall document that it has provided such notification."
- (d) The FCI Pekin PAQ states facility policy requires that allegations received from other agencies or facilities are investigated in accordance with the PREA standards. In the last 12 months, there have been eight allegations of sexual abuse the facility received from other facilities. BOP Program Statement 5324.12, page 40, section 115.63(d) states, "The facility head or agency office that receives such notification shall ensure that the allegation is investigated in accordance with these standards."

Through such reviews, the facility meets this standards requirements.

Standard 115.64: Staff first responder duties

115.64 (a)

- Upon learning of an allegation that an inmate was sexually abused, is the first correctional officer to respond to the report required to: Separate the alleged victim and abuser?
 Yes No

- Upon learning of an allegation that an inmate was sexually abused, is the first correctional officer 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 an inmate was sexually abused, is the first correctional officer 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 an inmate was sexually abused, is the first correctional officer 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

115.64 (b)

- If the first staff responder is not a correctional officer, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify correctional 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*)

Document Review:

1. FCI Pekin PAQ
2. BOP 5324.12, Program Statement, dated June 4, 2015: Sexually Abusive Behavior Prevention and Intervention Program

Interviews:

1. FCI Correctional and Non-Correctional Officers
2. Activities and Operations Lieutenants
3. Facility Investigators
4. Psychology staff

Interviews with all staff demonstrated each were aware of their first responder responsibilities. Staff stated reporting information is posted on bulletin boards in each living unit, through PREA reporting cards carried by staff and each staff interviewed stated reports were made to Lieutenants. Lieutenants concurred staff and inmates alike report allegations of abuse and each would respond as is designed through facility protocol.

Site Observation:

Documentation review of the allegations of sexual abuse reported, each demonstrated staff responded accurately and promptly. The facility staff are aware of the facilities detailed reporting graphs to ensure each allegation report is conducted per facility protocols.

115.64

- (a) The FCI Pekin PAQ states the agency has a first responder policy for allegations of sexual abuse. The policy requires that, upon learning of an allegation that an inmate was sexually abused, the first security staff member to respond to the report shall be required to separate, preserve, protect, collect physical evidence, 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, 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.

In the past 12 months, 39 allegations occurred where an inmate was sexually abused. Of these allegations, the number of time the first security staff member to respond to the report separated the alleged victim and abuser was 11. In the past 12 months, there were 39 allegations where staff were notified within a time period that still allowed for the collection of evidence. Of these allegations the number of times the first security staff member to respond to the report was 39.

BOP Program Statement 5324.12, page 39-40, section 115.64(a) states, "Upon learning of an allegation that an inmate was sexually abused, the first security staff member to respond to the report shall be required to:

1. Separate the alleged victim and abuser;
2. Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence;
3. If the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating; and
4. If the abuse occurred within a time period that still allows for the collection of physical evidence, ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating."

- (b) The FCI Pekin PAQ states the facility's policy requires that if the first staff responder is not a security staff member, that responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence and notify security staff. Of the allegations that an inmate was sexually abused made in the past 12 months, the number of times a non-security staff member was the first responder was 28. Of those allegations responded to first by a non-security staff member, the number of times that staff member: Requested that the alleged victim not take any actions that could destroy physical evidence and notify security staff was 28. BOP Program Statement 5324.12, page 39, section 115.64(b) states, "If the first staff responder is not a security staff member, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff.

The staff first responder must preserve the crime scene. SIS staff are responsible for collecting information/evidence. The investigation, in coordination with the agency to which the case may be referred, must follow the guidance given in agency policies and practices concerning evidence gathering and processing procedures.

Through such reviews, the facility meets this standards requirements.

Standard 115.65: Coordinated response

115.65 (a)

- Has the facility 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 an incident of sexual abuse? 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*)

Document Review:

1. FCI Pekin PAQ
2. BOP 5324.12, Program Statement, dated June 4, 2015: Sexually Abusive Behavior Prevention and Intervention Program
3. U.S. BOP, FCI Pekin Illinois, Institutional Supplement, PEK 5324.11A, dated June 23,2020, Sexually Abusive Behavior Prevention and Intervention Program

Interviews:

1. Acting Associate Warden of Programs (PREA Compliance Manager)
2. Activities and Operations Lieutenants
3. FCI Correctional and Non-Correctional Officers

Interviews with the Acting Associate Warden of Programs (PREA Compliance Manager), Activities and Operations Lieutenants and FCI Correctional and Non-Correctional Officers demonstrated the response to allegations of sexual assault is written to coordinate actions taken in response to sexual abuse and sexual harassment incidents.

Site Observation:

Review of the institutional plan demonstrates clear direction to staff to ensure first responder duties are fulfilled.

115.65

- (a) The FCI Pekin PAQ states the facility developed a written institutional plan to coordinate actions taken in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators, and facility leadership.

U.S. BOP, FCI Pekin Illinois, Institutional Supplement, PEK 5324.11A, Sexually Abusive Behavior Prevention and Intervention Program, page 3, section 6. A-D, page 7, section 7 A-C, page 5 section 8 A-B and page 6 section A, states clear directives on Notification Procedures; Responding to the Inmate Victim; and Monitoring the Inmate Perpetrator.

BOP Program Statement 5324.12A, page 40-41, section 115.65(a) states, "The facility shall

develop a written institutional plan to coordinate actions taken in response to an incident of sexual abuse, among staff first responders, medical and mental health practitioners, investigators, and facility leadership.

All staff report incidents of sexual abuse to the Operations Lieutenant (see section 115.61).

The Operations Lieutenant immediately safeguards the inmate (see sections 115.43, 115.62).

The Operations Lieutenant promptly refers all inmates reported or suspected of being the victim of sexually abusive behavior to the Health Services Unit (or the on-call clinician during non-business hours) for physical assessment and documentation of injuries (see sections 115.21, 115.82).

The Operations Lieutenant promptly refers all inmates reported or suspected of being the victim of sexually abusive behavior to Psychology Services for assessment of vulnerability and treatment needs (see section 115.82).

In addition, during business hours, the Operations Lieutenant ensures that the SIS, Chief of Correctional Services, Institution PREA Compliance Manager, and Warden are notified. During non-business hours, the Operations Lieutenant ensures that the SIS, Chief of Correctional Services, Institution PREA Compliance Manager, Duty Officer, Health Services staff, and on-call Psychologist are notified.

The Institution PREA Compliance Manager reviews relevant factors and makes a determination whether or not to proceed with full activation of the Response Protocol. Not all allegations of sexually abusive behavior require full activation of the protocol. In some cases, the Institution PREA Compliance Manager will determine that there is not sufficient reason to proceed (the alleged victim credibly recanted; the alleged perpetrator was not in the institution on the date of the allegation, etc.) and the Response Protocol may be terminated.

In cases where more information is needed, or where there is a credible and serious allegation or instance of sexually abusive behavior, the full Response Protocol must be implemented.

Once the Institution PREA Compliance Manager determines that the intervention should continue, a sensitive and coordinated response is necessary. Services will be provided in an environment that meets both security and therapeutic needs.

The full Response Protocol, monitored by the Institution PREA Compliance Manager, involves the following components:

- Correctional Services safeguard the inmate (see section 115.62); engage in evidence collection and preservation at the institution, including inmate clothing and footwear (see section 115.64); investigate cases involving inmate perpetrators (see section 115.71); arrange for outside medical trips if necessary in accordance with the Program Statement Escorted Trips; and ensure that STG categories for victims and predators are entered into SENTRY (see section 115.87).
- Psychologists are responsible for crisis intervention, assessment of treatment needs, documentation of the evaluation results, treatment, psychiatric referral, and other treatment options related to the alleged victim (see section 115.82). Psychologists also notify the qualified agency staff member or the outside victim advocate, if necessary, to assist the inmate (see section 115.21).
- Properly trained Health Services clinicians are responsible for assessment, examination, documentation, and treatment of inmate injuries arising from incidents of sexual abuse,

including testing when appropriate for pregnancy, HIV, and other sexually transmissible infections (STIs) (see sections 115.82 and 115.83). Where indicated, medical staff, trained in the collection of sexual assault evidence (e.g., “rape kit”) should conduct an examination for physical evidence that may be used later in formal investigations, or refer the inmate to trained health care professionals from the local community or at the local community facility equipped (in accordance with local laws) to evaluate and treat sexual assault victims (see sections 115.21 and 115.81).”

After responding to the initial incident, staff noted above have additional responsibilities for follow-up with the inmate victim, which are covered in sections 115.66-68, 115.76-78, and 115.81-83.

Through such reviews, the facility meets this standards requirements.

Standard 115.66: Preservation of ability to protect inmates from contact with abusers

115.66 (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 inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted? Yes No

115.66 (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*)

Document Review:

1. FCI Pekin PAQ
2. Local Supplemental Agreement, FCI Pekin, IL, not dated
3. Master Agreement, BOP and Council of Prison Locals American Federation of Government Employees, dated July 2014 – July 2017

Interviews:

1. Management Analyst

Interviews with the Management Analyst determined that although the security staff are partnered with the American Federation of Government Employees, this does not prohibit the facility from disciplining and/or removing staff from the program, if necessary.

115.66

- (a) The FCI Pekin PAQ states the agency, facility, or any other governmental entity responsible for collective bargaining on the agency's behalf has entered into or renewed any collective bargaining agreement or other agreement since August 20, 2012, or since the last PREA audit, whichever is later. BOP Program Statement 5324.12, page 41, section 115.66(a) states, "The collective bargaining process in the Bureau will be completed pursuant to Title 5 of the United States Code, and all other applicable laws, rules, and regulations, including third-party appeals. Neither the agency nor any other governmental entity responsible for collective bargaining on the agency's behalf shall enter into or renew any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted.

The Facility provided a cover sheet and table of contents of to the Local Supplemental Agreement, FCI Pekin, IL.

The Facility provided a Master Agreement, BOP and Council of Prison Locals American Federation of Government Employees which includes language in Article 30 – Disciplinary and Adverse Actions. Although this information was made available, the agreement expired July 2017. During the pre-audit phase the Management Analyst informed the Auditor the agreement would stay in place until a new agreement was solidified.

BOP Program Statement 5324.12, page 41, section 115.66(b) states, "Nothing in this standard shall restrict the entering into or renewal of agreements that govern:

1. The conduct of the disciplinary process, as long as such agreements are not inconsistent with the provisions of §§ 115.72 and 115.76; or
2. Whether a no-contact assignment that is imposed pending the outcome of an investigation shall be expunged from or retained in the staff member's personnel file following a determination that the allegation of sexual abuse is not substantiated.

Through such reviews, the facility meets this standards requirements.

Standard 115.67: Agency protection against retaliation

115.67 (a)

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

115.67 (b)

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

115.67 (c)

- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? Yes No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? Yes No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation? Yes No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports? Yes No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes? Yes No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes? Yes No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff? Yes No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff? Yes No
- Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need? Yes No

115.67 (d)

- In the case of inmates, does such monitoring also include periodic status checks?
 Yes No

115.67 (e)

- 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

115.67 (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*)

Document Review:

1. FCI Pekin PAQ
2. BOP 5324.12, Program Statement, dated June 4, 2015: Sexually Abusive Behavior Prevention and Intervention Program
3. Protection Against Retaliation: Inmates – completed sample documentation, dated 2020-2021

Interviews:

1. Staff Investigators
2. Acting Associate Warden of Programs (PREA Compliance Manager)
3. Activities and Operations Lieutenants
4. Psychology staff

Interviews with the Staff Investigators, Acting Associate Warden of Programs (PREA Compliance Manager), Activities and Operations Lieutenants stated Psychology services would complete retaliation monitoring; however, such monitoring was not documented. After further discussion the facility stated the PREA Compliance Manager is responsible for completing and documenting retaliation monitoring.

Site Observation:

Although interviews and documentation demonstrated compliance, the Auditor recommended the staff meet and agree on a single format for monitoring retaliation and document at least weekly.

115.67

- (a) The FCI Pekin PAQ states the agency has a policy to protect all Inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other Inmates or staff. BOP Program Statement 5324.12, page 42, section 115.67(a) states, "The agency shall establish a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff, and shall designate which staff members or departments are charged with monitoring retaliation."
- (b) BOP Program Statement 5324.12, page 42, section 115.67(b) states, "The agency shall employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations."

(c-f) The FCI Pekin PAQ states the facility monitors the conduct or treatment of inmates or staff who reported sexual abuse and of inmates who were reported to have suffered sexual abuse to ascertain if there are any changes that may suggest possible retaliation by inmates or staff. The facility will monitor conduct or treatment until the inmate is discharged. The facility acts promptly to remedy any such retaliation. In the past 12 months, the facility has had zero incidents of retaliation.

(c) For at least 90 days following a report of sexual abuse, the agency shall monitor the conduct and treatment of inmates or staff who reported the sexual abuse and of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff, and shall act promptly to remedy any such retaliation. Items the agency should monitor include any inmate disciplinary reports, housing, or program changes, or negative performance reviews or reassignments of staff. The agency shall continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need.

The Institution PREA Compliance Manager monitors staff and inmates who have reported sexual abuse allegations to protect them from retaliation for 90 days. However, if the initial monitoring indicates a continuing need, periodic status checks occur.

- (d) In the case of inmates, such monitoring shall also include periodic status checks.
- (e) If any other individual who cooperates with an investigation expresses a fear of retaliation, the agency shall take appropriate measures to protect that individual against retaliation.
- (f) An agency's obligation to monitor shall terminate if the agency determines that the allegation is unfounded."

The facility provided Protection Against Retaliation monitoring for inmates. Sample documentation was received demonstrating monitoring documentation has been in place throughout the year 2020 and 2021.

Through such reviews, the facility meets this standards requirements.

Standard 115.68: Post-allegation protective custody

115.68 (a)

- Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43? 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*)

Document Review:

1. FCI Pekin PAQ
2. BOP 5324.12, Program Statement, dated June 4, 2015: Sexually Abusive Behavior Prevention and Intervention Program
3. BOP FCI Memorandum for PREA Documentation, dated July 15, 2021, subject: PREA Standard 116.68(a)-1

Interviews:

1. Special Housing Unit staff
2. Psychology Services
3. Acting Associate Warden of Programs (PREA Compliance Manager)
4. Random Inmates
5. Targeted Inmates

Random and targeted Inmate interviews conducted demonstrated that inmates are placed in protective custody typically at their own choosing and/or during investigations to keep inmates safe. Interviews with facility staff demonstrated that the protective custody for targeted inmates only occurs when absolutely necessary and never solely as a means for inmates who identify as LBGTQI.

Site Observation:

The seclusion room in the Special Housing Unit was empty at the time of the on-site audit. The seclusion room is located in the center of the building, away from Inmate single wet cells.

115.68

- (a) The FCI Pekin PAQ states the agency has a policy prohibiting the placement of inmates who allege to have suffered sexual abuse in involuntary segregated housing unless an assessment of all available alternatives has been made and a determination has been made that there is no available alternative means of separation from likely abusers. The number of inmates who allege to have suffered sexual abuse who were held in involuntary segregated housing in the past 12 months for one to 24 hours awaiting completion of assessment was zero. The number of inmates who allege to have suffered sexual abuse who were assigned to involuntary segregated housing in the past 12 months for longer than 30 days while awaiting alternative placement was zero. From a review of case files of inmates who allege to have suffered sexual abuse who were held in involuntary segregated housing in the past 12 months, the number of case files that include BOTH (a) a statement of the basis for facility's concern for the inmate's safety, and (b) the reason or reasons why alternative means of separation could not be arranged: If an involuntary segregated housing assignment is made, the facility affords each such inmate a review every 30 days to determine whether there is a continuing need for separation from the general population.

BOP Program Statement 5324.12, page 43, section 115.68(a) states, "Any use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse shall be subject to the requirements of § 115.43."

See section 115.43. Form BP-A1002, Safeguarding of Inmates Alleging Sexual Abuse/Assault Allegation, is also used in cases of post-allegation protective custody.

The Facility provided BOP FCI Memorandum for PREA Documentation, from the Warden, subject: PREA Standard 116.68(a)-1, stating, "FCI Pekin did not have any occurrences of involuntary segregated using assignments during the review period..."

Through such reviews, the facility meets this standards requirements.

INVESTIGATIONS

Standard 115.71: Criminal and administrative agency investigations

115.71 (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/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).] Yes No NA
- Does the agency conduct such investigations for all allegations, including third-party and anonymous reports? [N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).] Yes No NA

115.71 (b)

- Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34? Yes No

115.71 (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

115.71 (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

115.71 (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 inmate or staff? Yes No
- Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding? Yes No

115.71 (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

115.71 (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

115.71 (h)

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

115.71 (i)

- Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years? Yes No

115.71 (j)

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

115.71 (k)

- Auditor is not required to audit this provision.

115.71 (l)

- When an outside entity investigates sexual abuse, does the facility 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 115.21(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*)

Document Review:

1. FCI Pekin PAQ

2. BOP 5324.12, Program Statement, dated June 4, 2015: Sexually Abusive Behavior Prevention and Intervention Program
3. FBI's Domestic Investigations and Operations Guide (DIOG) web link for investigative procedures: <http://vault.fbi.gov/FBI%20Domestic%20Investigations%20Operations%20Guide%20%28%28/dIOG%29>
4. U.S. DOJ, FBI Letter addressed to the Assistant Director, Program Review Division, Subject: FBI Criminal Investigation Processes, dated April 2, 2014
5. DOJ/OIG PREA Training Topic List, dated January 14, 2015
6. Please note training curriculums and training documentation can be found in Standard 115.21 of this Audit Report

Interviews:

1. Facility Investigators
2. Targeted inmates

Interviews with the facility investigators demonstrated each completed initial and annual specialized investigator training. Each investigator clearly articulated processes required during an investigation, except the notification requirements to victims. Verbal notifications are given to inmates by investigation staff, which inmates confirmed. Moving forward, the facility will begin documenting notification efforts with inmate signature.

Site Observation:

Review of the six Administrative Investigations completed, each were completed thoroughly and within 30 days of the initial report. Each investigation included interviews with victims, perpetrators and staff in the area where the allegation took place. Of the six investigations completed, two were substantiated and four were unsubstantiated.

115.71

- (a) The FCI Pekin PAQ states the agency/facility has a policy related to criminal and administrative agency investigations. BOP Program Statement 5324.12, page 43-44, section 115.71(a) states, "When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, it shall do so promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports.

At the conclusion of the investigation, the allegations must be indicated as:

- Substantiated.
- Unsubstantiated (may have occurred, but insufficient evidence to prove).
- Unfounded (evidence proves that this could not have happened).

Upon activating the full Response Protocol, the investigation phase is initiated and the following notification(s) must be made:

- (1) Inmate Perpetrator on Inmate Victim. In the event that an inmate is alleged to have perpetrated sexually abusive behavior against another inmate, the Special Investigative Agent (or SIS) is notified immediately.
- (2) Staff Perpetrator on Inmate Victim. In the event that a staff member is alleged to have perpetrated sexually abusive behavior against an inmate, the Warden is notified immediately. The Warden notifies the Regional Director and the Office of Internal Affairs (OIA), who in turn notify the Office of the Inspector General (OIG), and, when appropriate, the Federal Bureau of Investigation (FBI).

(3) Inmate Perpetrator on Staff Victim. In the event that an inmate is alleged to have perpetrated sexually abusive behavior against a staff member, the SIA/SIS must be contacted immediately, with follow-up notification to the Warden. The Warden refers these matters for criminal investigation and possible prosecution in accordance with the Program Statement Criminal Matter Referrals.”

Since the last PREA audit, the facility has had 39 criminal investigations referred to law enforcement. Each of the 39 allegations are documented in the facilities database.

(b) BOP Program Statement 5324.12, page 44, section 115.71(b) states, “Where sexual abuse is alleged, the agency shall use investigators who have received special training in sexual abuse investigations pursuant to § 115.34.”

(c) BOP Program Statement 5324.12, page 44, section 115.71(c) states, “Investigators shall gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; shall interview alleged victims, suspected perpetrators, and witnesses; and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator.

Note. this is a separate responsibility from staff first responders addressed in section 115.64. These duties are carried out by the appropriate investigative agency (e.g., SIS, OIA, OIG, FBI).

Previous unsubstantiated or unfounded complaints and reports may not be used as evidence.”

(d) The FCI Pekin PAQ states the agency does not terminate an investigation solely because the source of the allegation recants the allegation. BOP Program Statement 5324.12, page 44, section 115.71(d) states, “When the quality of evidence appears to support criminal prosecution, the agency shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution.”

(d) BOP Program Statement 5324.12, page 44, section 115.71(e) states, “The credibility of an alleged victim, suspect, or witness shall be assessed on an individual basis and shall not be determined by the person’s status as inmate or staff. No agency shall require an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such an allegation.”

(f) BOP Program Statement 5324.12, page 44-45, section 115.71(f) states, Administrative investigations:

1. Shall include an effort to determine whether staff actions or failures to act contributed to the abuse; and
2. Shall be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings.

Administrative investigations should also consider information on whether other factors such as physical layouts, staffing patterns, institution operations, etc., contributed to the abuse.”

The Agency provided the FBI’s Domestic Investigations and Operations Guide (DIOG) web link for investigative procedures:

<http://vault.fbi.gov/FBI%20Domestic%20Investigations%20Operations%20Guide%20%28/dIOG%29>

- (g) BOP Program Statement 5324.12, page 45, section 115.71(g) states, "Criminal investigations shall be documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible."
- (h) The FCI Pekin PAQ states there has been zero sustained allegation of conduct that appears to be criminal that was referred for prosecution, since the last audit date. BOP Program Statement 5324.12, page 45, section 115.71(h) states, "Substantiated allegations of conduct that appears to be criminal shall be referred for prosecution."
- (i) The FCI Pekin PAQ states the agency retains all written reports pertaining to administrative or criminal investigation of alleged sexual abuse or sexual harassment for as long as the alleged abuser is incarcerated or employed by the agency, plus five years. BOP Program Statement 5324.12, page 45, section 115.71(i) states, "The agency shall retain all written reports referenced in paragraphs (f) and (g) of this section for as long as the alleged abuser is incarcerated or employed by the agency, plus five years."
- (j) BOP Program Statement 5324.12, page 45, section 115.71(j) states, "The departure of the alleged abuser or victim from the employment or control of the facility or agency shall not provide a basis for terminating an investigation."
- (k) BOP Program Statement 5324.12, page 45, section 115.71(k) states, "Any State entity or Department of Justice component that conducts such investigations shall do so pursuant to the above requirements."

The Agency provided a U.S. DOJ, FBI letter addressed to the Assistant Director, Program Review Division which states, "...the FBI does not operate any confinement facilities for which the regulations apply, nor does the FBI conduct administrative investigations of officials employed by any agency that operates such facilities Though rare, relative to the scope and nature of other matters handled by the agency, the FBI does pursue criminal investigations related to sexual assault in BOP facilities pursuant to the Memorandum of Understanding, executed in August 1996, which defined the respective roles and responsibilities of the BOP and the FBI when a federal crime occurs in a BOP facility. Nevertheless, I am pleased to confirm that the FBI policy, training, and practice comply with the implementing regulations to the extent those regulations apply to the FBI."

The Agency provided the DOJ/OIG PREA Training Topic List which includes all necessary topics required for this standard provision.

- (l) BOP Program Statement 5324.12, page 45, section 115.71(l) states, "When outside agencies investigate sexual abuse, the facility shall cooperate with outside investigators and shall endeavor to remain informed about the progress of the investigation."

Through such reviews, the facility meets this standards requirements.

Standard 115.72: Evidentiary standard for administrative investigations

115.72 (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*)

Document Review:

1. FCI Pekin PAQ
2. BOP 5324.12, Program Statement, dated June 4, 2015: Sexually Abusive Behavior Prevention and Intervention Program

Interviews:

1. Facility Investigators

The interview with the facility investigator(s) demonstrated the facility shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.”

115.72

- (a) The FCI Pekin PAQ states the agency imposes a standard of a preponderance of the evidence or a lower standard of proof for determining whether allegations of sexual abuse or sexual harassment are substantiated. BOP Program Statement 5324.12, page 45, section 115.72(a) states, “The agency shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.

The Bureau applies this section in accordance with its disciplinary/adverse action process and collective bargaining agreement, and applicable laws, rules, and regulations.”

Through such reviews, the facility meets this standards requirements.

Standard 115.73: Reporting to inmates

115.73 (a)

- Following an investigation into an inmate’s allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded? Yes No

115.73 (b)

- If the agency did not conduct the investigation into an inmate’s allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.) Yes No NA

115.73 (c)

- Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the inmate whenever: The staff member is no longer posted within the inmate's unit? Yes No
- Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the inmate whenever: The staff member is no longer employed at the facility? Yes No
- Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the inmate whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility? Yes No
- Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the inmate whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility? Yes No

115.73 (d)

- Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility? Yes No
- Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility? Yes No

115.73 (e)

- Does the agency document all such notifications or attempted notifications? Yes No

115.73 (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*)

Document Review:

1. FCI Pekin PAQ
2. BOP 5324.12, Program Statement, dated June 4, 2015: Sexually Abusive Behavior Prevention and Intervention Program
3. BOP FCI, dated July 15, 2021, Memorandum for PREA Documentation, Subject: PREA Standard 115.73(a)-1, (b)-1, (c)-1, (c)-2
4. BOP FCI, dated July 15, 2021, Memorandum for PREA Documentation, Subject: PREA Standard 115.73(c)-1, (d)-1, (e)-1

Interviews:

1. Facility Investigators

Interviews with the facility investigators demonstrated notification requirements to victims was given verbally; however, verbal notification was not documented.

115.73

- (a) The FCI Pekin PAQ states the agency has a policy requiring that any inmate who makes an allegation that he or she suffered sexual abuse in an agency facility is informed, verbally or in writing, as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation by the agency. The number of criminal and/or administrative investigations of alleged inmate sexual abuse that were completed by the agency/facility in the past 12 months was six. Of the alleged sexual abuse investigations that were completed in the past 12 months, the number of inmates who were notified, verbally or in writing, of the results of the investigations was six.

BOP Program Statement 5324.12, page 45-46, section 115.73(a) states, "Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, the agency shall inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded.

The Special Investigative Lieutenant provides all notifications to inmates required under this section."

The facility provided a memorandum from the Warden, Subject: PREA Standard 115.73(a)-1, (b)-1, (c)-1, (c)-2 which stated, "FCI Pekin had a total of 6 PREA cases during the review period, (s) two substantiated and (4) unsubstantiated. Documentation will be available on-site for the PREA Auditor to review.

- (b) The FCI Pekin PAQ states If an outside entity conducts such investigations, the agency requests the relevant information from the investigative entity in order to inform the Inmate as to the outcome of the investigation. In the past 12 months, there has been zero investigations of alleged inmate sexual abuse.

BOP Program Statement 5324.12, page 46, section 115.73(b) states, "If the agency did not conduct the investigation, it shall request the relevant information from the investigative agency in order to inform the inmate."

- (c) The FCI Pekin PAQ states following an inmate's allegation that a staff member has committed sexual abuse against the Inmate, the agency/facility subsequently informs the Inmate (unless the agency has determined that the allegation is unfounded) whenever:
- The staff member is no longer posted within the Inmate's unit;

- The staff member is no longer employed at the facility;
- The agency learns that the staff member has been indicted on a charge related to sexual abuse within the facility; or
- The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility.”

There has not been a substantiated or unsubstantiated complaint of sexual abuse committed by staff against an inmate in the last 12 months.

BOP Program Statement 5324.12, page 46, section 115.73(c) states, “Following an inmate’s allegation that a staff member has committed sexual abuse against the inmate, the agency shall subsequently inform the inmate (unless the agency has determined that the allegation is unfounded) whenever:

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

An assessment of whether actions described in (c)(1)-(4) above are warranted is made in accordance with section 115.65, and may not be appropriate in all cases. Inmates are notified only if there is a nexus between the listed actions in this section and an incident of sexual abuse. The timing of such notifications should not interfere with any pending criminal or administrative investigations. All notifications are made in accordance with the Freedom of Information Act/Privacy Act.”

The facility provided a memorandum for PREA Documentation, Subject: PREA Standard 115.73 (c)-3, (d)-1, (e)-1, which states, “FCI Pekin defers to National policy as delineated in Program Statement 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, for policies and procedures related to reporting the outcome of a PREA case to inmates.

- (d) The FCI Pekin PAQ states following an inmate’s allegation that he or she has been sexually abused by another Inmate in an agency facility, the agency subsequently informs the alleged victim whenever: the agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility; or the agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.

BOP Program Statement 5324.12, page 46, section 115.73(d) states, “Following an inmate’s allegation that he or she has been sexually abused by another inmate, the agency shall subsequently inform the alleged victim whenever:

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

- (e) The FCI Pekin PAQ states the agency has a policy that all notifications to inmates described under this standard are documented. In the past 12 months, there has been zero notifications to an inmate, pursuant to this standard. Of those motivations, in the past 12 months, zero were documented.

BOP Program Statement 5324.12, page 46, section 115.73(e) states, "All such notifications or attempted notifications shall be documented."

BOP Program Statement 5324.12, page 46, section 115.73(f) states, "An agency's obligation to report under this standard shall terminate if the inmate is released from the agency's custody." The Bureau's obligation to report terminates if the inmate-victim is released from the agency's custody."

Through such reviews, the facility meets this standards requirements.

DISCIPLINE

Standard 115.76: Disciplinary sanctions for staff

115.76 (a)

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

115.76 (b)

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

115.76 (c)

- Are disciplinary sanctions for violations of agency Directives 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

115.76 (d)

- Are all terminations for violations of agency sexual abuse or sexual harassment Directives, 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 Directives, 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*)

Document Review:

- FCI Pekin PAQ
- BOP 5324.12, Program Statement, dated June 4, 2015: Sexually Abusive Behavior Prevention and Intervention Program
- BOP P3420.11, dated December 6, 2013
- BOP FCI, dated July 15, 2021, Memorandum for PREA Documentation, Subject: PREA Standard 115.76(b)-1

Interviews:

1. Acting Associate Warden of Programs (PREA Compliance Manager)

Site Observation:

In the last 12 months, the facility had zero staff who was disciplined for violation of an agency sexual abuse or sexual harassment policy.

115.76

- (a) The FCI Pekin PAQ states staff is subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies. BOP P3420.11, page 6, section 5. (b) Personal Conduct, states, "Sexual Relationships/Contact with Inmates. Employees may not allow themselves to show partiality toward, or become emotionally, physically, sexually, or financially involved with inmates, former inmates, or persons known (or who should have been known based on circumstances) to the employee as a family member or close friend of inmates or former inmates. Chaplains, psychologists, and psychiatrists may continue a previously established therapeutic relationship with a former inmate in accordance with their codes of professional conduct and responsibility." The policy continues with additional information regarding prohibitions regarding facility staff and volunteer involvement with inmates.

BOP Program Statement 5324.12, page 47, section 115.76(a) states, "Bureau employees are subject to the Program Statement Standards of Employee Conduct, the Master Agreement, and employment-based laws, rules, and regulations. (a) Staff shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies."

- (b) The FCI Pekin PAQ states in the last 12 months, there has been zero staff from the facility that had violated agency sexual abuse or sexual harassment policies. BOP Program Statement 5324.12, page 47, section 115.76(b) states, "Termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual abuse."

If evidence supports that a staff member engaged in sexual abuse, as defined in section 115.6, the matter will first be referred for criminal prosecution. Administrative discipline (including proposed removals for sexual abuse) will be conducted using the Program Statement Standards of Employee Conduct, the Program Statement Human Resource Management Manual, and the collective bargaining agreement. Any decision made on the proposal will be in accordance with all applicable laws, rules, and regulations."

The facility provided BOP FCI, Memorandum from the Warden for PREA Documentation, Subject: PREA Standard 115.76(b)-1, which states, "There have been zero instances where staff have violated agency sexual abuse or sexual harassment policies at FCI Pekin the past 12 months...."

- (c) The FCI Pekin PAQ states disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) are 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. In the past 12 months there have been zero staff requiring discipline for sexual abuse or sexual harassment.

BOP Program Statement 5324.12, page 47, section 115.76(c) states, "Disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) shall be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories."

- (d) The FCI Pekin PAQ states 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, are reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies. In the past 12 months, zero staff have been terminated for sexual abuse or harassment.

BOP Program Statement 5324.12, page 47, section 115.76(d) states, "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, shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies."

Through such reviews, the facility met this standards requirements.

Standard 115.77: Corrective action for contractors and volunteers

115.77 (a)

- Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates? 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

115.77 (b)

- In the case of any other violation of agency sexual abuse or sexual harassment Directives by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates? 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*)

Document Review:

1. FCI Pekin PAQ
2. BOP 5324.12, Program Statement, dated June 4, 2015: Sexually Abusive Behavior Prevention and Intervention Program
3. BOP FCI, dated July 15, 2021, Memorandum for PREA Documentation, Subject: PREA Standard 115.77 (a)-3, (b)-1

Interviews:

1. Acting Associate Warden of Programs (PREA Compliance Manager)

Site Observation:

During the last audit cycle, the facility did not have any volunteers or contractors subject to disciplinary action due to violating sexual abuse or sexual harassment policies. Of the volunteer and contractor files reviewed, none had disciplinary action for violations of sexual abuse or sexual harassment.

115.77

- (a) The FCI Pekin PAQ states agency policy requires that any contractor or volunteer who engages in sexual abuse be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies. agency policy requires that any contractor or volunteer who engages in sexual abuse be prohibited from contact with Inmates. In the past 12 months, there have been zero contractors or volunteers reported to law enforcement or relevant licensing bodies for engaging in sexual abuse of Inmates.

BOP Program Statement 5324.12, page 47, section 115.77(a) states, "Any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with inmates and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies. Generally, this section is applied in cases where there is possible criminal prosecution."

The Facility provided a memorandum from the Warden for PREA Documentation, Subject: PREA Standard 115.77 (a)-3, (b)-1 which states, "In the past 12 months, there have been zero contractors or volunteers from the institution that have violated the agency's sexual abuse or sexual harassment policies, resulting in reports to law enforcement agencies or relevant licensing bodies for engaging in sexual abuse of an inmate...."

- (b) The FCI Pekin PAQ states the facility takes appropriate remedial measures and considers whether to prohibit further contact with Inmates in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer. BOP Program Statement 5324.12, page 47, section 115.77(b) states, "The facility shall take appropriate remedial measures, and shall consider whether to prohibit further contact with inmates, in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer.

Generally, this section is applied in cases where administrative investigation/actions would be appropriate."

Through such reviews, the facility meets this standards requirements.

Standard 115.78: Disciplinary sanctions for inmates

115.78 (a)

- Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process? Yes No

115.78 (b)

- Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories? Yes No

115.78 (c)

- When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior? Yes No

115.78 (d)

- If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits? Yes No

115.78 (e)

- Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact? Yes No

115.78 (f)

- For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation? Yes No

115.78 (g)

- If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.) 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*)

Document Review:

1. FCI Pekin PAQ
2. BOP 5324.12, Program Statement, dated June 4, 2015: Sexually Abusive Behavior Prevention and Intervention Program
3. BOP FCI, dated July 15, 2021, Memorandum for PREA Documentation, Subject: PREA Standard 115.78 (e)-1

Interviews:

1. Facility Investigators

Interviews with facility investigators demonstrated inmates who falsely reported PREA allegations would typically be moved to another housing unit and/or facility due to safety reasons for the inmate. Interviews also revealed that the facility did not formally review sexual abuse investigations nor were these staff aware of which staff conducted sexual abuse investigations. During the post phase the facility provided information demonstrating the Special Investigative Services staff, PREA Compliance Manager and the Captain would review sexual abuse investigations.

115.78

- (a) The FCI Pekin PAQ states inmates are subject to disciplinary sanctions only pursuant to a formal disciplinary process following a criminal finding of guilt for inmate-on-inmate sexual abuse. Inmates are subject to disciplinary sanctions only pursuant to a formal disciplinary process following a criminal finding of guilt for inmate-on-inmate sexual abuse. In the past 12 months there have been two administrative findings of inmate-on-inmate sexual abuse have occurred at the facility. In the past 12 months there have no criminal findings of guilt for inmate-on-inmate sexual abuse, occurring at the facility.

BOP Program Statement 5324.12, page 48, section 115.78(a) states, "Inmates shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse."

- (b) BOP Program Statement 5324.12, page 48, section 115.78(b) states, "Sanctions shall be commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories."
- (c) BOP Program Statement 5324.12, page 48, section 115.78(c) states, "The disciplinary process shall consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed."
- (d) The FCI Pekin PAQ states the facility offers therapy, counseling, or other interventions designed to address and correct the underlying reasons or motivations for abuse.

BOP Program Statement 5324.12, page 48, section 115.78(d) states, "If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, the facility shall consider whether to require the offending inmate to participate in such interventions as a condition of access to programming or other benefits."

- (e) The FCI Pekin PAQ states the agency disciplines inmates for sexual contact with staff only upon finding that the staff member did not consent to such contact. BOP Program Statement 5324.12, page 48, section 115.78(e) states, "The agency may discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact."

Sexual abuse and sexual harassment of staff members should be addressed through other existing statutes, policies, and procedures, such as using the inmate discipline system and referral to criminal prosecutions as appropriate. Please refer to sections 115.6 and 115.62 concerning staff victims."

The Facility provided a memorandum from the Warden, for PREA Documentation, Subject: PREA Standard 115.78 (e)-1 which states, "In the past 12 months, FCI Pekin has had zero instances of

disciplining inmates for sexual conduct with staff upon finding the staff member did not consent to such contact.”

- (f) The FCI Pekin PAQ states the agency prohibits disciplinary action for a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred, even if an investigation does not establish evidence sufficient to substantiate the allegation. BOP Program Statement 5324.12, page 48, section 115.78(f) states, “For the purpose of disciplinary action, a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.

The maintenance of an effective sexual abuse prevention policy, and general secure and/orderly running of an institution, requires that inmates be held responsible for manipulative behavior and intentionally making false allegations. Allegations of false reports are considered by staff in accordance with the procedures and standards of the Program Statement Inmate Discipline Program. Inmates who have been found to have made false allegations are recommended for placement in the Posted Picture File in accordance with the Program Statement Posted Picture File.”

- (g) The FCI Pekin PAQ states the agency prohibits all sexual activity between Inmates. If the agency prohibits all sexual activity between inmates and disciplines inmates for such activity, the agency deems such activity to constitute sexual abuse only if it determines that the activity is coerced. DOJ, BOP, Program Statement 5324.12, page 48, section 115.78(g) states, “An agency may, in its discretion, prohibit all sexual activity between inmates and may discipline inmates for such activity. An agency may not, however, deem such activity to constitute sexual abuse if it determines that the activity is not coerced.”

Through such reviews, the facility meets this standards requirements.

MEDICAL AND MENTAL CARE

Standard 115.81: Medical and mental health screenings; history of sexual abuse

115.81 (a)

- If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)
 Yes No NA

115.81 (b)

- If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.) Yes No NA

115.81 (c)

- If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? Yes No

115.81 (d)

- Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?
 Yes No

115.81 (e)

- Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18? 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*)

Document Review:

1. FCI Pekin PAQ
2. BOP 5324.12, Program Statement, dated June 4, 2015: Sexually Abusive Behavior Prevention and Intervention Program
3. BOP FCI, dated July 15, 2021, Memorandum for PREA Documentation, Subject: PREA Standard 115.81 (a)-1, (b)-1
4. BOP FCI, dated July 15, 2021, Memorandum for PREA Documentation, Subject: PREA Standard 115.81 (a)-4, (c)-4
5. BOP FCI, dated July 15, 2021, Memorandum for PREA Documentation, Subject: PREA Standard 115.81 (d)-1
6. BOP FCI, dated July 15, 2021, Memorandum for PREA Documentation, Subject: PREA Standard 115.81 (e)-1

Interviews:

1. Psychologists
2. Targeted Inmates

Interviews with the Psychologists and targeted inmates demonstrated disclosure reports are reported to the Psychology staff. Documentation of disclosures and follow up appointments are documented in the mental health database.

Site Observation:

A review of inmate files and the Psychologist demonstrated inmate disclosure is documented and follow up medical and/or mental health appointments are offered and documented.

115.81

- (a) The FCI Pekin PAQ states all Inmates at this facility who have disclosed any prior sexual victimization during a screening pursuant to §115.341 are offered a follow-up meeting with a medical or mental health practitioner. Follow up meetings are offered within 14 days of the intake screening. In the past 12 months there has been 100% Inmates who disclosed prior victimization during the intake screening. Medical and mental health staff maintain secondary materials, documenting compliance with the above required services.

BOP Program Statement 5324.12, page 49, section 115.81(a) states, "Follow-up meetings under this section are conducted by Psychology Services. Psychology Services consults with Health Services if necessary. If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is offered a follow- up meeting with a medical or mental health practitioner within 14 days of the intake screening."

The facility provided a memorandum from the Warden, for PREA Documentation, Subject: PREA Standard 115.81 (a)-1, (b)-1 which states, "All FCI Pekin inmates who have previously perpetrated sexual abuse, as indicated during the screening pursuant to 115.41, are offered a follow-up meeting with a mental health practitioner within 14 days. These records are maintained for each individual encounter in the Bureau Electronic Medical Record. These records will be available on-site for review by the PREA Auditor."

- (b) The FCI Pekin PAQ states all Inmates who have previously perpetrated sexual abuse, as indicated during the screening pursuant to § 115.341, are offered a follow-up meeting with a mental health practitioner. All Inmates are allowed a follow-up meeting offered within 14 days of the intake

screening. In the past 12 months there have been 100% inmates who disclosed previously perpetrated sexual abuse, as indicated during the screening process.

BOP Program Statement 5324.12, page 49, section 115.81(b) states, "If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening.

Inmates considered high risk for sexual re-offending may be referred to specialty treatment or management programs, referred to individual or group counseling, or managed through standard correctional techniques.

If an inmate perpetrator is determined in need of treatment services and refuses treatment, Psychology Services staff document the refusal, place it in the medical section of the Inmate Central File, and notify referring staff of the refusal. Documentation of treatment compliance or refusal ensures continuity of care within and outside the Bureau."

- (c) BOP Program Statement 5324.12, page 49, section 115.81(c) states, "If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening.
- (d) The FCI Pekin PAQ states, Information related to sexual victimization or abusiveness that occurred in an institutional setting is not strictly limited to medical and mental health practitioners. BOP Program Statement 5324.12, page 49, section 115.81(d) states, "Any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law.

It is appropriate under this section to provide staff information on an inmate's history of being a sexual abuser; for example, placing the inmate in the Posted Picture File, to maintain the safe, secure, and/orderly running of the institution."

The facility provided a memorandum from the Warden, for PREA Documentation, Subject: PREA Standard 115.81 (d)-1 which states, "Information related to sexual victimization or abusiveness that occurred in an institutional setting is not limited to Medical and Mental Health Staff. This information is shared with staff responsible for security and management decisions, including treatment plans, housing, bed, work, education, and program assignments, or otherwise required by Federal, State or local law."

- (e) The FCI Pekin PAQ states, Medical and mental health practitioners do not obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institution setting unless the inmate is under the age of 18. BOP Program Statement 5324.12, page 50, section 115.81(e) states, "Medical and mental health practitioners shall obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18."

The facility provided a memorandum from the Warden, for PREA Documentation, Subject: PREA Standard 115.81 (e)-1 which states, "FCI Pekin's Medical and Mental Health Practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting."

Through such reviews, the facility did not meet this standards requirements.

Standard 115.82: Access to emergency medical and mental health services

115.82 (a)

- Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?
 Yes No

115.82 (b)

- If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do correctional staff first responders take preliminary steps to protect the victim pursuant to § 115.62? Yes No
- Do correctional staff first responders immediately notify the appropriate medical and mental health practitioners? Yes No

115.82 (c)

- Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate? Yes No

115.82 (d)

- 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*)

Document Review:

1. FCI Pekin PAQ
2. BOP 5324.12, Program Statement, dated June 4, 2015: Sexually Abusive Behavior Prevention and Intervention Program
3. BOP FCI, dated July 15, 2021, Memorandum for PREA Documentation, Subject: PREA Standard 115.82 (a)-3

Interviews:

1. Targeted Inmates

2. FCI Correctional and Non-Correctional Officers
3. Nurse
4. Psychologist

Interviews with the Nurse, Psychology staff, FCI Correctional and Non-Correctional Officers and targeted inmates demonstrated that inmates are aware of access to emergency medical and mental health services and such services have been offered and accepted.

Site Observation:

During the on-site phase, the Psychologist demonstrated how emergency service appointments are documented in the mental health database.

115.82

- (a) The FCI Pekin PAQ states Inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services. The nature and scope of such services are determined by medical and mental health practitioners according to their professional judgment. Medical and mental health staff maintain secondary materials (e.g., form, log) documenting the timeliness of emergency medical treatment and crisis intervention services that were provided; the appropriate response by non-health staff in the event health staff are not present at the time the incident is reported; and the provision of appropriate and timely information and services concerning contraception and sexually transmitted infection prophylaxis

BOP Program Statement 5324.12, page 50-51, section 115.82 (a) states, "Inmate victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment.

See section 115.65 for details concerning emergency mental health services.

Procedures for Inmate Victims. Medical staff are responsible for examination, documentation, and treatment of inmate injuries arising from sexually abusive behaviors, including testing when appropriate for pregnancy and sexually transmissible infections (STIs), including HIV.

When an inmate self-reports, or is referred to Health Services, medical staff notify Psychology Services and Correctional Services prior to conducting an injury assessment. The injury assessment, and the inmate's subjective/objective findings, are documented fully in the electronic health record. Health Services staff perform the injury assessment without compromising forensic evidence.

The forensic examination is performed by qualified sexual assault examiners (e.g., Sexual Assault Nurse Examiner, Forensic Nurse Examiner, or Sexual Assault Forensic Examiner). Where indicated, Health Services staff with appropriate qualifications may conduct a forensic examination at the institution. At institutions where Health Services staff are neither trained nor certified in forensic examinations, the inmate is examined at the institution by a qualified health care professional from the community, or at a local community facility (e.g., local hospital or rape crisis center) equipped to conduct such examinations. The forensic examination should occur as soon as practicable, but within 72 hours of BOP staff becoming aware that an inmate reported involvement in a sexually abusive assault. An inmate's refusal of a forensic examination is documented in the electronic health record.

If a trip to a local community facility is needed, Health Services staff coordinate with Correctional Services to transport the inmate to the facility.

When community care is completed, institution providers render follow-up care, including screening for infectious disease (HIV, viral hepatitis, or other sexually transmissible infections), pregnancy testing for female victims, and administration of prophylactic medication (if exposure to bloodborne pathogens is suspected) if these services were not already rendered during the community visit.

Procedures for Alleged Inmate Perpetrators. Health Services clinicians also perform a physical injury assessment on any alleged inmate perpetrators without compromising forensic evidence. Providers document the assessment in the electronic health record and provide a copy to Correctional Services for insertion in the investigation packet.

Forensic examinations of inmate perpetrators will be in consultation with relevant outside law enforcement agencies, and consistent with applicable laws and policies.”

The facility provided a memorandum from the Warden, for PREA Documentation, Subject: PREA Standard 115.82 (a)-3, which states, “FCI Pekin defers to national policy as delineated in Program Statement 5324.12 Sexually Abusive Behavior Prevention and Intervention Program, for policies and procedures related to time frames for mental health crisis intervention services provided...”

- (b) BOP Program Statement 5324.12, page 51, section 115.82 (b) states, “If no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, security staff first responders shall take preliminary steps to protect the victim pursuant to § 115.62 and shall immediately notify the appropriate medical and mental health practitioners.

The Operations Lieutenant takes preliminary steps, as stated in section 115.65.”

- (c) The FCI Pekin PAQ states Inmate victims of sexual abuse while incarcerated are offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate.

BOP Program Statement 5324.12, page 51, section 115.82 (c) states, “Inmate victims of sexual abuse while incarcerated shall be offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate.

Information and access to care as indicated in this section is offered to all inmate victims, as clinically indicated.”

- (d) The FCI Pekin PAQ states Treatment services are provided to every victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. BOP Program Statement 5324.12, page 51, section 115.82 (d) states, “Treatment services shall be 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.

Bureau policies concerning inmate co-pays for medical treatment shall not be applied to victims of sexual abuse.”

Through such reviews, the facility meets this standards requirements.

Standard 115.83: Ongoing medical and mental health care for sexual abuse victims and abusers

115.83 (a)

- Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility? Yes No

115.83 (b)

- Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody? Yes No

115.83 (c)

- Does the facility provide such victims with medical and mental health services consistent with the community level of care? Yes No

115.83 (d)

- Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if “all-male” facility. *Note: in “all-male” facilities, there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.*) Yes No NA

115.83 (e)

- If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if “all-male” facility. *Note: in “all-male” facilities, there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.*) Yes No NA

115.83 (f)

- Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate? Yes No

115.83 (g)

- 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

115.83 (h)

- If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment

when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)

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*)

Document Review:

1. FCI Pekin PAQ
2. BOP 5324.12, Program Statement, dated June 4, 2015: Sexually Abusive Behavior Prevention and Intervention Program

Interviews:

1. Targeted Inmates
2. FCI Correctional and Non-Correctional Officers
3. Nurse
4. Psychologist

Interviews with medical and mental health staff, FCI Correctional and Non-Correctional Officers and inmates demonstrated that each interviewed are aware of access to emergency medical and mental health services. Inmates who reported sexual abuse reported staff acted immediately, empathetically and addressed their concerns and needs.

Site Observation:

During the on-site phase, the Psychologist demonstrated disclosures and follow up medical and mental health appointments were maintained in the facility mental health database.

115.83

- (a) The FCI Pekin PAQ states the facility offers medical and mental health evaluation and, as appropriate, treatment to all Inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility. BOP Program Statement 5324.12, page 51, section 115.83 (a) states, "The facility shall offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility."
- (b) BOP Program Statement 5324.12, page 51, section 115.83 (b) states, "The evaluation and treatment of such victims shall include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody."
- (c) BOP Program Statement 5324.12, page 51, section 115.83 (c) states, "The facility shall provide such victims with medical and mental health services consistent with the community level of care."
- (d) BOP Program Statement 5324.12, page 51, section 115.83 (d) states, "Inmate victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests."
- (e) BOP Program Statement 5324.12, page 52, section 115.83 (e) states, "If pregnancy results from the conduct described in paragraph (e) of this section, such victims shall receive timely and

comprehensive information about and timely access to all lawful pregnancy-related medical services.”

- (f) BOP Program Statement 5324.12, page 52, section 115.83 (f) states, “Inmate victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections as medically appropriate.”
- (g) BOP Program Statement 5324.12, page 52, section 115.83 (g) states, “Treatment services shall be 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.”
- (h) BOP Program Statement 5324.12, page 52, section 115.83 (h) states, “All prisons shall attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners.”

Through such reviews, the facility meets this standards requirements.

DATA COLLECTION AND REVIEW

Standard 115.86: Sexual abuse incident reviews

115.86 (a)

- Does the facility 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

115.86 (b)

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

115.86 (c)

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

115.86 (d)

- Does the review team: Consider whether the allegation or investigation indicates a need to change directive 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 facility? Yes No
- Does the review team: Examine the area in the facility 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 §§ 115.86(d)(1) - (d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager? Yes No

115.86 (e)

- Does the facility 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*)

Document Review:

1. FCI Pekin PAQ
2. BOP 5324.12, Program Statement, dated June 4, 2015: Sexually Abusive Behavior Prevention and Intervention Program
3. BOP FCI, dated July 15, 2021, Memorandum for PREA Documentation, Subject: PREA Standard 115.86 (a)-1, (d)-1, (e)-1
4. BOP FCI Memorandum for PREA Documentation, subject: PREA Standard 115.86, dated September 23, 2021.
5. BOP FCI Memorandum for Institution Executive Staff Review completed reviews

Interviews:

1. Investigation staff

The team on-site were unaware of which staff were on the incident review team and who was responsible for documenting the required provisions for sexual abuse incident reviews. The Warden provided a memorandum for PREA Documentation, subject 115.86 describing protocol to be implemented for Sexual Abuse Incident Reviews, dated September 23, 2021.

115.86

- (a) The FCI Pekin PAQ states the facility conducts a sexual abuse incident review at the conclusion of every criminal or administrative sexual abuse investigation, unless the allegation has been determined to be unfounded. In the past 12 months there has been six criminal and/or administrative investigations of alleged sexual abuse completed at the facility,

BOP Program Statement 5324.12, page 52, section 115.86 (a) states, "The facility shall conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded.

In cases of unsubstantiated allegations, Institution Executive Staff review the incident to assess the facility's response to the allegations. All factors noted within PREA Standard 115.86 (d) noted below are considered. The Institution PREA Compliance Manager documents the review in a report, including recommendations for improvements, if any. If the unsubstantiated allegation involved a staff member, the report under this section must not include the staff member's personally identifiable information. The report is submitted to the Warden, who ensures implementation of the recommendations or documents the reason for not following them.

In cases of substantiated sexual abuse, Institution Executive Staff review the incident to assess the facility's response. All factors noted within PREA Standard 115.86 (d) noted below are considered. The Institution PREA Compliance Manager documents the review in a report, including recommendations for improvements, if any. The report is submitted to the Warden,

who ensures implementation of the recommendations or documents the reason for not following them. A copy of this report is forwarded to the Regional Director through the Regional PREA Coordinator.

Consideration for staff affected by the incident is necessary. Efforts to mitigate potential stress associated with these events should be offered to affected staff, such as offering Employee Assistance Program information.”

The facility provided a memorandum from the Warden, for PREA Documentation, Subject: PREA Standard 115.86 (a)-1, (d)-1, (e)-1, which states, “FCI Pekin had a total of 6 PREA cases during the review period, (2) two substantiated and (4) unsubstantiated. Documentation will be available for the PREA auditor to review.”

- (b) The FCI Pekin PAQ states sexual abuse incident reviews are ordinarily conducted within 30 days of concluding the criminal or administrative investigation. In the past 12 months, the number of criminal and/or administrative investigations of alleged sexual abuse completed at the facility that were followed by a sexual abuse incident review within 30 days, excluding only “unfounded” incidents were four.

The facility provided six completed Sexual Abuse Incident Reviews not previously completed before the on-site phase of the audit. The Sexual Abuse Incident Review team is now comprised of the Acting Warden over Correction Services, PREA Compliance Manager, Captain, Chief Psychologist, Health Service Administrator, and the SIA/SIS.

BOP Program Statement 5324.12, page 53, section 115.86 (b) states, “Such review shall ordinarily occur within 30 days of the conclusion of the investigation.”

- (c) The FCI Pekin PAQ states the sexual abuse incident review team includes upper-level management officials and allows for input from line supervisors, investigators, and medical or mental health practitioners. BOP Program Statement 5324.12, page 53, section 115.86 (c) states, “The review team shall include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners.

The review team also includes input from the local Union President, or his/her designee from the local Union. The local Union representative is provided an opportunity to review the draft and submit the Union’s recommendations, taking the time frames of this section into account.

The Union’s recommendations are included in the review team’s final report and recommendations as an addendum. Adoption of the Union’s recommendations in the final report is at the discretion of the review team.

Any subsequent implementation of any final recommendations will comply with collective bargaining agreements as indicated in 115.86(e) below.”

- (d) The FCI Pekin PAQ states the facility prepares a report of its findings from sexual abuse incident reviews, including but not necessarily limited to determinations made pursuant to paragraphs (d)(1)-(d)(5) of this section, and any recommendations for improvement and submits such report to the facility head and PREA compliance manager. BOP Program Statement 5324.12, page 53, section 115.86 (d) states, “The review team shall:

1. Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse;
2. Consider whether the incident or allegation was motivated by race; ethnicity; gender

identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility;

3. Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse;
4. Assess the adequacy of staffing levels in that area during different shifts;
5. Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; and
6. Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to paragraphs (d)(1) through (d)(5) of this section, and any recommendations for improvement and submit such report to the facility head and PREA compliance manager.”

- (e) The FCI Pekin PAQ states, the facility implements the recommendations for improvement or documents its reasons for not doing so. “BOP Program Statement 5324.12, page 53, section 115.86 (e) states, “The facility shall implement the recommendations for improvement, or shall document its reasons for not doing so.

The institution will comply with collective bargaining agreements in implementing changes or programs.”

Through such reviews, the facility meets this standards requirements.

Standard 115.87: Data collection

115.87 (a)

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

115.87 (b)

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

115.87 (c)

- Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice? Yes No

115.87 (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

115.87 (e)

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

115.87 (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*)

Document Review:

1. FCI Pekin PAQ
2. BOP 5324.12, Program Statement, dated June 4, 2015: Sexually Abusive Behavior Prevention and Intervention Program
3. BOP Annual Reports for years 2013 through 2018

115.87

(a)/(c)-1,2

The FCI Pekin PAQ states the agency collects accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions. The standardized instrument includes, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence (SSV) conducted by the Department of Justice.

BOP Program Statement 5324.12, page 54-55, section 115.87 (a) states, "The agency shall collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions."

The Bureau tracks information concerning sexual abuse using the methods listed below. In disseminating this information within the Bureau, or releasing information to a third party, the Bureau complies with the Federal Privacy Act and Freedom of Information Act, and all other applicable laws, rules, and regulations.

(1) SIS Data. The SIS must maintain secure investigative files and data, which include:

- The victim(s) and perpetrator(s) of sexually abusive behavior.
- A factual description of the events.
- Formal and informal action(s) taken.
- All collateral reports, supporting memoranda, and videotapes.
- Medical forms (e.g., injury assessments).

- Any other evidentiary materials pertaining to the allegation.

(2) Office of Internal Affairs Data. The Office of Internal Affairs reports the cumulated data on the inmate victims of staff sexually abusive behavior to all Chief Executive Officers and the Psychology Services Administrator at the end of each quarter and at the end of each fiscal year.

(3) Inmate Data. The Information, Policy, and Public Affairs Division collects and reports on the data used in the Bureau of Justice Statistics Survey of Sexual Violence.

(4) SENTRY Data. The Chief of Correctional Services in each institution is responsible for accurate STG SENTRY assignments related to sexually abusive behavior. Access to this SENTRY assignment must be limited to those staff who are involved in managing and treating the inmate victim or inmate perpetrator, or investigating the incident.

- Unverified Codes. These two SENTRY assignments ensure that alleged inmate victims of inmates or staff, and alleged inmate perpetrators, are identified, evaluated, and monitored as soon as the allegation is made.

SA UNV (Victim of Sexually Abusive Behavior - Unverified). This assignment is entered into the SENTRY record of the alleged victim at the time an allegation of sexually abusive behavior is reported. It remains current until it is found to be unsubstantiated or unfounded (in which case it is discontinued), or until it is verified and changed to V INMT SA or V STAFF SA.

SA UNV (Perpetrator of Sexually Abusive Behavior - Unverified). This assignment is entered into the SENTRY record of the alleged inmate perpetrator at the time the allegation is made. It remains current until it is found to be unsubstantiated or unfounded (and discontinued), or until it is verified and changed to SA INMT or SA STAFF.

- Verified Codes. These four SENTRY Assignments are used when there is a substantial evidence of sexually abusive behavior against an inmate, or by an inmate:

V INMT SA (Victim of Inmate Sexually Abusive Behavior). This assignment should be entered into SENTRY when a sexually abusive behavior has been committed against an inmate victim. It remains current for the length of the inmate victim's incarceration.

V STAFF SA (Victim of Staff Sexually Abusive Behavior). This assignment should be entered into SENTRY when a sexually abusive behavior has been committed against an inmate victim by a staff member after the allegation has been sustained.

SA INMT (Perpetrator of Sexually Abusive Behavior Against an Inmate). This assignment should be entered into SENTRY when there has been a sustained finding (incident report or legal finding) against an inmate perpetrator who has engaged in sexually abusive behavior towards another inmate.

SA STAFF (Perpetrator of Sexually Abusive Behavior Against a Staff Member/ Contractor/Volunteer). This assignment should be entered into SENTRY when there has been a sustained finding (incident report or legal finding) against an inmate perpetrator who has committed a sexually abusive behavior against a staff member."

- (b) The FCI Pekin PAQ states The annual report includes a comparison of the current year's data and corrective action from prior years. BOP Program Statement 5324.12, page 54-55, section 115.87 (b) states, "The agency shall aggregate the incident-based sexual abuse data at least annually.

The National PREA Coordinator, with the assistance of the Regional PREA Coordinators, aggregates and reviews data from all sources annually.”

- (c) BOP Program Statement 5324.12, page 55, section 115.87 (c) states, “The incident-based data collected shall include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice.

The Information, Policy, and Public Affairs Division collects and reports on the data used in the Bureau of Justice Statistics Survey of Sexual Violence.”

- (d) The FCI Pekin PAQ states the agency maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews. BOP Program Statement 5324.12, page 55, section 115.87 (d) states, “The agency shall maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.”
- (e) The FCI Pekin PAQ states the agency obtains incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates. BOP Program Statement 5324.12, page 55, section 115.87 (e) states, “The agency also shall obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates.”
- (f) The FCI Pekin PAQ states the Department of Justice has requested agency data for the previous calendar year. BOP Program Statement 5324.12, page 55, section 115.87 (f) states, “Upon request, the agency shall provide all such data from the previous calendar year to the Department of Justice no later than June 30.”

Through such reviews, the facility meets this standards requirements.

Standard 115.88: Data review for corrective action

115.88 (a)

- Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response Directives, practices, and training, including by: Identifying problem areas? Yes No
- Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response Directives, practices, and training, including by: Taking corrective action on an ongoing basis? Yes No
- Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response Directives, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole? Yes No

115.88 (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

115.88 (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

115.88 (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 facility? 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*)

Document Review:

1. FCI Pekin PAQ
2. BOP 5324.12, Program Statement, dated June 4, 2015: Sexually Abusive Behavior Prevention and Intervention Program
3. 2020 Agency/Facility Annual Report at [fbop_annual_prea_report_2020.pdf](#)

115.88

(a) The FCI Pekin PAQ states the agency reviews data collected and aggregated pursuant to §115.387 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, and training, including:

- Identifying problem areas;
- Taking corrective action on an ongoing basis; and
- Preparing an annual report of its findings from its data review and any corrective actions for each facility, as well as the agency as a whole.

BOP Program Statement 5324.12, page 56, section 115.87 (a) states, "The agency shall review data collected and aggregated pursuant to § 115.88 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by:

1. Identifying problem areas;
2. Taking corrective action on an ongoing basis; and
3. Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole.

The National PREA Coordinator reviews data compiled by the Regional PREA Coordinators, the Information, Policy, and Public Affairs Division, and the Office of Internal Affairs, and issues a report to the Director on an annual basis, meeting the requirements of this section.”

- (b) The FCI Pekin PAQ states the annual report includes a comparison of the current year’s data and corrective actions to those from prior years. The annual report provides an assessment of the agency’s progress in addressing sexual abuse. BOP Program Statement 5324.12, page 56, section 115.88 (b) states, “Such report shall include a comparison of the current year’s data and corrective actions with those from prior years and shall provide an assessment of the agency’s progress in addressing sexual abuse.”
- (c) The FCI Pekin PAQ states the agency makes its annual report readily available to the public, at least annually, through its website. Annual reports are approved by the agency head. BOP Program Statement 5324.12, page 56, section 115.88 (c) states, “The agency’s report shall be approved by the agency head and made readily available to the public through its Web site or, if it does not have one, through other means.”
- (d) The FCI Pekin PAQ states when the agency redacts material from an annual report for publication, the redactions are limited to specific materials where publication would present a clear and specific threat to the safety and security of the facility. BOP Program Statement 5324.12, page 56, section 115.88 (d) states, “The agency may redact specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility, but must indicate the nature of the material redacted.

The Bureau complies with the Federal Privacy Act and Freedom of Information Act, and all other applicable laws, rules, and regulations.”

Through such reviews, the facility meets this standards requirements.

Standard 115.89: Data storage, publication, and destruction

115.89 (a)

- Does the agency ensure that data collected pursuant to § 115.87 are securely retained?
 Yes No

115.89 (b)

- Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities 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

115.89 (c)

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

115.89 (d)

- Does the agency maintain sexual abuse data collected pursuant to § 115.87 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*)

Document Review:

1. FCI Pekin PAQ
2. BOP 5324.12, Program Statement, dated June 4, 2015: Sexually Abusive Behavior Prevention and Intervention Program

115.89

- (a) The FCI Pekin PAQ states the agency ensures that incident-based and aggregate data are securely retained. BOP Program Statement 5324.12, page 56, section 115.89 (a) states, "The agency shall ensure that data collected pursuant to § 115.89 are securely retained."
- (b) The FCI Pekin PAQ states agency policy requires that aggregated sexual abuse data from facilities under its direct control and private facilities with which it contracts be made readily available to the public at least annually through its website. BOP Program Statement 5324.12, page 56, section 115.89 (b) states, "The agency shall make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its Web site or, if it does not have one, through other means."
- (c) The FCI Pekin PAQ states before making aggregated sexual abuse data publicly available, the agency removes all personal identifiers. BOP Program Statement 5324.12, page 56-57, section 115.89 (c) states, "Before making aggregated sexual abuse data publicly available, the agency shall remove all personal identifiers.
The Bureau complies with the Federal Privacy Act and Freedom of Information Act, and all other applicable laws, rules, and regulations."
- (d) BOP Program Statement 5324.12, page 56-57, section 115.89 (c) states, "The agency shall maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection unless Federal, State, or local law requires otherwise."

Through such reviews, the facility meets this standards requirements.

AUDITING AND CORRECTIVE ACTION

Standard 115.401: Frequency and scope of audits

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, Inmates, and detainees? Yes No

115.401 (n)

- Were inmates 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*)

Document Review:

1. BOP 5324.12, Program Statement, dated June 4, 2015: Sexually Abusive Behavior Prevention and Intervention Program

115.401

- (a) BOP Program Statement 5324.12, page 57, section 115.401(a) states, "Information provided to auditors under this section is released consistent with the Freedom of Information Act/Privacy Act and all other applicable laws, rules, and regulations.

During the three-year period starting on August 20, 2013, and during each three-year period thereafter, the agency shall ensure that each facility operated by the agency, or by a private organization on behalf of the agency, is audited at least once."

- (b) BOP Program Statement 5324.12, page 57, section 115.401(b) states, "During each one-year period starting on August 20, 2013, the agency shall ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, is audited."
- (c) BOP Program Statement 5324.12, page 57, section 115.401(b) states, "The Department of Justice may send a recommendation to an agency for an expedited audit if the Department has reason to believe that a particular facility may be experiencing problems relating to sexual abuse. The recommendation may also include referrals to resources that may assist the agency with PREA- related issues."
- (d) BOP Program Statement 5324.12, page 57, section 115.401(b) states, "The Department of Justice shall develop and issue an audit instrument that will provide guidance on the conduct of and contents of the audit."
- (e) BOP Program Statement 5324.12, page 57, section 115.401(e) states, "The auditor shall review all relevant agency-wide policies, procedures, reports, internal and external audits, "and accreditations for each facility type."
- (f) BOP Program Statement 5324.12, page 58, section 115.401(f) states, "The audits shall review, at a minimum, a sampling of relevant documents and other records and information for the most recent one-year period."
- (g) BOP Program Statement 5324.12, page 58, section 115.401(g) states, "The auditor shall have access to, and shall observe, all areas of the audited facilities."
- (h) BOP Program Statement 5324.12, page 58, section 115.401(h) states, "The auditor shall be permitted to request and receive copies of any relevant documents (including electronically stored information)."

- (i) BOP Program Statement 5324.12, page 58, section 115.401(i) states, “The auditor shall retain and preserve all documentation (including, e.g., video tapes and interview notes) relied upon in making audit determinations. Such documentation shall be provided to the Department of Justice upon request.”
- (j) BOP Program Statement 5324.12, page 58, section 115.401(j) states, “The auditor shall interview a representative sample of inmates, residents, and detainees, and of staff, supervisors, and administrators.

The local Union will be given the opportunity to have the designated representative interviewed.”

- (k) BOP Program Statement 5324.12, page 58, section 115.401(k) states, “The auditor shall review a sampling of any available videotapes and other electronically available data (e.g., Watchtower) that may be relevant to the provisions being audited.”
- (l) BOP Program Statement 5324.12, page 58, section 115.401(l) states, “The auditor shall be permitted to conduct private interviews with inmates, residents, and detainees.

This section refers to in-person interviews. Institutions may use attorney-client rooms or other appropriate areas, taking institution security concerns into account.”

- (m) BOP Program Statement 5324.12, page 58, section 115.401(m) states, “Inmates, residents, and detainees shall be permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel.

Inmates are able to use Special Mail procedures relevant to attorneys and legal counsel when sending confidential information or correspondence to PREA auditors, consistent with the Program Statement Correspondence. The Institution PREA Compliance Manager will notify the institution mailroom when the PREA audit is beginning and ending, which will determine the time frame for PREA auditor mail to be treated as Special Mail.”

- (n) BOP Program Statement 5324.12, page 58, section 115.401(n) states, “Auditors shall attempt to communicate with community-based or victim advocates who may have insight into relevant conditions in the facility.”

Standard 115.403: Audit contents and findings

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. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. 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*)

Document Review:

1. BOP 5324.12, Program Statement, dated June 4, 2015: Sexually Abusive Behavior Prevention and Intervention Program

115.403

- (a) BOP Program Statement 5324.12, page 59, section 115.403 (a) states, "Each audit shall include a certification by the auditor that no conflict of interest exists with respect to his or her ability to conduct an audit of the agency under review."
- (b) BOP Program Statement 5324.12, page 59, section 115.403 (b) states, "Audit reports shall state whether agency-wide policies and procedures comply with relevant PREA standards."
- (c) BOP Program Statement 5324.12, page 59, section 115.403 (c) states, "For each PREA standard, the auditor shall determine whether the audited facility reaches one of the following findings: Exceeds Standard (substantially exceeds requirement of standard); Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period); Does Not Meet Standard (requires corrective action). The audit summary shall indicate, among other things, the number of provisions the facility has achieved at each grade level."
- (d) BOP Program Statement 5324.12, page 59, section 115.403 (d) states, "Audit reports shall describe the methodology, sampling sizes, and basis for the auditor's conclusions with regard to each standard provision for each audited facility, and shall include recommendations for any required corrective action."
- (e) BOP Program Statement 5324.12, page 59, section 115.403 (e) states, "Auditors shall redact any personally identifiable inmate or staff information from their reports, but shall provide such information to the agency upon request, and may provide such information to the Department of Justice."
- (f) BOP Program Statement 5324.12, page 60, section 115.403 (f) states, "The agency shall ensure that the auditor's final report is published on the agency's Web site if it has one, or is otherwise made readily available to the public."

The final report will be posted on the Bureau's public website within 15 working days of receipt. The most recent final report for each facility must be posted."

Through such reviews, the facility meets this standards requirements.

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 inmate or staff member, except where the names of administrative personnel are specifically requested in the report template.

Karen d. Murray

November 6, 2021

Auditor Signature

Date