

PREA AUDIT: AUDITOR'S SUMMARY REPORT

COMMUNITY CONFINEMENT FACILITIES



[Following information to be populated automatically from pre-audit questionnaire]

Name of facility:	Community Education Center Chester		
Physical address:	201 East 12th. Street Chester, Pa. 19013		
Date report submitted:	02/08/2015		
Auditor Information Jim Roland – The Nakamoto Group			
Address:	11820 Parklawn Drive, Suite 240 Rockville, MD 20852		
Email:	james.roland@nakamotogroup.com		
Telephone number:	419-610-5668		
Date of facility visit:	February 23-24, 2015		
Facility Information			
Facility mailing address: <i>(if different from above)</i>			
Telephone number:	610-872-0511		
The facility is:	<input type="checkbox"/> Military	<input type="checkbox"/> County	<input type="checkbox"/> Federal
	<input checked="" type="checkbox"/> Private for profit	<input type="checkbox"/> Municipal	<input type="checkbox"/> State
	<input type="checkbox"/> Private not for profit		
Facility Type:	<input checked="" type="checkbox"/> Community Correctional facility	<input type="checkbox"/> Prison	
Name of PREA Compliance Manager:	Janeen Crews		Title: Director
Email address: janeen.crews@cecintl.com			Telephone number: 610-872-0511
Agency Information			
Name of Agency:	Community Education		

Centers			
Governing authority or parent agency: <i>(if applicable)</i>			
Physical address:		35 Fairfield Place Caldwell, NJ 07006	
Mailing address: <i>(if different from above)</i>			
Telephone number:		973-226-2900	
Agency Chief Executive Officer			
Name:	Steve Tomlin	Title:	Senior Vice President
Email address:	steve.tomlin@cecintl.com	Telephone number:	973-226-2900
Agency-Wide PREA Coordinator			
Name:	John Clancy	Title:	Corporate PREA Coordinator
Email address:	john.clancyjr@cecintl.com	Telephone number:	973-830-9811

AUDIT FINDINGS

NARRATIVE:

The on-site visit to conduct a Prison Rape Elimination Act (PREA) compliance audit of the Community Education Center Chester (CEC Chester) was conducted February 23-24, 2015. The facility consists of a 125 bed facility for adult males. The facility addresses the re-entry needs of each individual offender and utilizes Community Education Center's (CEC) continuum of care model that is proven to reduce recidivism.

Services include counseling substance abuse treatment, medical, anger and stress management techniques, and life-skills training. Additional services include individual assessment services, employment assistance, and housing assistance.

The standards used for this audit became effective August 20, 2012. The Director was interviewed on site. As part of the audit, a review of all PREA Policy and a tour of the facility was completed. At the time of this audit the facility employed twenty-three (23) staff. The resident population was one-hundred and three (103). Ten (10) residents were also interviewed. No sexual abuse or sexual harassment was reported from any resident. A total of 11 staff were interviewed: Six (6) custody-treatment staff (from both shifts) and five (5) specialty staff were interviewed. Interview sheets were obtained for the Senior Vice President and the Corporate PREA Coordinator. The administrative staff interviewed included the Director, PREA Compliance Manager, Mental Health Staff, the Human Resources Manager, Security Director, Intake Staff, a Case Manager, several Operations Managers, Incident Review Team member, Officer in charge of monitoring retaliation and custody staff.

When the auditor first arrived at the facility, an in-briefing was held with the Director, Corporate PREA Compliance Coordinator, Security Director, and the facility PREA compliance manager, to explain the audit process.

DESCRIPTION OF FACILITY CHARACTERISTICS:

The mission statement of Community Education Centers (CEC) is to provide a healthy, drug-free, safe and secure environment within which we will provide treatment and education services that focus on changing addictive and criminal behaviors. We provide our participants with the knowledge and skills necessary to lead a productive lifestyle prior to reintegration into their communities.

The auditor concluded, through interviews and the examination of policy and documentation, that all staff were knowledgeable concerning their responsibilities involving PREA. During the interviews, the residents stated that staff were respectful and that they felt safe at the facility. Staff were able to describe in detail their specific duties and responsibilities, including being a "first responder", if an allegation of sexual abuse/harassment were made.

SUMMARY OF AUDIT FINDINGS:

When the on-site audit was completed, a "out-brief" meeting was held with the same staff attending the "in-brief". No final rating was given at that time; however, the overall audit process was discussed. The auditor had been provided extensive and lengthy files of documentation prior to the audit, in an effort to support a conclusion of compliance with the PREA. During the course of the on-site visit, staff were found to be courteous, cooperative, and professional. All areas of the facilities toured were found clean and well maintained. At the conclusion of the out briefing the auditor thanked the CEC Chester staff for their hard work and commitment to the Prison Rape Elimination Act.

Number of standards exceeded:	2
Number of standards met:	37
Number of standards not met:	0
Not Applicable:	0

§115.211 - Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

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

The agency and the facility exceed the standard with policies and practice. Community Education Center (CEC) policy 1200.06 clearly meets this standard. The facility PREA Plan states zero tolerance as required by the standard. In addition to the facility PREA Compliance Manager, there is a designated National PREA Coordinator and a PREA Compliance manager assigned to each regional office in the agency to ensure the PREA standards are adhered to.

§115.212 - Contracting with other entities for the confinement of residents

- 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 agency complies with this standard. This was confirmed by a telephonic interview with the Agency Contract Administrator. All contract bids will include PREA standards of compliance in all contract bids starting July 1, 2015. Until this time the facility ensures that all contractors are escorted in all areas of the facility that would have contact with residents.

§115.213 – Supervision and Monitoring

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

Community Education Center (CEC) policy 1200.06 addresses this standard. Policy requires each facility within the agency to review their respective staffing plans on an annual basis. Compliance with PREA and other safety and security issues are always of primary focus when considering and reviewing staffing plans according to the facility Director. CEC Chester have been provided all necessary resources to support the programs and procedures to ensure compliance with PREA. The audit included an examination of all resident access to phones, resident access to an email system and a review of all staffing rosters. Rounds are conducted by administrative staff on a weekly basis, and they are able to enter the units with no warning to staff. Also interviews with residents and line staff confirmed that weekly visits are conducted by administrative staff to all areas of the complex. This auditor reviewed the Purchase orders of this video monitoring system. Six (6) additional cameras were installed in CEC Chester. These cameras were installed in blind spots identified by the facility administrative team.

§115.215 – Limits to Cross-Gender Viewing and Searches

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

Community Education Center (CEC) policy 1200.06 addresses this standard. The facility does not allow cross-gender searches of any kind by non-medical staff. All staff reported that they received cross-gender pat search training (including how to search transgender and intersex residents) during institution familiarization training, by watching a mandatory video, and during annual refresher training. Officers reported that residents are always allowed to shower, dress, and use the toilet privately, without being viewed by staff of the opposite gender. Opposite gender staff announces their presence verbally when entering all areas holding residents. Announcements were observed by the auditor during the tour of all areas of the facilities. Staff were aware the policy prohibits the searching of a transgender or intersex resident to determine their genital status. The interviewed residents confirmed they were afforded significant privacy when using the toilet, changing clothes, or when showering and that announcements were made when opposite gender staff entered the housing units or any area holding residents. PREA notifications (English and Spanish) are posted in each housing unit of each facility within the complex, the intake units, resident work areas, and in all resident program areas.

§115.216 – RESIDENTS with Disabilities and Residents who are Limited English Proficient

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

Community Education Center (CEC) policy 1200.06 addresses the components of this standard. CEC Chester takes appropriate steps to ensure residents with disabilities and residents with limited English proficiency have an opportunity to participate in and benefit from the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. PREA handouts, postings and resident handbooks are in English and Spanish. Staff interviewed were aware that under no circumstance are resident interpreters or assistants to be used in dealing with any PREA related matter.

§115.217 – Hiring and Promotion Decisions

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

Community Education Center (CEC) policy 1200.06 and CEC procedure PREA Background Screening Procedure address this standard. The Human Resources Manager was interviewed, and stated that all components of this standard have been met. All employees, contractors, and volunteers have had their criminal background check completed. Policy does state that material omissions or false information submitted by applicants shall be grounds for termination. The agency cannot hire anyone with any background of sexual harassment or abuse. A tracking system is in place to ensure that updated background checks are conducted every five years.

§115.218 – Upgrades to Facilities and Technology

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

The video systems included 6 video cameras for facility. These camera systems was installed in locations identified as blind spots by the Administrative Review Team.

§115.221 – Evidence Protocol and Forensic Medical Examinations

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

Community Education Center (CEC) policy 1200.06 addresses compliance with all aspects of this standard. Custody staff were interviewed concerning this standard. Staff reported knowledge of the facilities' procedures to obtain usable physical evidence if sexual abuse is alleged. The facility uses the Pennsylvania Department of Corrections (Pa. DOC) for collection of Forensics evidence. Staff were aware that an outside source (PA. DOC) conduct all investigations. Specific actions and clinical decisions are required to determine if a resident is to be transported to the local hospital to receive a SAFE exam. No SAFE exams were conducted within the last year. The facility has contracted with a local hospital to provide these services (the resident will not be charged for any services related to PREA compliance). A signed Memorandum of Understanding with the rape crisis center was presented and reviewed for compliance.

§115.222 – Policies to Ensure Referrals of Allegations for Investigations

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

Community Education Center (CEC) policy 1200.06 addresses this standard. Administrative or criminal investigations would be completed on all allegations of sexual abuse and sexual harassment. The facility Director completes all administrative investigations. If, during the course of an investigation, evidence surfaces indicating criminal misconduct, the investigation would be referred to the Pa. DOC. There was zero allegations of sexual abuse or harassment during the last year.

§115.231 – Employee Training

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

Community Education Center (CEC) policy 1200.06 addresses this standard. All staff, contractors, and volunteers are provided training relative to their PREA responsibilities. Much of this training was provided through courses on PREA provided by the facility. Training curricula was reviewed for content. Annual Refresher Training with PREA as a topic is also provided to all employees. Staff acknowledge in writing their understanding of PREA. All staff were issued and carry an embossed reference card detailing their duties and responsibilities related to PREA. All staff interviewed indicated that they received the required PREA training.

§115.232– Volunteer and Contractor Training

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

Community Education Center (CEC) policy 1200.06 addresses this standard. During the past 12 months all volunteers received training related to their responsibilities concerning PREA (zero-tolerance, detection, prevention, response, and reporting requirements). All training is documented. Some contractors will be required to be trained in PREA as a requirement in their Scope of Work in upcoming bid proposals for July 1, 2015. All contractors who have repeated contact with residents are trained in PREA policies. All others are escorted within the facility and have no direct contact with residents.

§115.233 – Resident Education

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

Community Education Center (CEC) policy 1200.06 addresses this standard. Residents receive information at time of intake verbally, in a PREA pamphlet, and there is information provided in the resident handbook (provided to residents at the time of intake in English/Spanish. Provisions are in place to meet the needs of all disabled residents. There are

posters throughout the facility, and the “hotline” phone number to call to report abuse or harassment is in each housing unit. Residents sign an acknowledgement of having received this information at the time of intake.

§115.234 – Specialized Training: Investigations

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

Community Education Center (CEC) policy 1200.06 addresses this standard. The Director or designee has received specialized training relevant to PREA. The Director was interviewed and explained to the auditor in detail the steps to be taken during a PREA-related investigation. The training records reviewed confirmed completion of the required instruction.

§115.235 – Specialized training: Medical and mental health care

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

All mental health have received specialized training on victim identification, interviewing, reporting, and required clinical interventions. Annual refresher training is provided, and all training is documented. The facility does not employ medical staff. Residents are referred to the local ER. Training records were reviewed for compliance.

§115.241 – Screening for Risk of Victimization and Abusiveness

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

Community Education Center (CEC) policy 1200.06 addresses this standard. All residents are immediately assessed at intake for their risk of being sexually abused by other residents or being sexually abusive towards other residents by intake staff. A Case Manager also screens all new arrivals within their first 72 hours following arrival. At the time of arrival, staff also conduct the screening by reviewing records or other information from another

facility or other source which may be relevant to compliance with this standard. Residents identified as high risk for sexual victimization or at risk of sexually abusing other residents would be referred to a mental health professional for further assessment. Careful housing assignment (placement in a housing unit with additional supervision) or other appropriate action would then be considered to address the resident's needs. Any information received after intake is immediately considered, and may result in a change in housing or other necessary action. Status reassessments, by policy, will occur every 90 days. Staff interviews and observations of the intake process confirmed this information.

§115.242 – Use of Screening Information

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

Community Education Center (CEC) policy 1200.06 addresses this standard. Policy requires the use of a screening form to determine housing, bed, work, education, and program assignments with the goal of keeping residents at high risk of being sexually victimized separate from those who are at a high risk of being sexually abusive. Housing and program assignments are made on a case by case basis. There is in place a procedure for providing continued re-assessment and follow-up monitoring if needed.

§115.251 – Resident Reporting

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

Community Education Center (CEC) policy 1200.06 addresses this standard. A review of documentation indicated that there are multiple ways (including privately and anonymously) for residents to report sexual abuse or harassment. The officers interviewed stated staff and residents may privately report any abuse, harassment, or neglect verbally, in writing, anonymously or to a third party. Staff will immediately document any allegation. Posters and other documents are on display throughout the complex explaining the reporting procedures.

§115.252 – Exhaustion of Administrative Remedies

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

Community Education Center (CEC) policy 1200.06 addresses this standard. Residents may file a grievance; however, all allegations of abuse or harassment, when received by staff, would immediately result in the opening of a formal investigation (criminal or administrative). This process would not involve staff who may be the subject of the complaint. There have been no grievances involving PREA related issues filed during the previous year.

§115.253 – Resident Access to Outside Confidential Support Services

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

Community Education Center (CEC) policy 1200.06 addresses this standard. The facilities provide residents with access to outside victim advocates for emotional support services related to sexual abuse, by posting and providing PREA brochures with appropriate telephone numbers, or otherwise making accessible mailing addresses and telephone numbers, including toll free hotline numbers where available of the Delaware County Women against Rape (DCWAR). The facility enables reasonable communication between residents and these organizations and agencies, in as confidential a manner as possible

§115.254 – Third-Party Reporting

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

The facilities flyer entitled “Sexual Assault is a Crime” addresses the requirements of this standard. Third-parties are informed of reporting procedures on the facility toll free hotline.

§115.261 – Staff and Agency Reporting Duties

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

Community Education Center (CEC) policy 1200.06 addresses this standard. Staff interviewed were aware that they must immediately report allegations of abuse, harassment, retaliation, or neglect relevant to PREA. Compliance with all aspects of the standard was verified through a review of the policy and staff / resident interviews. All staff carries a first responder action card with the personal ID card and were able to list all of the steps of a first responders responsibilities.

§115.262 – Agency Protection Duties

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

Community Education Center (CEC) policy 1200.06 addresses this standard. The officers interviewed stated their duties and responsibilities if they became aware of a resident being in imminent risk for abuse (first-responder or otherwise), certain immediate, mandatory actions to protect the resident would take effect. Officers produced a card during the interview, issued by the facility, outlining all actions to be taken by a correctional officer who became aware of sexual abuse or harassment.

§115.263 – Reporting to Other Confinement Facilities

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

Community Education Center (CEC) policy 1200.06 addresses this standard. Policy requires reporting any PREA related allegation by a resident that occurred at another facility to the Director of the facility where the incident is alleged to have occurred by the Director of the facility in which the resident is currently housed. The notification is to occur as soon as possible, but always within 72 hours of receiving the allegation. Policy also requires that an investigation be initiated. There have been no allegations of sexual abuse or harassment that may have occurred at the CEC Chester reported from another facility.

§115.264 – Staff First Responder Duties

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

Community Education Center (CEC) policy 1200.06 addresses this standard. All staff interviewed were very knowledgeable concerning their first responder duties and responsibilities upon learning of an allegation that a resident had been the victim of sexual abuse. The correctional officers interviewed quoted specific actions (such as protection of the victim and preservation of evidence) to be taken, in compliance with PREA. All staff, including the Director, were carrying an embossed card as reference to direct them as to their responsibilities as a first responder to an allegation of a PREA incident. There have been no incidents within the previous year requiring first responder actions.

§115.265 – Coordinated Response

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

Community Education Center (CEC) policy 1200.06 addresses this standard. This policy fully describes procedures for all staff to comply with this standard.

§115.266 – Preservation of ability to protect residents from contact with abusers

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

Community Education Center (CEC) policy 1200.06 addresses this standard. First responder duties include the protection of residents from their abuser(s).

§115.267 – Agency protection against retaliation

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

Community Education Center (CEC) policy 1200.06 meets this standard. The policy specifically prohibits any type of retaliation to any staff member or resident who has reported sexual abuse or sexual harassment or who has cooperated with such investigations. The Security Director is the designated staff member to monitor all possibilities of retaliation and at a minimum would conduct checks with a resident who may have been victimized or reported victimization at least every 30 days for at least 90 days following an allegation. These checks may occur more frequently if indicated. This follow-up may also extend without limit if necessary. There have been no cases of retaliation discovered or reported within the previous year.

§115.271 – Criminal and Administrative Agency Investigations

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

Community Education Center (CEC) policy 1200.06 addresses this standard. The Director or her designee conducts administrative investigations within the facility. If an allegation appears to be criminal in nature, Pa. DOC is contacted for a criminal investigation. If the Pa. DOC substantiates the allegation the case is to be referred to the County Prosecutor's Office for prosecution. There were no criminal investigations in the previous year. All incidents are recorded on a PREA Incident Form

§115.272 – Evidentiary Standard for Administrative Investigations

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

Community Education Center (CEC) policy 1200.06 meets this standard. The evidence standard is a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.

§115.273 – Reporting to Residents

- 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)

Community Education Center (CEC) policy 1200.06 addresses this standard. There has been no administrative or criminal investigations initiated or completed during the previous year.

§115.276 – Disciplinary sanctions for staff

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

Community Education Center (CEC) policy 1200.06 addresses this standard. During the previous year, no staff member was disciplined in any manner nor has any resigned for violating agency sexual abuse or sexual harassment policies.

§115.277 – Corrective action for contractors and volunteers

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

Community Education Center (CEC) policy 1200.06 addresses this standard. During the previous year there have not been any incidents where a contractor or volunteer was accused of sexual abuse or sexual harassment at CEC Chester.

§115.278 – Disciplinary sanctions for residents

- 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)

Community Education Center (CEC) policy 1200.06 addresses this standard. Residents shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the resident engaged in resident-on-resident sexual abuse or following a criminal finding of guilt for resident-on-resident sexual abuse. CEC Chester has had no incidents of sexual misconduct with another resident in the past year. CEC Chester sanctions shall be commensurate with the nature and circumstances of the abuse committed, the resident's disciplinary history, and the sanctions imposed for comparable offenses by other residents with similar histories sanctions to residents as a result of sexual conduct with other residents or staff.

§115.282 – Access to emergency medical and mental health services

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

Community Education Center (CEC) policy 1200.06 addresses this standard. CEC Chester has had no resident in need of access to emergency medical or mental health treatment relevant to PREA within the previous year. If a need occurred, the facility would comply with all actions required by this standard (free treatment, documentation of services, information about sexually transmitted disease, confidentially).

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

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

Community Education Center (CEC) policy 1200.06 addresses this standard. No resident has been determined to need this type of treatment within the previous year.

§115.286 – Sexual abuse incident reviews

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

Community Education Center (CEC) policy 1200.06 addresses this standard. Staff interviews confirmed that at the conclusion of an investigation of sexual abuse there would be a review by the institution executive staff of all allegations other than those found to be unfounded as required by this standard. However, since there have been no incidents during the previous year, the auditor did not review documentation for compliance.

§115.287 – Data Collection

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

Community Education Center (CEC) policy 1200.06 addresses this standard. CEC Chester would collect accurate uniform data for every allegation of sexual abuse by using a standardized instrument (Incident Report Corp. Form). The report allows the facility to submit the annual DOJ Survey of Sexual Violence in a timely fashion, prepare an annual PREA report, monitor trends, and take corrective action when indicated. There have been no incident to report during the previous year.

§115.288 – Data Review for Corrective Action

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

CEC reviews the data collected to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, and to identify problem areas and take corrective action. The Institution PREA Compliance Manager ensures the data collected on sexual abuse for resident-on-resident cases is forwarded to his/her respective CEC Regional PREA Coordinator annually. The National PREA Coordinator ensures the information is provided for purposes of agency reporting. An annual report is prepared and published on the CEC website.

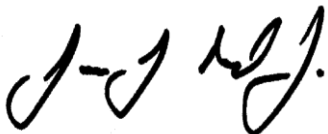
§§115.289 – Data Storage, Publication, and Destruction

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

Community Education Center (CEC) policy 1200.06 addresses this standard. The CEC National PREA Coordinator reviews data compiled by the CEC Regional PREA Coordinators and from this information issues a report to the CEO on an annual basis. The data is securely retained and published on the CEC website. The required reports cover all data noted in this standard, and are retained in a file.

AUDITOR CERTIFICATION:

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



02/08/2015

Auditor Signature

Date