

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

Interim Final

Date of Report: September 14, 2018

Auditor Information

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Telephone: 786.258.4951	Date of Facility Visit: June 18 - 20, 2018

Agency Information

Name of Agency: The GEO Group Inc.	Governing Authority or Parent Agency (If Applicable):
Physical Address: One Park Place, Suite 700, 621 Northwest 53rd Street	City, State, Zip: Boca Raton, FL 33487
Mailing Address: One Park Place, Suite 700, 621 Northwest 53rd Street	City, State, Zip: Boca Raton, FL 33487
Telephone: 561-999-5827	Is Agency accredited by any organization? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
The Agency Is:	<input checked="" type="checkbox"/> Private for Profit <input type="checkbox"/> Private not for Profit <input type="checkbox"/> Military <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Federal
<input type="checkbox"/> Municipal	

Agency mission: **GEO's mission is to develop innovative public-private partnerships with government agencies around the globe that deliver high quality, cost-efficient correctional, detention, community reentry, and electronic monitoring services while providing industry leading rehabilitation and community reintegration programs to the men and women entrusted to GEO's care.**

Agency Website with PREA Information:

[http://www. Geogroup.com/PREA](http://www.Geogroup.com/PREA)

Agency Chief Executive Officer

Name: George C. Zoley

Title: Chairman of the Board, CEO and Founder

Email: gzoley@geogroup.com

Telephone: (561) 893-0101

Agency-Wide PREA Coordinator

Name: Phebia Moreland

Title: Director, Contract Compliance, PREA Coordinator

Email: pmoreland@geogroup.com

Telephone: (561) 999-5827

PREA Coordinator Reports to:

Daniel Ragsdale, Executive Vice President,
Contract Compliance

Number of Compliance Managers who report to the PREA Coordinator

54 (US Corrections), 46 (Reentry Services)
8 (Youth Services) , 3 (Lockups) = **111**

Facility Information

Name of Facility: Queens Private Detention Facility

Physical Address: 182-22 150 Avenue
Jamaica, New York 11413

Mailing Address (if different than above): P.O. Box 9044 Florence, AZ 85132

Telephone Number: (718) 553-5420

The Facility Is:

Military

Private for profit

Private not for profit

Municipal

County

State

Federal

Facility Type:

Jail

Prison

Facility Mission:

In order to preserve the public trust, our mission is to provide a higher standard of performance for public/private partnership detention facilities. This will be accomplished by working together to maintain a safe, secure and humane environment for detainees and visitors.

Facility Website with PREA Information:

<http://www.geogroup.com/PREA>

Warden/Superintendent

Name: **William Zerillo** Title: **Facility Administrator**

Email: **wzerillo@geogroup.com** Telephone: **(718) 553-5420 ext. 107**

Facility PREA Compliance Manager

Name: **Calvin Arthur** Title: **PREA Compliance Manager**

Email: **carthur@geogroup.com** Telephone: **(718) 553-5420 ext. 159**

Facility Health Service Administrator

Name: **Norene Thomas** Title: **Health Service Administrator**

Email: **nthomas@geogroups.com** Telephone: **(718) 553-5420 ext. 154**

Facility Characteristics

Designated Facility Capacity: **240** Current Population of Facility: **215**

Number of inmates admitted to facility during the past 12 months **189**

Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for 30 days or more: **189**

Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for 72 hours or more: **189**

Number of inmates on date of audit who were admitted to facility prior to August 20, 2012: **14**

Age Range of Population: Youthful Inmates Under 18: **N/A** Adults: **21 - 70**

Are youthful inmates housed separately from the adult population? Yes No NA

Number of youthful inmates housed at this facility during the past 12 months: **0**

Average length of stay or time under supervision: **1 yr 6mths**

Facility security level/inmate custody levels: **Medium Custody**

Number of staff currently employed by the facility who may have contact with inmates: **135**

Number of staff hired by the facility during the past 12 months who may have contact with inmates: **135**

Number of contracts in the past 12 months for services with contractors who may have contact with inmates: **5**

Physical Plant

Number of Buildings: 1

Number of Single Cell Housing Units: N/A

Number of Multiple Occupancy Cell Housing Units:

N/A

Number of Open Bay/Dorm Housing Units:

7

Number of Segregation Cells (Administrative and Disciplinary):

8

Description of any video or electronic monitoring technology (including any relevant information about where cameras are placed, where the control room is, retention of video, etc.):

Currently, the Queens Private Detention Facility has an electronic monitoring system. Queens Private Detention Facility has 116 cameras strategically placed throughout the facility to enhance detainee monitoring and safety.

Medical

Type of Medical Facility:

24/7 onsite Triage Clinic

Forensic sexual assault medical exams are conducted at:

Jamaica Hospital Medical Center & Elmhurst Memorial Medical

Other

Number of volunteers and individual contractors, who may have contact with inmates, currently authorized to enter the facility:

8

Number of investigators the agency currently employs to investigate allegations of sexual abuse:

111

Audit Findings

Audit Narrative

Wynn R. Testamark, Department of Justice (DOJ) Certified PREA Auditor, conducted the PREA Audit of Queens Private Detention Facility; a privately owned and operated Detention Center by the GEO Group, Inc. under contract with the United States Marshals Service (USMS).

Approximately four weeks prior to the audit, agency wide and facility specific supplemental documentation was mailed to this auditor via U S Express Mail, which was received, on May 23, 2018. The documentation arrived in digital format (on a secured flash drive). The documentation consisted of agency policies, directives and facility specific procedures responding to policy, samples of supporting documentation to each standard and the completed Pre-Audit Questionnaire.

Prior to the audit, the facility was provided with a memorandum noting the scheduled date of the facility audit and tour, contact information to be posted throughout the facility for detainees and staff to view. The facility onsite audit and tour was scheduled for, and conducted on, June 18 – 20, 2018

The PREA Resource Audit Instrument used for Adult Prisons and Jails was provided by the National PREA Resource Center. There are seven sections: A) Pre-Audit Questionnaire; B) the Auditor Compliance Tool; C) Instructions for the PREA Audit Tour; D) the Interview Protocols; E) the Auditor's Summary Report; F) the Process Map; and G) the Checklist of Documentation.

The Auditor met with Jennifer Sheahan, Manager, GEO Contract Compliance Monday, June 18, 2018 and discussed the PREA audit process and what to be expected during the on-site portion of the audit.

Later that day, Jennifer Sheahan, Manager, GEO Contract Compliance, transported the auditor to Queens Private Detention Facility; and subsequently daily thereafter. At QPDF, the auditor met with Facility Administrator representatives, for an entrance briefing. Shortly thereafter, we began with a tour of the facility. The tour began at 1:45 p.m. and concluded at 3:30 p.m. Accompanying on the tour was Carl Newton, Chief of Security; Calvin Arthur, Contract Compliance/PREA Compliance Manager; and Jennifer Sheahan, GEO Manager, Contract Compliance.

On day one of the audit, Queens Private Detention Facility reported a detainee count of (215). The Queens Private Detention Facility is a complex comprised of one (1) building; inclusive of two (2) floors; (8) housing units (7 dorms & 1 RHU), and a 24hr/7 Triage Clinic.

A facility tour was conducted and the auditor interacted with both staff and detainees at that time. Additional areas toured were housing units (dorms), RHU, medical, intake/release, recreation, laundry, food services, library, program areas, visitation, commissary, maintenance, and central control.

The auditor had the opportunity to observe the operations of the facility, and the interaction between staff and detainees. While touring, informal interviews with staff and detainees; observation of log-book entries of unannounced rounds being conducted by intermediate and higher level facility staff were made; and visually reviewed view of toilet and shower areas.

Following the tour, the auditor began formal random interviews of detainees and staff; inclusive of specialized staff and detainees present at the facility during the time of the audit. Interviews were conducted in areas of relative privacy. Everyone interviewed participated willingly and appeared to have a good understanding of the PREA standards and the agency's response and requirements regarding the standards, zero tolerance policy and reporting procedures.

Detainees interviewed, expressed a thorough understanding of their right to be free from sexual abuse, harassment, and retaliation. They also knew the appropriate channels in which to report allegations and they were aware of the medical and counseling services available to them.

The auditor reviewed the documentation provided by the facility prior to the onsite visit. During the tour, the auditor randomly reviewed additional documentation throughout the facility in order to verify that the samples provided was consistent with routine facility practice. This included viewing postings, pamphlets, investigative files (2), detainees' files (25), employee personnel files (12), medical and mental health files (3), and training documentation (22) for staff, contractors, volunteers, and detainees alike.

The auditor observed signage posted in English and Spanish, throughout the facility-explaining detainees' rights to be free from sexual abuse and how to report allegations of sexual abuse and harassment. The agency's PREA Coordinator in collaboration with facility PREA Compliance Manager, and facility staff, ensures the information is disseminated throughout the facility for everyone to have access.

No forensic medical exams are conducted at Queens Private Detention Facility, but can provide emergency medical healthcare if needed. Forensic examinations by SANE/SAFE staff are provided at one of the community hospitals, Jamaica Hospital Medical Center and Elmhurst Memorial Medical.

The auditor conducted formal interviews with (24) random detainees; (1) Disabled detainee; (0) Hard of hearing detainee; (2) GBT detainee; (0) Transgender detainee, (2) Limited English Proficient detainees; (0) Detainees with cognitive disorders, (0) Detainee in restrictive housing, (0) Detainee who report sexual abuse or harassment, (8) High risk of victimization detainee and; (0) Detainee who reported previous abuse or harassment during the intake screening.

Queens Private Detention Facility does not house youthful inmates.

There was no detainee who reported sexual abuse; who disclosed sexual victimization during risk screening; nor housed in segregation for risk of sexual victimization at Queens Private Detention Facility at the time of the audit. As previously stated, all detainees interviewed demonstrated knowledge of the agency's zero tolerance policy for sexual abuse, harassment and retaliation, and were able to identify how to report allegations of sexual abuse, harassment & retaliation.

Queens Private Detention Facility currently employs (135) staff at the time of the audit.

The auditor formally interviewed (22) random staff; comprised of all shifts. (1) Contractor Administrator (HR); (1) Medical staff; (1) Mental Health staff (Contract); (1) Volunteer (1) Facility Investigator; (1) Staff who perform screening for risk of victimization and abusiveness; (2) Staff member on the incident review team; (2) staff member in charge with monitoring retaliation; (8) staff first responders, both security and non-security staff interviewed; (2) Intake staff members; (1) Shift Supervisor; and (1) PREA Compliance Manager.

In conclusion, a total of twenty-two (22) staff from all three shifts, and twenty-four (24) detainees' formal interviews were conducted; with one (1) detainee refusal. Formal interviews were conducted utilizing the approved PREA questionnaires from the PREA Resource Center. The random sample of detainees was selected from the general housing population.

Queens Private Detention Facility (QPDF) has not undergone any significant renovations or modifications during the past 12 months. QPDF has 116 cameras strategically placed throughout the facility. Every area of the facility was observed as the standard requires and the auditor observed detainees being supervised throughout the audit.

There was three (3) areas identified during the tour that needed security enhancement to cover blind spots: (kitchen; security mirror) & privacy modification: (A & D Dorms; shower curtains). As a result, the administrator submitted a purchase order for security mirrors and shower curtains before the audit concluded.

At the conclusion of the audit, an exit meeting was held with the following administrative staff attending: Carl Newton, Chief of Security; Calvin Arthur, Contract Compliance/PREA Compliance Manager; Jennifer Williams, Administration Secretary; Jairo Echeveri, Training Administrator; and Jennifer Sheahan, GEO PREA Manager, Contract Compliance.

Audit observations and findings were discussed at that time. Queens Private Detention Facility administrators were thanked for their cooperation throughout the entire process. They were informed of the process that would follow the on-site visit and commended them on their hard work and commitment to creating a sexually safe environment and the Prison Rape Elimination Act.

Facility Characteristics

The Queens Private Detention Facility (QPDF) located at 182-22 150th Avenue, Jamaica New York is an all male facility. QPDF is located in Jamaica, New York City (NYC), in close proximity to JFK International Airport and reasonably distanced from Jamaica Hospital and other services.

The facility is owned and operated by the GEO Group. The facility's rated capacity is 241 detainees; the count on the first day of the audit was 215. The average length of stay at QPDF is 187 days. The US Marshals Service E/NY is responsible for detainees housed at QPDF. The USMS office and US Courthouse are located 15 miles from QPDF.

QPDF is a two-story structure with living areas and programs and service areas located on the bottom floor. Programs and services are available to all detainees; ramps provide accessibility for detainees with mobility limitations. Space requirements and grab bars are evident in disability accessible showers and lavatory stalls. With the exception of the eight-cell RHU, housing units offer dormitory-style living with sleep areas separated from day rooms.

First floor program and service areas include food, medical, indoors gymnasium and outdoors recreation area, law library, laundry, classification, maintenance, and a non-contact visitation area. The Intake area is also located on the first floor, adjacent to the Intake Garage. Staff, contractors, volunteers, and visitors enter and depart through the main entrance.

The second floor includes staff offices, Executive Offices, Human Resources, Quality Assurance/Safety Manager Office, Business Office, the Training Department, and the Transportation Unit.

There are 116 CCTV cameras throughout the facility monitoring the grounds and perimeter and recorded by DVR.

Healthcare services are provided for Queens Private Detention Facility through a contract with Correct Care Solutions. Under the direction of the Facility Health Services Administrator, with the assistance of a staff of Registered Nurses, the Health Unit provided 24-hour medical coverage. The staffing pattern consists of one (1) full time and six (6) as needed (PRN) RNs; three (3) full time and two (2) (PRN) Licensed Practical Nurses; one (1) Physician; one (1) Psychologist; and one (1) Medical Records Clerk.

All medical staff is CPR certified. All staff is trained annually. All staff carries a CPR kit with a face shield and gloves. In addition, all medical staff receives annual PREA refresher training.

The Medical Provider is on call 24/7. The Medical Provider provides direction based upon

assessment. Detainees are scheduled after the initial assessment by the provider based upon their medical history. Detainees are triaged by nursing staff upon arrival. Mental Health sees the detainees upon referral. The Mental Health providers are on call 24/7.

On January 14, 2002, initial American Correctional Association (ACA) was awarded and most recently, re-accreditation was confirmed January 23, 2017. In September 2016, National Commission on Correctional Health Care (NCCHC) accreditation was granted. The facility was certified as Prison Rape Elimination Act (PREA) compliant in March 2015.

Mission Statement

The mission of Queens Private Detention Facility (QPDF):

In order to preserve the public trust, our mission is to provide a higher standard of performance for public/private partnership detention facilities. This will be accomplished by working together to maintain a safe, secure and humane environment for detainees and visitors.

GEO's mission is to develop innovative public-private partnership with government agencies around the globe that deliver high quality, cost efficient correctional, detention, community reentry and electronic monitoring service while providing industry leading rehabilitation and community reintegration programs to men and women entrusted to GEO's care.

Summary of Audit Findings

Queens Private Detention Facility (QPDF) exceeded in four standards and met compliance to the remaining standards. Details of the audit findings are as follows:

Number of Standards Exceeded: 4

Standard 115.13: Supervision and monitoring

Standard 115.17: Hiring and promotion decisions

Standard 115.31: Employee training

Standard 115.33: Inmate education

Number of Standards Met: 40

Queens Private Detention Center (QPDF) met compliance in all the requirements of the following standards:

115.11; 115.12; 115.14; 115.15; 115.16; 115.18; 115.21; 115.22; 115.32; 115.34; 115.35; 115.41; 115.42; 115.43; 115.51; 115.52; 115.53; 115.54; 115.61; 115.62; 115.63; 115.64; 115.65; 115.66; 115.67; 115.71; 115.72; 115.73; 115.76; 115.77; 115.78; 115.81; 115.82; 115.83; 115.86; 115.87; 115.88; 115.89; 115.401 and 115.403.

Number of Standards Not Met: 0

Summary of Corrective Action (if any)

Standard 115.15: Limits to cross-gender strip and visual body cavity searches of inmates

- subsection (d) of this standard

Although QPDF has policies in place; the practice that enables detainees to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks is not being adhered to.

Above-mentioned findings ultimately resulted in a 180-day corrective action period. A plan of action was developed and agreed upon. **Queens Private Detention Facility 180-day period commenced August 6, 2018 and will end on February 6, 2019.**

Corrective Action Plan was initiated. However; on August 29, 2018; to ensure compliance, pictures showing compliance of the privacy modifications was provided via electronic mail to auditor. The pictures depicted D-Dorm shower wall was raised from 48 to 56 inches and shower curtains installed in A-Dorm showers.

Therefore, providing privacy modification as stated above, subsection (d) of this standard, the practice that enables detainees to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks is now being adhered to. Queens Private Detention Center is compliant.

PREVENTION PLANNING

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

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

115.11 (a)

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

115.11 (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*)

GEO Policy 5.1.2, 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), and QPDF Policy & Procedure 14.008: PREA; has a written plan mandating zero tolerance towards all forms of sexual abuse and sexual harassment and outlines the agency's approach to preventing, detecting and responding to such conduct. Agency policies include definitions of prohibited behaviors and sanctions for those found to participate in these prohibited behaviors outlines the definitions of prohibited behaviors for detainees and staff.

GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA) and QPDF Policy & Procedure 14.008: PREA, outline the responsibilities of the PREA Coordinator and the PREA Compliance Manager. In interview with the agency's PREA Coordinator, at an earlier audit date, and the PREA Compliance Manager, they both stated that they have sufficient time and authority to manage their PREA-related responsibilities.

Based upon review of GEO Policy 5.1.2, 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), and QPDF P&P 14.008: PREA, observations of PREA postings, pamphlets, and interviews with Facility Administrator, agency PREA Coordinator, and PREA Compliance Manager, Queens Private Detention Facility meets this standard.

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

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

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 OR the response to 115.12(a)-1 is "NO".) Yes No NA

Auditor Overall Compliance Determination

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

Based on review of policy 5.1.2.A; Queens Private Detention Facility (QPDF) policy 14.008 and review of contract modification with US Marshals Services (USMS) (03/2014), and on interview with agency's contract compliance manager.

All contracts include the entity's obligation to adopt and comply with the PREA standards.

GEO is a private provider and does not contract with other agencies for the confinement of detainees; therefore, this standard is not applicable.

Standard 115.13: Supervision and monitoring

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

115.13 (a)

- Does the agency ensure that each facility has developed a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse? Yes No
- Does the agency ensure that each facility has documented a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse? Yes No
- Does the agency ensure that each facility's staffing plan takes into consideration the generally accepted detention and correctional practices in calculating adequate staffing levels and determining the need for video monitoring? Yes No
- Does the agency ensure that each facility's staffing plan takes into consideration any judicial findings of inadequacy in calculating adequate staffing levels and determining the need for video monitoring? Yes No

- Does the agency ensure that each facility’s staffing plan takes into consideration any findings of inadequacy from Federal investigative agencies in calculating adequate staffing levels and determining the need for video monitoring? Yes No
- Does the agency ensure that each facility’s staffing plan takes into consideration any findings of inadequacy from internal or external oversight bodies in calculating adequate staffing levels and determining the need for video monitoring? Yes No
- Does the agency ensure that each facility’s staffing plan takes into consideration all components of the facility’s physical plant (including “blind-spots” or areas where staff or inmates may be isolated) in calculating adequate staffing levels and determining the need for video monitoring? Yes No
- Does the agency ensure that each facility’s staffing plan takes into consideration the composition of the inmate population in calculating adequate staffing levels and determining the need for video monitoring? Yes No
- Does the agency ensure that each facility’s staffing plan takes into consideration the number and placement of supervisory staff in calculating adequate staffing levels and determining the need for video monitoring? Yes No
- Does the agency ensure that each facility’s staffing plan takes into consideration the institution programs occurring on a particular shift in calculating adequate staffing levels and determining the need for video monitoring? Yes No NA
- Does the agency ensure that each facility’s staffing plan takes into consideration any applicable State or local laws, regulations, or standards in calculating adequate staffing levels and determining the need for video monitoring? Yes No
- Does the agency ensure that each facility’s staffing plan takes into consideration the prevalence of substantiated and unsubstantiated incidents of sexual abuse in calculating adequate staffing levels and determining the need for video monitoring? Yes No
- Does the agency ensure that each facility’s staffing plan takes into consideration any other relevant factors in calculating adequate staffing levels and determining the need for video monitoring? 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*)

Queens Private Detention Facility has an established staffing plan, which provides for adequate levels of staffing and, facility utilizes direct supervision model to protect detainees against sexual abuse. According to documentation reviewed, QPDF made its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing and uses video monitoring to protect inmates against sexual abuse. A "PREA Annual Facility Assessment" is completed by the PREA Compliance Manager and the Compliance Administrator and forwarded to the PREA Coordinator and the Corporate Divisional Vice President for review and signature.

Additionally, according to the Facility Administrator, the staffing plan was developed considering the generally acceptable correctional practices; any judicial findings, any findings of inadequacy from federal investigative agencies, any findings of inadequacy from internal or external oversight bodies, all components of the physical plant, the detainee population, the number and placement of supervisory staff, institutional programs and the shifts they occur on applicable state or local laws or regulations, the prevalence of substantiated and unsubstantiated incidents of sexual abuse and any other relevant information.

Agency's policies also mandate that facility management staff and mid-level supervisors will conduct and document unannounced PREA rounds within their respective areas to deter employee sexual abuse and sexual harassment. This practice was confirmed by interview with detainees and staff who reported frequent rounds being conducted on a daily basis.

The last PREA Facility Assessment completed on 10/10/17, noted no deviations from the staffing plan and no recommendations were made for any changes to the current staffing levels. Queens Private Detention Facility has a contract mandated staffing plan and currently maintain the amount of staff required by the US Marshal Services. The facility covers any vacancies of security posts by utilizing overtime.

Queens Private Detention Facility has an electronic monitoring system and have 116 cameras strategically placed throughout the facility.

Based on my review of GEO Policy 5.1.2, 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), QPDF Policy 14.008: PREA, Annual PREA Assessment, GEO Contract with US Marshals Services, QPDF Staffing Plan, QPDF Shift Rosters, QPDF Staffing Plan, Unannounced PREA Rounds, Housing Unit Post Order, Daily Shift Report, Camera Locations and interviews with Facility Administrator, PREA Compliance Manager, Shift Supervisors, staff and detainees, Queens Private Detention Facility exceeds this standard.

Standard 115.14: Youthful inmates

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

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*)

Queens Private Detention Facility does not house youthful detainees; therefore, this standard does not apply.

Standard 115.15: Limits to cross-gender viewing and searches

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

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 in non-exigent circumstances? (N/A here for facilities with less than 50 inmates before August 20, 2017.) Yes No NA

Females are not housed at this facility

- 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 here for facilities with less than 50 inmates before August 20, 2017.) Yes No NA

Females are not housed at this facility

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?
 Yes No NA

Females are not housed at this facility

115.15 (d)

- Does the facility implement a policy and practice 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 security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs? Yes No
- Does the facility/agency train security staff 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*)

GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), QPDF Policy 14.008: PREA addresses inmate pat searches, strip searches, body cavity searches and the limits to cross gender viewing and searches. Policies and Procedures states that staff members of the same gender may perform strip searches and specifying searches of transgender and intersex detainees. The facility does not conduct cross gender pat down searches, strip searches or body cavity searches. A staff member of the same gender conduct pat searches and these searches are documented on a "Strip Search Log".

Although Queens Private Detention Facility has not received any transgender or intersex detainees; there is a policy in place that does not allow a search or physical examine of a transgender or intersex detainee for the sole purpose of determining the detainee's genital status. If the detainee's genital status is unknown, it is determined during conversations with the detainee, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner.

All security staff at Queens Private Detention Facility has received training in how to conduct cross-gender pat down searches and 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.

Queens Private Detention Facility houses only male detainees.

No cross-gender strip-searches or cross gender visual body cavity searches have been performed at Queens Private DF during the past 12 months.

At the conclusion of the initial onsite, Queens Private Detention Facility was non-compliant and it was determined that during the tour, there were two (2) areas identified: (A & D-Dorm showers); that were without privacy screens (shower curtains). Thereby allowing for staff of the opposite gender to view detainees while they shower. As a result, the administrator submitted a purchase order for shower curtains before the audit concluded.

Corrective Action Plan was initiated. However; on August 29, 2018; to ensure compliance, pictures showing compliance of the privacy modifications was provided via electronic mail to auditor. The pictures depicted D- Dorm shower wall raised from 48 to 56 inches and shower curtains installed in A-Dorm showers.

Consequently, providing privacy modification as stated above, subsection (d) of this standard, the practice that enables detainees to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks is now being adhered to. Queens Private Detention Facility is compliant.

Based upon review of, GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), QPDF Policy 14.008: PREA, PREA Pre-Service Lesson Plan, PREA In-Service Lesson Plan, Security Staff PREA Training, Logbook Entry “Opposite Gender Announcement”, Strip Search Log, Statement of Fact, and interviews with the PREA Compliance Manager, Supervisors, staff, detainees, photos of shower curtains installation in A-Dorm showers & shower wall raised from 48 to 56 inches in D-Dorm, Queens Private Detention Facility meet this standard.

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

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

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*)

The Queens Private Detention Facility takes all necessary steps to ensure detainees 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.

A contract with Language Line Services, Inc. provides translation services of any other languages. Detainees with literacy problems or visual impairments will be provided oral translations of PREA training material. Bilingual Posters were observed throughout the facility and in detainee housing units, library, and program areas.

The agency does not use detainees as interpreters, readers of other types of detainee assistants. Facility Administrator provides a list of staff identified as interpreters.

Based on my review of GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), QPDF Policy & Procedure 14.008: PREA, Language Line Contract, Language Line Instructions, List of Bi-Lingual Employees, Photo of TTY Telephones and their Locations, Training Lessons-Disabled Detainees Rights, Detainee Handbooks, PREA Brochures, Statement of Fact, posters throughout the facility, housing units, the PREA orientation video, and interviews with staff and detainees, Queens Private Detention Facility meets this standard.

Standard 115.17: Hiring and promotion decisions

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

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, or 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*)

According to GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), and QPDF Policy & Procedure 3.017: Background Screening, QPDF do not hire or promote anyone who may have contact with detainees, and does not enlist the services of any contractor or volunteer who may have contact with detainees, who has engaged in sexual abuse in prison, jail, lockup, community confinement facility, juvenile facility, or other institution, has been convicted of engaging or attempting to engage in sexual activity in the community.

Human Resource screens all applicants for Queens Private Detention Facility. All documentation is submitted by the facility to the Contracting Officers' Representative (COR), to receive clearances. Criminal background checks are conducted by U. S. Marshals Services (USMS) for all full time employees, before hiring. The final determination is the responsibility of the USMS.

In addition, the agency performs a criminal background records check before enlisting the services of any contractor who may have contact with detainees and performs a records check at least every five years of current employees and contractors who may have contact with detainees. All background checks are performed by the agency "Accurate Background".

For consideration for promotions or transfers, employees complete a "PREA Disclosure and Authorization Form Promotions – PREA Related. At the time of annual performance evaluations, employees complete a PREA Disclosure and Authorization Form Annual Performance Evaluation". Background checks are completed on all employees and contractors every five years.

In the past 12 months, there have been twenty-five (25) persons hired at Queens Private Detention Facility who may have contact with detainees who have had criminal background record checks.

In the past 12 months, there has been one (1) contract for services at Queens Private Detention Facility, where criminal background record checks were conducted on all staff covered in the contract that might have contact with detainees.

Based upon: GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), QPDF Policy & Procedure 3.017: Background Screening, New Hire Employee Background Check, New Contracted Employee, New Volunteer Employee, Annual Performance Evaluation and PREA Disclosure Waiver, Five Year Background Check, Promotion Documentation, Statement of Fact, and interview with PREA Compliance Manager, HR staff, Intake Supervisor, and random staff, Queens Private Detention Facility exceeds this standard.

Standard 115.18: Upgrades to facilities and technologies

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

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*)

When installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, The Queens Private Detention Facility considers how such technology may enhance its ability to protect detainees from sexual abuse. There have been no substantial expansions or modifications to the existing facility.

Currently, the Queens Private Detention Facility has an electronic monitoring system; and uses effectively placed security mirrors, see through wall partitions/windows, privacy screens and security staffing to enhance detainee monitoring and safety.

The Queens Private Detention Facility meets this standard.

RESPONSIVE PLANNING

Standard 115.21: Evidence protocol and forensic medical examinations

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

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 evidentiarily or medically appropriate? Yes No
- Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible? Yes No
- If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)? Yes No
- Has the agency documented its efforts to provide SAFEs or SANEs? Yes No

115.21 (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? Yes No
- 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 entity 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 attempts to make a victim advocate from a rape crisis center available to victims per 115.21(d) above.] 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*)

According to GEO Policy 5.1.2-E: Investigation Allegations of Sexually Abusive Behavior (PREA) Evidence Collection, and QPDF Policy & Procedure: 14.008 PREA, the facility follows a uniform evidence protocol for the collection and preservation of evidence for administrative and criminal investigations of sexual abuse.

It is the responsibility of the Office of Inspector General (OIG) and GEO Corporate to conduct investigations and to ensure that all evidence is collected and preserved according to evidence protocol established by the Department of Justice.

No forensic medical exams are conducted at Queens Private Detention Facility but; emergency medical healthcare is provide if needed. Forensic examinations by SANE/SAFE staff are provided at Elmhurst Medical Center. At QPDF, Safe Horizons provides detainees after care services. Calls to Safe Horizons are toll free and will not be monitored.

These services are provided at no cost to the detainee. A victim advocate is provided to the detainee upon request to provide emotional support.

During the past 12 months, there were no forensic medical exams performed by SANE/SAFE staff.

In the past 12 months, there were no incidents that required the use of a victim advocate.

Based upon, GEO Policy 5.1.2-E: Investigation Allegations of Sexually Abusive Behavior (PREA) Evidence Collection, and QPDF Policy & Procedure: 14.008 PREA, Emails-Attempting to obtain MOU, Safe Horizon Counseling Services, Pamphlets, Statement of Fact, New York State Certified Examiners, PREA Compliance Manager, Medical, Mental Health staff interviews, Queens Private Detention Facility meets this standard.

Standard 115.22: Policies to ensure referrals of allegations for investigations

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

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 policy 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 policy on its website or, if it does not have one, made the policy 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 such publication 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*)

GEO Policy 5.1.2-E: Investigation Allegations of Sexually Abusive Behavior (PREA) Evidence Collection, and QPDF Policy & Procedure: 14.008 PREA both outlines the agency's policy and procedure for investigating and documenting incidents of sexual abuse. All allegations of sexual abuse shall be investigated. In addition, procedures outline evidence protocols for administrative investigations and criminal prosecutions.

The agency's policy regarding referral of allegations for sexual abuse and sexual harassment is available on the agency website at: www.geogroup.com (Social Responsibility Section), which was reviewed by this auditor.

During the past 12 months, there have been four (4) (1 abuse / 3 harassment) allegations of sexual abuse and sexual harassment; four (4) allegations resulting in an administrative investigation; and zero allegations were referred for criminal investigation.

Based on reviewed policies/procedures: GEO Policy 5.1.2-E: Investigation Allegations of Sexually Abusive Behavior (PREA) Evidence Collection, and QPDF Policy & Procedure 14.008: PREA, interviews with the PREA Compliance Manager, Facility Investigator, and review of agency website: www.geogroup.com (Social Responsibility Section), OPR Referral, PREA Annual Tracking Log, Copy of USMS Contract, and Facility PREA Investigator Certificate (10/15/16), Queens Private Detention Facility meets this standard.

TRAINING AND EDUCATION

Standard 115.31: Employee training

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

115.31 (a)

- Does the agency train all employees who may have contact with inmates on its zero-tolerance policy 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 policies 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 policies 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 policies? 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*)

GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), and QPDF Policy 14.008: PREA, addresses the agency's training requirements. All QPDF employees, contractors and volunteers receive GEO PREA training on the agency's zero-tolerance policy for sexual abuse and sexual harassment at pre-service for all correctional staff, New Employee Orientation for non-correctional staff and annually as part of in-service training. The training curriculum was reviewed and found to contain all the requirements of the standard.

Staff interviewed at Queen Private Detention Facility was very knowledgeable about the agency zero-tolerance policy for sexual abuse and sexual harassment; How to fulfill their responsibilities concerning prevention, detection, reporting, and response concerning sexual abuse and sexual harassment; The detainees' rights to be free from sexual abuse and sexual harassment; Detainee and employee's rights to be free from retaliation for reporting sexual abuse and sexual harassment; The dynamics of sexual abuse and harassment in confinement; The common reaction of victims to sexual abuse and sexual harassment; How to detect signs of sexual abuse and sexual harassment; How to avoid inappropriate relationships; How to communicate effectively and professionally with detainees (BGTI); and how to comply with relevant laws related to mandatory reporting.

Employees who may have contact with detainees; receive refresher training on PREA requirements annually at in-service training and were knowledgeable of the zero tolerance policy and of their responsibilities related to the prevention, detection and response to sexual abuse and sexual harassment.

Training records are maintained electronically for each employee. Training records assessed of 25 employees (22 security/3medical), confirmed staff are receiving the mandated PREA training. Employees acknowledged receiving and understanding this training by their signature on the QPDF "PREA Training Acknowledgement" form as well as being documented in the employee's electronic training record.

During the past 12 months, 135 employees at Queens Private Detention Facility employees, who may have contact with detainees, were trained or retrained on the PREA requirements.

Based on the following policies/procedures: GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), QPDF Policy & Procedure 14.008: PREA, employee PREA training records, PREA Pre- Service Lesson, PREA In-Service Lesson, QPDF PREA Training Acknowledgment, Electronic Verification reviewed, and staff, detainee, PREA Compliance Manager interviews, Queens Private Detention Facility exceeds this standard.

Standard 115.32: Volunteer and contractor training

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

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 policies 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 policy 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*)

Based on the following policies/procedures: GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), QPDF Policy & Procedure 14.008: PREA, all contractors and volunteers who have contact with detainees at Queens Private Detention Facility; receive PREA Orientation training prior to assuming their responsibilities. Orientation includes the agency's policy and procedures regarding sexual abuse and sexual harassment prevention, detection, reporting, and response including zero tolerance.

There are five (5) contractors (medical and commissary), and three (3) volunteers (religious), who have contact with detainees, who have been trained in agency policies and procedures regarding sexual abuse/harassment prevention, detection, and response. Upon completion of orientation, the volunteer/contractor signs the Acknowledgment Form. Signed forms are

maintained at the facility.

Based upon interviews with the PREA Compliance Manager, and Facility Chaplain and the following documentation: Current Roster for Volunteers, PREA Lesson Plan- Pre-Service , PREA Lesson Plan - In-Service, Authorized Contracted Employee List, PREA Training and Acknowledgement Form - Contracted Employees, Commissary Contractor List, Commissary Contractor Acknowledgement Forms, Queens Private Detention Facility meets this standard.

Standard 115.33: Inmate education

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

115.33 (a)

- During intake, do inmates receive information explaining the agency's zero-tolerance policy 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 policies and procedures for responding to such incidents? Yes No

115.33 (c)

- Have all inmates received such education? Yes No
- Do inmates 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?
 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*)

GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), and QPDF Policy & Procedures 14.008 PREA, outlines the agency's requirements on detainee education. Incoming detainees receive information explaining GEO's zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment. Upon arrival, all detainees sign a form acknowledging receipt of the Detainee Handbook (English/Spanish), which contains PREA information.

Within 30 days of intake, The QPDF provides a comprehensive education to detainees in person and then shows a 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 procedures for responding to such incidents.

The QPDF provides detainee education in formats accessible to all detainees, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to detainees who have limited reading skills. There is documentation of detainee participation in these education sessions. Posters in both English and Spanish were notably displayed in various locations the housing units and throughout the facility.

Queens Private Detention Facility admitted 189 detainees during past 12 months who were given PREA information at intake.

During the past 12 months, 189 detainees at Queens Private Detention Facility (whose length of stay in the facility was for 30 days or more) received comprehensive education on their rights to be free from both sexual abuse/harassment and retaliation for reporting such incidents and on agency policies and procedures for responding to such incidents within 30 days of intake.

All detainees interviewed acknowledged receiving the training and were knowledgeable of the methods of reporting allegations of sexual abuse and sexual harassment available to them.

Based upon random interviews with staff/detainees, review of GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), and QPDF Policy & Procedures 14.008 PREA, Documentation of PREA Educational Materials and Lesson Plan for Detainees, Detainee Orientation Handbook, and PREA Posters, Queens Private Detention Facility exceeds this standard.

Standard 115.34: Specialized training: Investigations

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

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 have received training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(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*)

Based on GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), mandates that all agency investigators receive specialized training in addition to the general PREA training provided to all employees. The Office of the Inspector General and GEO Corporate investigates all PREA allegations. Completion of this training is maintained electronically in the investigators' Employee Training History.

In addition to the general training provided to all employees the agency (QPDF) ensures the Facility Investigator have received training in conducting investigations in confinement settings.

Specialized training includes 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 Facility Investigator was interviewed. He acknowledged receiving specialized investigations training and was knowledgeable of his duties in conducting investigations, sexual abuse evidence collection and the evidence required to substantiate a case for administrative action or prosecution referral.

Based on my review of: GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), QPDF Policy & Procedure 14.008: PREA, Memorandum Announcing Facility PREA Investigator , PREA Specialized Investigator Training Curriculum,

Facility Investigator Training Record, Certificate of Completion (10/15/2016), the interview with QPDF Investigator, and the PREA Compliance Manager, Queens Private Detention Facility meets this standard.

Standard 115.35: Specialized training: Medical and mental health care

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

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? Yes No
- 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? Yes No
- 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? Yes No
- 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? Yes No

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.) 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? Yes No

115.35 (d)

- Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? Yes No
- Do medical and mental health care practitioners contracted by and volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? 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*)

All full and part time medical and mental health staff is required to complete all training outlined in this standard. GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), and QPDF Policy & Procedure 14.008: PREA, states that facility will train all full-time and part-time medical and mental health staff to detect signs of sexual abuse and sexual harassment, preserving physical evidence and responding effectively and professionally to victims of sexual abuse and sexual harassment.

Medical and mental health staff receives specialized training in addition to training provided to all staff. Power Point Presentation 2017: outlines how 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: How to detect and assess signs of sexual abuse and sexual harassment; How to preserve physical evidence of sexual abuse; How to respond effectively and professionally to victims of sexual abuse and sexual harassment; and How and to whom to report allegations or suspicions of sexual abuse and sexual harassment.

Forensic examinations by SANE/SAFE staff are provided at Jamaica Hospital Medical Center & Elmhurst Memorial Medical.

These services are at no cost to the detainees.

Based on GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), QPDF Policy & Procedure 14.008: PREA, Specialized Medical and Mental Health PREA Training Curriculum, Certificate of Completion-Medical, Statement of Fact, PREA Training Acknowledgment, Electronic Verification, and interviews with Medical and Mental Health staff, Queens Private Detention Facility meets this standard.

SCREENING FOR RISK OF SEXUAL VICTIMIZATION AND ABUSIVENESS

Standard 115.41: Screening for risk of victimization and abusiveness

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

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, when 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, when 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, when 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 a: Incident of sexual abuse? Yes No
- Does the facility reassess an inmate's risk level when warranted due to a: 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*)

Based on GEO Corporate policy #5.1.2-A: Sexually Abusive Behavior & Intervention Program, and QPDF #14.008: PREA, the agency requires that detainees be screened upon admission for risk of sexual abuse victimization or sexual abusiveness toward other detainees.

Agency PREA Risk Assessment form is used to screen detainees upon admission and was found to contain all requirements of this standard. Policy also states, detainees may not be disciplined for refusing to answer any questions or for not disclosing complete information. In addition to the screening form, a detailed review of any available records, which can assist in determining risk assessment, is required.

Within 30 days of arrival, a PREA Vulnerability Reassessment Questionnaire is completed to reassess the risk of victimization or abusiveness of all detainees. Reassessments are completed, and referral requests are completed when incident of sexual abuse or receipt of additional information is received.

The screening instrument includes whether the inmate has a mental, physical, or developmental disability, the age and physical build of the inmate, previously incarceration history, whether the detainee's criminal history is exclusively nonviolent, prior convictions for sex offenses whether the detainee is or is perceived to be gay, bisexual, transgender, intersex, or gender nonconforming, past sexual victimization, self-perception of vulnerability.

Information obtained during the initial assessment and reassessment is placed in the detainee's classification file. Only authorized staff has access to these files.

During the past 12 months, there were 189 detainees at Queens Private Detention Facility (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 detainees within 72 hours of their entry into the facility.

Within the past 12 months, there were 189 detainees at Queens Private Detention Facility (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 within 30 days after their arrival at the facility based upon any additional, relevant information received since intake.

Based on interviews with PREA Compliance Manager, Chief of Security, Case Managers, random staff and detainees as well as review of policies/procedures and supporting documentation: GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), QPDF Policy & Procedure 14.008: PREA, and facility PAQ, Queens Private Detention Facility meets this standard.

Standard 115.42: Use of screening information

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

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 policy 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? Yes No
- 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? Yes No
- 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? 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*)

GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), and QPDF Policy & Procedure 14.008: PREA, provide guidelines on housing and program assignments and for the management of transgender and intersex detainees. Policy also states that all detainees transferred into its facility be screened within 24 hours.

Additionally, based on the agency policies and procedures, QPDF uses information from the risk screening to make housing, bed, work, education and program assignments to keep detainees at high risk of being sexually victimized from those at high risk of being sexually abusive.

Transgender or intersex (TI) detainee's housing is considered on a case-by-case basis, placement considers the detainee's health and safety, and whether the placement would present management or security problems; placement is reassessed as needed; TI detainee's own view with respect to his or her own safety is given consideration; TI detainees are given the opportunity to shower separately from other detainees.

Queens Private Detention Facility does not house gay, bisexual, transgender or intersex detainees in dedicated housing units.

At the time of the audit, there were no transgender detainee, and two (2) detainees at Queen Private Detention Facility that identified as being gay. This Auditor interviewed them both.

Based on documentation reviewed: GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), QPDF Policy & Procedure 14.008: PREA, Facility PAQ, PREA Risk Assessment Log and Screening Process, Photo of Detainee Showers, Statement of Fact and interviews conducted with Chief of Security, Case Managers, PREA Compliance Manager, staff and detainees, Queens Private Detention Facility meet this standard.

Standard 115.43: Protective Custody

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

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 access to programs, privileges, education, or work opportunities, does the facility document: The opportunities that have been limited? Yes No
- If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The duration of the limitation? Yes No
- If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The reasons for such limitations? Yes No

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*)

GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), QPDF Policy & Procedure 14.008: PREA; outlines the process for involuntary placement of detainees 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.

If an assessment cannot be made immediately, the detainee may be placed in involuntary segregated housing for no more than 24 hours. Agency's policy further states that if involuntary segregated housing is used for the safety of the detainee as a means of separation, it can be used for no more than 30 days and a review will be completed every 30 days to determine whether there is a continuing need for separation from the general population.

In the past 12 months, there was no detainee at risk of sexual victimization who were held in involuntary segregated housing for one to 24 hours awaiting completion of assessment.

During this audit period, Queens Private Detention Facility has not placed any detainee in Involuntary or Voluntary protective custody solely due to being a high risk for victimization.

Based upon interviews conducted with the PREA Compliance Manager, Chief of Security, Case Managers, and review of: GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), QPDF Policy & Procedure 14.008: PREA, and Statement of Fact, Queens Private Detention Facility meets this standard.

REPORTING

Standard 115.51: Inmate reporting

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

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? 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*)

GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), QPDF Policy & Procedure 14.008: PREA and Bulletin Boards convey multiple internal and external ways for detainees to report sexual abuse, sexual harassment, and retaliation. PREA reporting methods are given to detainees at intake, during orientation, in the PREA pamphlet, and on posters throughout the facility.

Detainees can also call the PREA hotline by dialing #777. This number accesses the Office of Inspector General. Additionally, detainees can also call GEO Director, PREA Coordinator. They are also advised that they can report allegations through a third party or send an anonymous report. In addition, agency's policy mandates that staff accept all reports of sexual abuse and sexual harassment made verbally, in writing, anonymously and from third parties.

Detainees interviewed confirmed they knew the various ways in which they can report allegations and; random staff interviews confirmed staff was aware of the multiple ways in which detainees may report.

Agency does not detain detainees solely for civil immigration purposes. However, Consular Official contact information is available to detainees.

Based on review of: GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), QPDF Policy & Procedure 14.008: PREA, PREA Posters for Detainees - English and Spanish PREA Poster; Third Parties (English and Spanish) PREA Brochures, English and Spanish Detainee Handbook- English and Spanish Employee Handbook and Receipt , observations and interviews conducted with the PREA Compliance Manager, Chief of Security, Case Managers with staff and detainees, Queens Private Detention Facility meets

this standard.

Standard 115.52: Exhaustion of administrative remedies

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

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 policy, the agency does not have an administrative remedies process to address sexual abuse. Yes No NA

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*)

According to GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), and QPDF Policy & Procedure 14.008: PREA, Detainee Handbook; Detainees are not required to file grievances concerning alleged incidents of sexual abuse and sexual harassment. There is no time limit on when a detainee may submit a grievance regarding an allegation of sexual abuse. The agency does not require a detainee to use any informal grievance process or attempt to resolve with staff an alleged incident of sexual abuse.

Policies also states when an emergency grievance is received, the agency shall provide an initial response within 48 hours. Thereafter, after receiving said emergency grievance; the agency will provide a decision within 5 calendar days. Moreover, the Facility Administrator or designee issues a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing.

The agency may discipline a detainee for filing a grievance related to alleged sexual abuse if the agency determines that the detainee filed the grievance with malicious intent.

In the past 12 months, there have been no grievances related to sexual abuse or sexual harassment filed.

Based on Detainee Handbook - Grievance Section, Detainee Handbook - Grievance Section Spanish, Statement of Fact, and interviews with PREA Compliance Manager, Chief of Security, Supervisors, staff and detainees; Queens Private Detention Facility meets this standard.

Standard 115.53: Inmate access to outside confidential support services

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

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? Yes No
- 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*)

Review of GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA); and QPDF policy 14.008: PREA, ensures that detainees are provided with access to outside victim advocates for emotional support.

Queens Private Detention Facility provides detainees with access to outside victim advocates services through Jamaica Hospital Medical Center & Elmhurst Memorial Medical, which is used for all sexual assault cases; and provide emotional support services, related to sexual abuse. Queens Private Detention Facility enables reasonable communication between detainees and these organizations and agencies, in as confidential a manner as possible. In addition, detainees have access to outside advocacy services by access to addresses and telephone numbers of state and national crisis centers; such as National Advocacy RAINN 888#; and Safe Horizon 999#. This information is located in detainee handbook and posted throughout facility and housing units.

Queens Private Detention Facility informs detainees, 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.

Calls to any of these agencies are toll free and will not be monitored.

QPDF does not house detainees solely for immigration purposes.

Based upon review of, GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), QPDF Policy & Procedure 14.008: PREA, Detainee Victim Advocate Posting, Statement of Fact, Detainee Orientation Handbook, observations of posters/brochures and interviews with detainees and staff, Queens Private Detention Facility meets this standard.

Standard 115.54: Third-party reporting

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

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*)

GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), and QPDF Policy & Procedure 14.008:PREA confirmed the agency has a method to receive third party reports of sexual abuse and sexual harassment. Family members or other individuals may report verbally or in writing anytime they have knowledge or suspect an inmate has been sexually abused, sexually harassed, or requires protection.

Outside parties can report verbally or in writing to the Facility Administrator. This information is available on the GEO website at www.geogroup.com.

This information was observed posted throughout the facility and available in housing units.

Based upon above-mentioned documentations, and interviews with Facility Administrator, PREA Compliance Manager, PREA Coordinator, random staff and detainees, Queens Private Detention Facility meets this standard.

OFFICIAL RESPONSE FOLLOWING AN INMATE REPORT

Standard 115.61: Staff and agency reporting duties

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

115.61 (a)

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

115.61 (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 policy, 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*)

GEO policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), and QPDF Policy & Procedure 14.008: PREA, provides clear guidelines to all staff regarding their obligation 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 the alleged incident took place at the detainees' current facility or not; retaliation against detainee or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.

Based on review of employee training curriculum, 25 training files (22 security/3 medical), all staff, contractors and volunteers are to report immediately any knowledge or information regarding an incident of sexual abuse or sexual harassment or any inmate subject to risk of imminent sexual abuse. Any retaliation or suspected retaliation against detainees or staff is to be reported immediately to QPDF designated investigator.

Agency policies also, require all reports and information related to allegations remain confidential to the extent necessary for treatment, investigation and for other management decisions.

Interviews with random staff all confirmed compliance and all communicated the reporting process and what is required of them when doing so. Staff was also aware of the requirement to immediately report all allegations of sexual abuse and/or harassment as well as the requirement to document the report in writing as soon as possible. Each staff also knew the importance of confidentiality.

Based upon review of GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), and QPDF Policy & Procedure 14.008: PREA, Statement of Fact, training curriculum, employee training files, Fifty State Survey of Vulnerable Persons Statutes and interviews with PREA Compliance Manager, Chief of Security, random staff and medical/mental health staff, Queens Private Detention Facility meets this standard.

Standard 115.62: Agency protection duties

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

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*)

GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), and QPDF Policy & Procedure 14.008: PREA, both addresses this standard and specifically states all staff shall take immediate action to protect detainees at risk of imminent sexual abuse.

In the past 12 months, there were zero (0) instances where the facility determined that an inmate was subject to a substantial risk of imminent sexual abuse.

Based upon review of GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), and QPDF Policy & Procedure 14.008: PREA, Statement of Fact, and interviews conducted, Queens Private Detention Facility meets this standard.

Standard 115.63: Reporting to other confinement facilities

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

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*)

GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), and QPDF Policy & Procedure 14.008: PREA; addresses upon receiving an allegation that a detainee was the victim of sexual violence or staff sexual misconduct while confined at another institution or facility, Facility Administrator or designee where the allegation was received shall notify the head of the institution or appropriate office of the agency where the alleged incident occurred within 72 hours after receiving the allegation.

This information is to be shared with the PREA Coordinator and the PREA Compliance Manager who ensures that the allegation is investigated in accordance with the PREA standards.

During the past 12 months, QPDF received one (1) report that claimed or alleged that a detainee was sexually abused while in the custody of an outside correctional facility, city or county jail, or any other law enforcement agency.

During the past 12 months, QPDF received zero (0) report from an outside facility that reported a detainee in their custody had been allegedly sexually abused while in the custody of QPDF.

Based upon review of GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), QPDF Policy & Procedure 14.008: PREA, Information Reports, and interviews with the PREA Compliance Manager, and Facility Investigator, Queens Private Detention Facility meets this standard.

Standard 115.64: Staff first responder duties

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

115.64 (a)

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

115.64 (b)

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

GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), QPDF Policy & Procedure 14.008: PREA, Statement of Fact; provide information explaining the duties of staff that are first responders to allegations of sexual abuse or acts of sexual abuse.

The policies require all staff to follow the protocol as dictated by this standard, including the separation of the alleged victim from the alleged abuser, preservation of evidence and the crime scene and to not allow the victim or abuser to take any action that would destroy physical evidence if the alleged incident took place within a time frame that would still allow for collection of that evidence.

If the first staff responder is not a security staff member, the responder is required to request the alleged victim not take any actions that could destroy the evidence and notify security staff immediately.

Security and non-security staff interviewed was knowledgeable of the policy and the practice to follow. They reported that they knew that the alleged victim and abuser must be separated and how to preserve the crime scene and the evidence.

In the past 12 months, there was one (1) allegation that a detainee was sexually abused. Of that allegation, zero (0), incidents required implementing first responder duties.

Based upon random staff interviews and review of GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), QPDF Policy & Procedure 14.008: PREA, Staff First Responder PREA Pocket Card and Statement of Fact, Queens Private Detention Facility exceeds this standard.

Standard 115.65: Coordinated response

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

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*)

Queens Private Detention Facility Coordinated Response Plan to an Incident of Inmate Sexual abuse and GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), QPDF Policy & Procedure 14.008: PREA; was reviewed and the plan coordinates actions taken in response to an incident of sexual abuse among first responders, security, medical and mental health practitioners, Office of Inspector General, Investigations.

The facility specific plan also addresses, SAFE/SANE hospitals, third party and anonymous reports, victim advocates, and notifications.

Based upon review of GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), QPDF Policy & Procedure 14.008: PREA, Facility Coordinated Response Plan, PREA Emergency Response Checklist, Victim Advocacy Services Posters (English and Spanish) and interviews with Facility Administrator, Chief of Security, PREA Compliance Manager, Facility Investigator, Medical staff, and random staff; Queens Private Detention Facility meets this standard.

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

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

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*)

Review of Based on GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA); QPDF Policy & Procedure 14.008: PREA, GEO shall not enter into or renew any collective bargaining agreement or other agreement that limits a facility's ability to remove alleged employee sexual abusers from contact with detainees of GEO facilities or program pending the outcome an investigation.

The last agreement was signed on 08/18/2015 and in effective 07/25/15 – 07/24/18. Agreement agrees to follow the guidelines for the agency's progressive discipline process, which includes sanctions up to, and including termination.

In the past 12 months, there have not been any incidents where staff had to be separated from a detainee.

Based upon GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), QPDF Policy & Procedure 14.008: PREA; Bargaining Agreement Contract- Local 500, Statement of Fact reviewed, and interviews with the Facility Administrator, Chief of Security, and PREA Compliance Manager, Queens Private Detention Facility meets this standard.

Standard 115.67: Agency protection against retaliation

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

115.67 (a)

- Has the agency established 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? 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 residents 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*)

GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA); and QPDF Policy & Procedure 14.008: PREA, specifically states retaliatory measures against employees and detainees who report incidents of sexual violence, staff sexual misconduct or sexual harassment as well as retaliatory measures against those who cooperate with investigations shall not be tolerated and shall result in disciplinary action and/or criminal prosecution.

Detainees and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations will be protected from retaliation from other

detainees and staff. Housing changes or transfers for detainee victims or abusers, removal of alleged staff or detainee abusers from contact with victims and emotional support services for detainees who fear retaliation; protection measures will be used per agency policies.

The PREA Compliance Manager or Mental Health personnel are responsible for monitoring for retaliation of detainees at QPDF.

There have been no incidents of retaliation during this audit period.

Based upon review of GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA); QPDF 14.008: PREA, Statement of Fact and interview with the Chief of Security, PREA Compliance Manager, and Mental Health staff, Queens Private Detention Facility meets this standard.

Standard 115.68: Post-allegation protective custody

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

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*)

GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), QPDF Policy & Procedure 14.008: PREA, specifies that detainees will not be placed in involuntary segregation unless an assessment of all available alternatives has been made and a determination is made that no alternative is available. The facility will assess any detainee in these circumstances immediately but no more than 24 hours.

Also, detainees that are placed in protective custody on this basis shall have access to programs privileges, education, and work opportunities as stipulated in PREA Standard 115.43. If a detainee is placed in involuntary protective custody, detainee status is then reviewed every 30 days.

There were no detainees who alleged sexual abuse or were victims of sexual abuse held in involuntary segregation housing in the past twelve months.

GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), QPDF Policy & Procedure 14.008: PREA, Statement of Fact, and interviews with the, PREA Compliance Manager, Mental Health personnel and staff, Queens Private Detention Facility meets this standard.

INVESTIGATIONS

Standard 115.71: Criminal and administrative agency investigations

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

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*)

Queens Private Detention Facility policies and procedures address investigations of sexual abuse and sexual harassment in its facility. The policies dictates that Office of Inspector General (USMS) and GEO Corporate conduct investigations into allegations of sexual abuse and harassment immediately upon becoming aware of the allegation, regardless of how the report is received.

Investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; interview alleged victims, suspected perpetrators, and witnesses; and review prior complaints and reports of

sexual abuse involving the suspected perpetrator.

When the quality of evidence appears to support criminal prosecution, The Facility Investigator conducts compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution. All cases that are prosecutable are referred to the US Marshalls Services and DOJ-OIG comes in to conduct the investigation.

Agency guidelines also states that detainees who allege sexual abuse are not required to submit to a polygraph examination as a condition for proceeding with the investigation of such an allegation. Additionally, the departure of the alleged abuser or victim from the employment or control of the facility or agency does not provide a basis for terminating an investigation.

Administrative investigations include efforts to determine whether staff actions or failures to act contributed to the abuse; and are documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings. All administrative investigations are conducted after the criminal investigation is completed.

During this audit cycle, there were no allegations that were referred for prosecution.

The agency retains all written reports pertaining to all investigations for as long as the alleged abuser is incarcerated or employed by the agency, plus five years.

The review of two (2) investigation files during the audit revealed all allegations received were immediately addressed.

Based upon review of GEO Policy 5.1.2-E: Investigating Allegations of Sexual Abusive Behavior (PREA) & Evidence Collection, QPDF Policy & Procedure 14.008: PREA, PREA Tracking Logs 2017 & 2018, PREA Investigative Reports (2), Statement of Fact and interviews with Facility Investigator, Chief of Security, PREA Compliance Manager, Queens Private Detention Facility meets standard requirements.

Standard 115.72: Evidentiary standard for administrative investigations

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

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*)

A review of GEO policy 5.1.2-E: Sexual Abusive Behavior Prevention & Intervention Program (PREA) Investigations, QPDF Policy & Procedure 14.008: PREA, clearly states no standard greater than a preponderance of the evidence for determining whether allegations of Sexual Abuse or Harassment are substantiated. This was confirmed during my interview with Facility Investigator.

Office of Inspector General (USMS) and GEO Corporate conducts all investigations.

Based upon review of GEO Policy 5.1.2-E: Investigating Allegations of Sexual Abusive Behavior (PREA) & Evidence Collection, QPDF Policy & Procedure 14.008: PREA, review of Investigations files, and interviews with Facility Investigator, and PREA Compliance Manager, Queens Private Detention Facility meets this standard.

Standard 115.73: Reporting to inmates

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

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 resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident 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 resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident 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 resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident 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 resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident 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*)

GEO Policy 5.1.2-E: Sexual Abusive Behavior Prevention & Intervention Program (PREA) Investigations, and QPDF Policy & Procedure 14.008: PREA, conveyed that all detainees who make allegations of sexual abuse shall be informed whether the allegations have been substantiated, unsubstantiated, or unfounded; and the process in reporting to detainees as required in said standard.

The QPDF Investigator or staff member designated by the Facility Administrator notifies the detainee in writing and notes this action on their case closure.

During the past twelve months, one (1) notification was made and documented to detainee at QPDF. Interviews with the Facility Investigator, and PREA Compliance Manager verified that the facility is following the procedures.

Based upon review of GEO Policy 5.1.2-E: Sexual Abusive Behavior Prevention & Intervention Program (PREA) Investigations, and QPDF Policy & Procedure 14.008: PREA, Statement of Fact, Case Closure and interviews with Facility Investigator, and PREA Compliance Manager, Queens Private Detention Facility meets this standard.

DISCIPLINE

Standard 115.76: Disciplinary sanctions for staff

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

115.76 (a)

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

115.76 (d)

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

Auditor Overall Compliance Determination

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

GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), GEO Policy 5.1.2-E: Sexual Abusive Behavior Prevention & Intervention Program (PREA) Investigations, and QPDF Policy & Procedure 14.008: PREA; outlines disciplinary standards for employees, volunteers and contractors and meet the requirements set by the standard.

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.

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.

Staff is made aware of the zero-tolerance policy in the Employee Handbook and the penalties for violating that policy.

In the past twelve months, there have been no terminations or discipline imposed on any staff member for sexual abuse or sexual harassment at Queens Private Detention Facility.

Based on review of: GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), GEO Policy 5.1.2-E: Sexual Abusive Behavior Prevention & Intervention Program (PREA) Investigations, and QPDF Policy & Procedure 14.008: PREA, interviews with Chief of Security, PREA Coordinator, PREA Compliance Manager, and random staff, Queens Private Detention Facility meets this standard.

Standard 115.77: Corrective action for contractors and volunteers

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

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 policies 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*)

Reviewed GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), GEO Policy 5.1.2-E: Sexual Abusive Behavior Prevention & Intervention Program (PREA) Investigations, and QPDF Policy & Procedure 14.008: PREA, prohibit contractors or volunteers who engaged in sexual abuse to have contact with detainees and require they be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies.

The Facility Investigator, confirmed agency will investigate allegations reported against contractors/volunteers as any other PREA case and would refer allegations for criminal prosecution if warranted.

Review of facility contractor/volunteer acknowledgement/ orientation forms verified that they were knowledgeable of policies and procedures.

In the past twelve months, there have been zero (0) instances involving contractors or volunteers being accused of PREA violations with detainees.

Based on review of: GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), GEO Policy 5.1.2-E: Sexual Abusive Behavior Prevention & Intervention Program (PREA) Investigations, and QPDF Policy & Procedure 14.008: PREA, Statement of Fact, and interviews with Chief of Security, Facility Investigator, PREA Coordinator, PREA Compliance Manager, and random staff, Queens Private Detention Facility meets this standard.

Standard 115.78: Disciplinary sanctions for inmates

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

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)

- 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*)

GEO Policy 5.1.2-E: Sexual Abusive Behavior Prevention & Intervention Program (PREA) Investigations, and QPDF Policy & Procedure 14.008: PREA; outlines disciplinary sanctions that may be imposed on detainees who engage in sexual abuse and sexual harassment. Detainees are subject to discipline internally for detainee on detainee sexual abuse. Detainees are only disciplined for sexual relations with staff in cases where it is determined to be without consent from staff.

Sanctions are commensurate with the nature and circumstances of the abuse committed, the detainee's disciplinary history, and the sanctions imposed for comparable offenses by other detainees with similar histories. Furthermore, it shall be determined whether the detainee's mental disabilities or mental illness contributed to the individuals' behavior.

In the past 12 months, there have been one (1) administrative findings of detainee on detainee sexual abuse that have occurred at Queens Private Detention Facility.

In the past 12 months, there have been zero (0) criminal findings of guilt for detainee on detainee sexual abuse that occurred Queens Private Detention Facility.

Based upon GEO Policy 5.1.2-E: Sexual Abusive Behavior Prevention & Intervention Program (PREA) Investigations and QPDF Policy & Procedure 14.008: PREA, Statement of Fact reviewed; and interview with Chief of Security, PREA Compliance Manager, Facility Investigator, random staff and detainees, Queens Private Detention Facility meets this standard.

MEDICAL AND MENTAL CARE

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

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

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? Yes No

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*)

Queens Private Detention Facility screens all detainees for risk of victimization and abusiveness upon arrival. At the initial intake screening, if the detainee has disclosed prior sexual victimization and/or previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, the detainee is referred for medical and mental health services.

Additionally, if the screening indicates that a detainee has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff ensures that the detainee is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening.

Any information related to sexual victimization or abusiveness that occurred in an institutional setting is 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.

Medical and mental health practitioners obtain informed consent from detainees before reporting information about prior sexual victimization that did not occur in an institutional setting.

No forensic medical exams are conducted at Queens Private Detention Facility. Forensic examinations by SANE/SAFE staff are provided at Jamaica Hospital Medical Center and Elmhurst Memorial Medical.

These services are provided at no cost to the detainee.

Interviews with medical staff indicate that they are knowledgeable of their duties and responsibilities under PREA and know how to properly respond to or report an allegation of sexual abuse or assault.

In the past 12 months, 100% percent of detainees at Queens Private Detention Facility who disclosed prior victimization during screening were offered a follow-up meeting with a medical or mental health practitioner.

In the past 12 months, 100% percent of detainees at Queens Private Detention Facility who previously perpetrated sexual abuse, as indicated during the screening, were offered a follow up meeting with a mental health practitioner.

Based upon documentation reviewed: GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), QPDF Policy & Procedure 14.008: PREA, and Mental Health Referral; and interviews with medical and mental health staff and PREA Compliance Manager, and Shift Supervisors, Queens Private Detention Facility meets this standard.

Standard 115.82: Access to emergency medical and mental health services

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

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 security staff first responders take preliminary steps to protect the victim pursuant to § 115.62? Yes No
- Do security 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*)

QPDF detainee 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.

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 take preliminary steps to protect the victim and immediately notify the appropriate medical and mental health practitioners.

Detainee 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.

Treatment services are 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.

Forensic examinations by SANE/SAFE staff are provided at Jamaica Hospital Medical Center and Elmhurst Memorial Medical.

In the past 12 months, there has been no access to emergency medical and mental health services required.

Based upon reviewed GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), QPDF Policy & Procedure 14.008: PREA, Statement of Fact and, interviews with the Health Service Administrator and PREA Compliance Manager, Queens Private Detention Facility meets this standard.

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

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

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.) 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.) 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*)

Queens Private Detention Facility policies and procedures address all elements of the standards. Medical and mental treatment including evaluations, on-going care, and treatment to all detainees that have been identified as victims and/or abusers are provided at no cost to the detainees and are consistent with the community level of care.

Furthermore, detainee victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate. Victims of sexual abuse or sexual harassment are offered mental health services and referrals for long-term continuity of care and treatment upon release from the facility and documented in the detainee's medical record.

Section (d) & (e) of this standard are non- applicable as Queen Detention Facility houses only male detainees.

Based on my review of GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), QPDF Policy & Procedure 14.008: PREA, Statement of Fact, interviews with Health Service Administrator and Mental Health Manager, and interviews with detainees, Queens Private Detention Facility meets this standard.

DATA COLLECTION AND REVIEW

Standard 115.86: Sexual abuse incident reviews

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

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 policy or practice to better prevent, detect, or respond to sexual abuse? Yes No
- Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the 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*)

Queens Private Detention Facility policies and procedures requires the facility conducts a sexual abuse incident review at the conclusion of every sexual abuse investigation, including whether the allegation has not been substantiated, unless the allegation was determined to be unfounded within 30 workdays of the conclusion of an investigation.

The Incident Review Team (IRT) is comprised of the upper-level management, PREA Compliance Manager, with input from the investigators, mental health, medical practitioners, line staff, and others as deemed appropriate to complete the review.

The IRT considers whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse; 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 QPDF; and they examine the area in QPDF where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse; assess the adequacy of staffing levels in that area during different shifts; assess whether monitoring technology should be deployed or augmented to supplement supervision by staff.

A "PREA After Action Review Report" is used to document incident review and upon completion is forwarded to the Facility Administrator for review and signature by the facility PREA Compliance Manager who then forwards the form to the Office of Inspector General (USMS) and the PREA Coordinator.

The standard requires agency to look at the different factors that possibly motivated the incident. The IRT makes recommendations based on their review of the incident. The facility shall then implement recommendations that result from the review, or document the reasons for not making the implementations.

Based on my review of GEO policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), QPDF Policy & Procedure 14.008: PREA, Closeout Email from United States Marshals Services, PREA "After-Action Review" Report; After Action Report Checklist, and interviews with the Chief of Security, PREA Compliance Manager, Facility Investigator, and Health Service Administrator, Queens Private Detention Facility meets this standard.

Standard 115.87: Data collection

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

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*)

Queens Private Detention Facility collects data related to sexual abuse and this data is aggregated at least annually according to GEO Policy #5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), and QPDF Policy & Procedure 14.008: PREA. It is

the responsibility PREA Compliance Manager to compile data collected on sexual activity, sexual harassment and sexual abuse incidents and forward this information to the PREA Coordinator on a monthly basis using the Monthly PREA Incident Tracking Log.

The agency provides data collected to the Department of Justice from the previous calendar year upon request. The agency collects the uniform data using a standardized instrument and data dictionary based on the most recent definitions provided by the Bureau of Justice Statistics,

The latest Annual Report on Sexual Victimization report covering the period 2017 is available on the agency website at: www.geogroup.com (Social Responsibility Section); was reviewed by this auditor.

Based on GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), QPDF Policy & Procedure 14.008: PREA, GEO 2016 & 2017 Annual DATA Report, QPDF PREA Monthly Incident Tracking Logs, and interviews with Agency PREA Coordinator, and PREA Compliance Manager, Queens Private Detention Facility meets the standard.

Standard 115.88: Data review for corrective action

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

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 policies, 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 policies, practices, and training, including by: Taking corrective action on an ongoing basis? Yes No
- Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each 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*)

GEO policy #5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), and QPDF Policy & Procedure 14.008: PREA requires review of all data collected in order to assess and improve the effectiveness of its sexual abuse prevention and intervention program.

The PREA Coordinator prepares an annual report, which includes findings and corrective actions taken for each GEO facility. The annual report includes a comparison of the current year's data and corrective action with those from prior years. The report does not address any case specific information. Policies also allow for data to be redacted if it presents a threat to safety and security.

The GEO 2017 Annual Report is approved by GEO Senior Vice President and made readily available to the public through its website at: www.geogroup.com (Social Responsibility Section), and reviewed by this auditor.

Based on GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), QPDF Policy & Procedure 14.008: PREA, GEO 2016 & 2017 Annual Data Report, QPDF PREA Monthly Incident Tracking Logs, and interviews with Agency PREA Coordinator,

and PREA Compliance Manager, Queens Private Detention Facility meets the standard.

Standard 115.89: Data storage, publication, and destruction

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

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*)

According to GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program

(PREA) and, QPDF Policy & Procedure 14.008: PREA, all data collected is securely retained for 10 years or longer as required by state statute. Prior to publishing the annual report, on The GEO website, all personal identifiers are removed.

The GEO 2017 Annual Report is made available to the public through the agency website: [http:// www.geogroup.com](http://www.geogroup.com) (Social Responsibility Section), and was reviewed by this auditor.

Based on GEO policy #5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), QPDF Policy & Procedure 14.008: PREA, and GEO 2016 & 2017 Annual Data Report, Queens Private Detention Facility meets this standard.

AUDITING AND CORRECTIVE ACTION

Standard 115.401: Frequency and scope of audits

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

115.401 (a)

- During the three-year period starting on August 20, 2013, and during each three-year period thereafter, 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? (N/A before August 20, 2016.)
 Yes No NA

115.401 (b)

- During each one-year period starting on August 20, 2013, 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? Yes No

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, residents, 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*)

The Auditor reviewed The GEO Group web page:

https://www.geogroup.com/PREA_Certification_Information containing the 48 audit reports: (21 US Corrections, 26 Reentry, and 1 Youth Care PREA audits completed from January 2017 through June 2018.

To date, The GEO Group has successfully certified 72 facilities (38 adults & jails, 6 Lock Up facilities, 21 Reentry Adult Community Confinement facilities and 7 Youth facilities).

During the audit, the facility administration and staff provided the Auditor access to all areas of Queens Private Detention Facility. Any relevant documents or information requested was provided; and a private area and access to randomly selected detainees and staff for interviews was provided.

Additionally, posted signs advising how detainees could send confidential information or correspondence to the Auditor like legal counsel was observed throughout the facility and detainee housing units.

Based on information above mentioned, Queens Private Detention Facility meets the standard.

Standard 115.403: Audit contents and findings

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

115.403 (f)

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

Auditor Overall Compliance Determination

Exceeds Standard (*Substantially exceeds requirement of standards*)

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

The Auditor reviewed The GEO Group web page:
https://www.geogroup.com/PREA_Certification_Information containing the 48 audit reports: (21 US Corrections, 26 Reentry, and 1 Youth Care PREA audits completed from January 2017 through June 2018.

To date, The GEO Group has successfully certified 72 facilities (38 adults & jails, 6 Lock Up facilities, 21 Reentry Adult Community Confinement facilities and 7 Youth facilities.

Based on information above mentioned, Queens Private Detention Facility meets the standard.

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.

Auditor Instructions:

Type your full name in the text box below for Auditor Signature. This will function as your official electronic signature. Auditors must deliver their final report to the PREA Resource Center as a

searchable PDF format to ensure accessibility to people with disabilities. Save this report document into a PDF format prior to submission.¹ Auditors are not permitted to submit audit reports that have been scanned.² See the PREA Auditor Handbook for a full discussion of audit report formatting requirements.

Wynnie R. Testamark

September 14, 2018

Auditor Signature

Date

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

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