

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

**Final Report**

**Date of Report February 5, 2020**

**Auditor Information**

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Alaska 99710

**Telephone:** 901-378-3998

**Date of Facility Visit:** May 30-31,  
2019

**Agency Information**

**Name of Agency:**  
Webster Parish LA Sheriff's Office

**Governing Authority or Parent  
Agency:**  
Webster Parish Sheriff's Office

**Physical Address:**  
410 Main Street,

**City, State, Zip:**  
Minden LA 71055

**Telephone:** (318) 377-1515

**Is Agency accredited by any  
organization?**  Yes  No

**The Agency Is:**

**Military**

**Private for Profit**

**Private not for  
Profit**

**Municipal**

**County**

**State**

**Federal**

**Agency mission: In an effort to best serve Webster Parish and its citizens, Bayou Dorcheat Correctional Center and the Webster Parish Jail, operated by the Webster Parish Sheriff's Office, serves as a holding facility for pre-trial, suspected offenders to adequately assure their appearance at trial and hold adjudicated offenders until their lawful release or transfer to the State Department of Corrections. During this period of confinement, Bayou Dorcheat Correctional Center and the Webster Parish Jail will take the necessary steps to maintain custody of incarcerated individuals in a safe, secure, humane manner complying with all applicable Federal, State, and Local statutes.**

**The philosophy of Bayou Dorcheat Correctional Center and the Webster Parish Jail will be to operate in a way to control offender behavior in a cost-effective manner while providing for the safety and security of the staff, the public, and the offenders. Bayou Dorcheat Correctional Center and the Webster Parish Jail will operate on the assumption of responsible adult behavior by the offender**

population and the expectation of staff involvement and interaction to facilitate the desired offender behavior. A positive atmosphere for staff and offender within Bayou Dorcheat Correctional Center and the Webster Parish Jail will be a continuing goal.

**Agency Website with PREA Information:**

**Agency Chief Executive Officer**

**Name:** Gary Sexton

**Title:** Sheriff

**Email:** [gsexton@webstersheriff.org](mailto:gsexton@webstersheriff.org)

**Telephone:** 318-377-1515

**Agency-Wide PREA Coordinator**

**Name:** Delores Dooly

**Title:** Deputy PREA Coordinator

**Email:** [ddooly@webstersheriff.org](mailto:ddooly@webstersheriff.org)

**Telephone:** 318-371-9199, ext 225

**PREA Coordinator Reports to:**  
Warden John Lewis

**Number of Compliance Managers who report to the PREA Coordinator:** 1

**Facility Information**

**Name of Facility:** Bayou Dorcheat Correctional Center

**Physical Address:** 1455 Bravo Blvd, Minden LA 71055

**Telephone Number:** 318-371-9199

**The Facility Is:**

County/Parish

Private for profit

Private not for profit

**Facility Type:**

Jail

Prison

**Facility Mission:** The Mission of the Bayou Dorcheat Correctional Center is the confinement of persons adjudicated as offenders or suspected offenders of the law as prescribed by the Louisiana Statutory Criminal Law and Procedure. The intent of such confinement is threefold:

1. Confinement of certain persons as a punishment in and of itself.
2. Confinement of certain persons on a pre-trial status to ensure their appearance in court
3. To protect the public.

The mission statement of the Bayou Dorcheat Correctional Center is found in how these persons are treated during their confinement and, if within its reasonable capacity to do so, shall provide an opportunity for the positive personal growth of

those confined and offer assistance for positive reintegration into the community upon their release. In keeping with these principles, the Correctional Center shall provide a safe and secure environment for those confined. These persons' basic physical and mental health needs shall be attended to and their constitutional rights shall be protected.

Facility Website with PREA Information: <b>Webstersheriff.org</b>	
<b>Warden/Superintendent</b>	
<b>Name:</b> John Lewis	<b>Title:</b> Major
<b>Email:</b> <a href="mailto:jlewis@webstersheriff.org">jlewis@webstersheriff.org</a>	318-371-9199, ext 224
<b>Facility PREA Compliance Manager</b>	
<b>Name:</b> Ashley Johnson	<b>Title:</b> Captain / Warden
<b>Email:</b> <a href="mailto:ajohnson@webstersheriff.org">ajohnson@webstersheriff.org</a>	<b>Telephone:</b> 318-371-9199, ext 235
<b>Facility Health Service Administrator</b>	
<b>Name:</b> Deborah Claunch LPN and Kristi Moro CNA	<b>Title:</b> Medical Staff
<b>Email:</b> <a href="mailto:dclaunch@yahoo.com">dclaunch@yahoo.com</a>	<b>Telephone:</b> 318-371-9199, ext 223
<b>Facility Characteristics</b>	
<b>Designated Facility Capacity:</b> 526/61	<b>Current Population of Facility:</b> 645
<b>Number of offenders admitted to facility during the past 12 months</b>	2006
<b>Number of offenders admitted to facility during the past 12 months whose length of stay in the facility was for 30 days or more:</b>	1182
<b>Number of offenders admitted to facility during the past 12 months whose length of stay in the facility was for 72 hours or more:</b>	1946
<b>Number of offenders on date of audit who were admitted to facility prior to August 20, 2012:</b>	0
<b>Population Age Range</b>	<b>Youthful Offenders Under 18: 15-17</b> <b>Adults: 18-71</b>
<b>Are youthful offenders housed separately from the adult population?</b>	Yes <input checked="" type="checkbox"/> <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<b>Number of youthful offenders housed at this facility during the past 12 months:</b>	0

<b>Average length of stay or time under supervision:</b>		<b>121 days</b>
<b>Facility security level/offender custody levels:</b>		<b>Medium Security : All custody levels</b>
<b>Number of staff currently employed by the facility who may have contact with offenders:</b>		<b>88- (75 Full Time)</b>
<b>Number of staff hired by the facility during the past 12 months who may have contact with offenders:</b>		<b>11</b>
<b>Number of contracts in the past 12 months for services with contractors who may have contact with offenders:</b>		<b>1</b>
<b>Physical Plant</b>		
<b>Number of Buildings: 3</b>	<b>Number of Single Cell Housing Units: 0</b>	
<b>Number of Multiple Occupancy Cell Housing Units:</b>	<b>22/14</b>	
<b>Number of Open Bay/Dorm Housing Units:</b>	<b>5/1</b>	
<b>Number of Segregation Cells (Administrative and Disciplinary):</b>	<b>22/4</b>	
<b>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.): Homeland Security is the Contractor and video monitoring service provider for the 72 cameras, well-located, and they have excellent clarity and zoom capability.</b>		
<b>Medical</b>		
<b>Type of Medical Facility:</b>	<b>Exam Room and Medical Office</b>	
<b>Forensic sexual assault Medical exams are conducted at:</b>	<b>University Health Center</b>	
<b>Other</b>		
<b>Number of volunteers and individual contractors, who may have contact with offenders, currently authorized to enter the facility:</b>		<b>100+</b>
<b>Number of investigators the agency currently employs to investigate allegations of sexual abuse:</b>		<b>1 WPSO Investigator onsite</b>

## **Audit Findings**

### **Acronyms:**

<b>DPSC</b>	<b>LA Department of Public Safety &amp; Corrections</b>
<b>DOC</b>	<b>Department of Corrections (Louisiana)</b>
<b>WPSO</b>	<b>Webster Parish Sheriff's Office</b>
<b>BDCC</b>	<b>Bayou Dorcheat Correctional Center</b>
<b>TWP</b>	<b>Transitional Work Program</b>
<b>PCM</b>	<b>PREA Compliance Manager</b>
<b>LaFASA</b>	<b>Louisiana Foundation Against Sexual Assault</b>

### **LA DOC Policies Observed by Bayou Dorcheat Correctional Center:**

<b>A-01-011</b>	<b>Safety Plan</b>
<b>A-02-018</b>	<b>Institutional Staffing</b>
<b>A-02-022</b>	<b>Criminal Record Check</b>
<b>A-02-028</b>	<b>Training and Staff Development</b>
<b>B-05-001</b>	<b>Disciplinary Rules and Procedures for Adult Offender</b>
<b>B-06-001</b>	<b>Health Care Manual</b>
<b>HC-14</b>	<b>Health Care Policy Medical Level of Care</b>
<b>HC-30</b>	<b>Sexual Assault</b>
<b>B-08-010</b>	<b>Americans with Disabilities Act</b>
<b>B-08-018</b>	<b>Effective Communication with the Hearing-Impaired</b>
<b>C-01-022</b>	<b>Prison Rape Elimination Act (PREA)</b>
<b>C-05-001</b>	<b>Activity Reports/Unusual Occurrence Reports</b>
<b>C-05-003</b>	<b>Headquarters Compliance Monitoring</b>
<b>WPC-314</b>	<b>WPSO Policy on Sexual Assault, Sexual Misconduct and PREA issues</b>

## **Audit Narrative**

The Bayou Dorcheat, LA Correctional Center PREA audit was conducted on May 30-31, 2019 by Certified DOJ Auditor William Peck. The site review of the Correctional Center, the Transitional Work Program facility (TWP), and subsequent site review of the Webster Parish Women's Facility was led by the PREA Compliance Manager, CPL Ashley Johnson. An outbrief was held on May 31, 2019, with the Warden and PCM. The Interim Report was completed and provided the facility on July 13, 2019.

The command structure of the Webster Parish Sheriff's Department and correctional

center is a military model oriented to secure operations. Sergeants manage most functions and report to the Warden or to a Captain, depending on the issue. Both the Warden/Assistant Warden report making some unannounced rounds and this practice was discussed during interviews. Unannounced rounds are always completed by Lieutenant and Sergeant-level shift supervisors and are documented in the logbook by the control officer.

The site review covered all facility areas at the male Correctional Center, female unit downtown and the separate Transitional Work Program, including all housing and cell areas, security spaces, administrative areas, medical, food service, and program space.

Essentially, cross-gender entry into offender housing does not occur absent from an unusual incident; both male and female facilities are staffed by the same gender as the offenders. The remainder of the visit was devoted to interviews and file reviews.

### **Facility Characteristics**

The Bayou Dorcheat Correctional Center (BDCC), is located in Minden, LA, within Webster Parish, and is classified as a medium custody jail. This Parish Correctional Center is used by multiple jurisdictions for offenders who have short state sentences (usually less than one year), probation violators and those awaiting trial, sentencing or other court appearances and are waiting to post a bond or are unable to make bail.

There are very few dedicated education or rehabilitation programs and those tend to be for state offenders (DOC). It is often crowded, sometimes exceeding design capacity, and the women's facility was especially overcrowded at the time of the audit.

There is a medical staff member on duty during days for medications and for prisoners requiring care for illness or injuries. If the situation requires more care than BDCC can manage, the offender is taken to a hospital under guard or released from custody if the charge is minor enough.

A number of people arriving at the jail are actively or recently intoxicated from alcohol or high from substance abuse, arrive with injuries from fights/assaults that led to their arrest, and/or are mentally ill with no other place for law enforcement to deliver them.

Bayou Dorcheat Correctional Center consists of several facilities developed over many prior years and with most construction relatively older and the buildings vary in condition. The Center has 3 sites serving distinct populations: male, female and TWP (Transitional Work Program, i.e., work release).

Age of Offenders: 15+ (Youthful Offenders are processed into confinement, then transferred to another facility)

Gender: Separate male and female facilities

Full-Time Staff: 88

All areas of the facilities were reviewed during the on-site site review. During the facility site review, the large number of well-placed cameras were noted, appearing that the facility is providing a determined effort to limit the number of blind spots. This was reinforced by a review of areas equipped with video monitoring and camera placement plans. Housing areas all have the same gender supervision and booking and Medical areas have a staff of both genders present to ensure same-gender processing. Female offenders are booked at BDCC and then immediately transported to the Women's facility for final processing.

The video monitoring service provider is contracted. Bayou Dorcheat BDCC has 72 (PTZ/Digital) cameras, 16 of which are in the female facility and 56 in BDCC.

The Main Control Room locations provide the perimeter observation capabilities and the Command Post can view perimeter areas as well as housing and program spaces. Access to the Main Control Room is highly restricted and individuals must log in and out.

### **Site Review**

All areas of the facilities were reviewed during the on-site site review. From the first introduction to the facility and initial contacts with facility staff and offenders, the facility appeared clean and the staff in appropriate locations to ensure safe oversight of offenders.

The site review provided an opportunity for the Auditor to conduct in-depth observations of the different areas of the facility, observe staff conduct and interactions between staff and offenders, and conduct informal interviews with both staff and offenders to gain an understanding of facility operations and practice as well as insight into the facility's compliance with PREA standards. The areas observed included: living units, work areas, cells along with toilets and showers, program areas, outdoor recreation areas, administrative areas, kitchen, storage areas, training facility, Control Centers, and the overall facility grounds.

Each male facility area appeared clean, secure, adequately staffed and well-operated. During the facility site review, the number of well-placed cameras was noted, appearing that the facility is providing a continuing effort to reduce the number of blind spots, and only a few remain. Housing areas have the same gender supervision, and booking areas have both genders present when required for same-gender processing. Once females complete basic in-process at the main booking area, the remainder of their intake is completed at the women's facility.

Shower and toileting areas of all units were generally in areas and constructed in a manner that allowed for security monitoring of areas allowing entry to toilets/showers, and blocking technology provided privacy for bodily functions in the male units but not in female units.

While reviewing the site, several staff and offenders were informally interviewed and acknowledged receiving training on procedures for reporting sexual abuse and

harassment and the right to be free from retaliation. Offenders and staff both knew that they could report sexual safety issues and were aware of external addresses and phone numbers of potential sources to report or gain assistance with their issues. Postings notifying the population of the pending PREA audit had been posted on March 19, 2019.

The Auditor verified that higher-ranking staff such as the Lieutenants and Sergeants make unannounced rounds, documented in the electronic log by the control officer. All supervisors who were interviewed stated that they routinely make random unannounced visits and site reviews.

Staff were aware of the requirement to announce the presence of opposite gender staff and did so in all housing in a timely manner; interviews with offenders and staff supported that the facility ensures these announcements and that this practice is adhered to during daily operation but also noted that cross-gender visits are the exception and rarely occur. It was also evident from interviews that all staff receive appropriate training concerning PREA and the zero-tolerance policy during initial training as well as annual and also regular refresher training. All staff were well-versed in their responsibilities for reporting sexual abuse, sexual harassment, staff negligence and any retaliation for reporting. Staff interviewed were familiar with the overall expectations of their duties as well as with the procedures for evidence preservation, but answers varied among numerous staff as well.

Staffing appeared sparse but well-positioned. The Agency and facility have increased relative security by providing some recent-years' agency funding for new cameras. All areas of the facility's shower and toileting areas could be updated with barrier screens to reduce the opportunity for non-security required observation.

No concerns related to sexual safety were noted while visiting these areas. The Auditor site reviewed the Control Center, talked with the post officers and observed the coverage of the CCTV monitors, which have excellent clarity and zoom capability. The cameras are positioned in a way that precludes remote viewing of male offenders as they shower and perform bodily functions and also have a screen blocking function for areas of personal nudity; this is not true for women offenders. It is noted that the facility leadership is strongly supportive of same-gender supervision and a male staff would only be assigned to the female spaces in a female staffing shortfall and then he would remain outside the actual housing spaces.

All unoccupied rooms and closets that could provide concealment were locked at the time of the site review. Staff and offender restrooms in common areas can only be opened by an employee. Each housing unit includes wall-mounted telephones for offender use, and information about how to call or write for PREA assistance is posted in each unit.

Training is provided concerning cross-gender pat searches and these searches are presently not conducted by female officers on the male population, although allowable in both PREA and WPSO policies and procedures. Strip searches are conducted by only the same gender staff with the potential normal policy exception for exigent circumstances, which have not occurred thus far. Staff interviewed were all aware of the prohibition of physically examining a transgender or intersex offender to determine genital status.



Staff Training in this new area has only begun this past year and has received significant emphasis from the PCM, and appears compliant at most levels, although some areas need further emphasis. All staff receive are required to receive initial training at the facility and also complete specialty training in their area (e.g., investigators, mental health, etc.). Apparently, medical staff does not complete this requirement. All other staff receive annual Refresher training as well as routine training at shift turnover. Specialized staff needs to utilize NIC or other training programs to help meet mandated training requirements.

Reviewing documentation is a critical component of the audit process, so throughout the pre-audit review and the on-site audit, the auditor reviewed various documents including personnel records, investigation files, training and education records, assessment and screening tools, policies and procedures, and related materials relating to PREA standards. In addition to the site review and the extensive interview process, auditor reviewed the PAQ (Pre-Audit Questionnaire) submitted by the facility, WPSO policies related to PREA compliance, and spot- checked training, investigative and human resource files. The post-audit phase consisted of triangulating all data and input received, reviewing interview data in detail, and a final review of the PAQ submission. Questions that arose about procedures or data needed for clarification were referred to the facility and the responses are incorporated in this report.

It became clear during the pre-visit review that policy component sections were mostly compliant and that the staff has drafted policy with the intent to be compliant with all Louisiana PREA requirements; policy parallels very closely, often verbatim, the DOJ PREA Standards and checklists for policy. The on-site visit, then, focused on actual compliance in operations and whether local training, process, and actual procedure mirrored policies, especially as this is an initial audit. It is noted that the Louisiana Department of Corrections is an integral element and serves as strong support for PREA compliance efforts by local facilities that house State offenders.

The command structure is a military model heavily oriented to secure operations and, in fact, offenders reported in almost all cases that they felt safe in this environment and that staff would react quickly to any event. Several offenders who had encountered problems all spoke of the speed of response and the rapid resolution of their problem. Staff interviews reflected the same attitude and it was clear that they felt a strong responsibility to ensure the safety of all the offenders.

During the site review, staff were aware of the requirement of announcing the presence of the opposite gender and did so accordingly and in a timely manner. Not only were the announcements made prior to opposite gender entry, sometimes multiple times, but the staff also ensured that restrooms and showers were clear of disrobed offenders.

Through documentation and interviews, it is apparent that all staff receive appropriate training concerning PREA and the facility's zero-tolerance policy during initial training as well as annual refresher training, and this is delivered by the PCM.

Offenders in BDCC male spaces were observed in the living and recreation areas

interacting appropriately with each other and staff and while they were engaged in various recreational activities. Offenders were also observed in education, vocational, and various other work areas. This was not observed in female spaces. Information related to the Prison Rape Elimination Act (PREA) and how to report sexual abuse was posted in some, but not all, of these housing and program areas although these had been placed in all units as reported by staff.

The auditor visited the following departments to observe conditions relating to departmental policy and operations:

### Sanitation

The male institution was clean, mostly orderly and largely free of clutter; the female unit was not. The female facility had several pieces of non-operational plumbing, was not clean, was heavily crowded, absent any unencumbered/free space, and reflected large areas of water damage, peeling paint, etc.

### Security

Officers exhibited a high degree of knowledge when explaining the operation of their respective areas of responsibility. Offender movement is highly controlled through the use of connecting sidewalks with locked gates at each housing unit. Officers actively supervised offender movement and activity in all areas.

Security doors in offender housing areas are operated from unit control centers located immediately adjacent to those areas. Housing unit control room officers working in the offender housing units have a direct view of their area of responsibility. Offender movement is controlled and access into restricted areas requires staff authorization.

### Medical

There are no inpatient beds and medical care is provided by nursing staff who are WPSO employees, supplemented by a physician who spends 1 day a week there. In-house Medical is one nurse daily during normal work hours; after hours, hospital transport is used or on-call Medical staff is contacted.

Offenders are actually sent to Ochsner-LSU Shreveport (University Hospital) for SAFE/SANE assault protocols and examinations, but the local Minden Hospital can be used in a crisis. Testing, prophylactic treatment, and follow-up for sexually transmitted diseases are provided if indicated. The PCM reports that the nurse can refer offenders out to Mental Health following any substantiated claim/incident.

Offenders are asked mandated PREA questions by the intake staff and receive a follow-up review with the PCM. After completion of intake, the medical staff determines if the offender has a situation that would require an appointment with the doctor. Emergent situations are handled immediately, and non-emergent situations are handled by

scheduling appointments for the offenders. Each offender is given information on how to access health care services in English and Spanish and, if an offender is deemed to be illiterate, instructions are given orally by staff.

### Mental Health

DOC Mental Health staff provides a substance abuse program for state offenders and, although the sex offender treatment program was recently terminated, they still do a small number of sex offender assessments of new offenders, but no treatment.

The Mental Health DOC staff provides Substance Abuse Groups and Individual Counseling according to an offender's DOC Treatment Plan as needed. The Steve Hoyle Intensive Substance Abuse Program (SHISAP) is a 6-9-month program and can be a part of the individual program developed or be court-ordered as part of sentencing. There is limited offender access to Mental Health services. Suicidal offenders and offenders who require use of Controlled Dangerous Substances (CDS) are housed at the facility until a determination is made about whether they need to be transferred to a larger facility with higher medical capabilities.

### Recreation

There are recreation areas for the offenders adjacent to Medium facility housing units. The Reentry unit just provides outside seating and access. Televisions are provided in day rooms adjacent to the housing areas. Female recreation yard space is on the roof outside their building in view of passersby driving along the main street of the city.

### Religious Programming

There are a small number of scheduled religious and non-religious services/classes per week, primarily religious. The volunteers provide offender religious and faith-based programming a few times each week.

The Warden approves all volunteers, all of whom must complete both volunteer and PREA training and undergo background records checks prior to being approved. WPSO Internal Affairs does the background check, re-done every year, and every year there is a documented training refresher.

### Academic and Vocational Education

Bayou Dorcheat Correctional Center has a few DOC academic programs as well as a teacher who comes in from the local school system to provide a small program for the few who qualify for literacy classes. They are currently expanding the Ashland (college) and SHISAP (substance abuse) programs. The Education program also has limited

access to a small vocational program, although part of one of the programs has to be completed at another DOC facility.

### **Facility Interviews**

During site review, the auditor met with both staff and offenders to verify observations and/or to ask the Standards' interview questions concerning facility operations.

The major portion of the site audit consisted of conducting these structured interviews with specialized and randomly selected staff and also with random and targeted categories of offenders (LGBTI, reported victims or perpetrators of abuse, etc.).

The Auditor interviewed a wide range of staff that included both executive and line staff for the facility. Specialized staff interviewed included Medical and Mental Health Supervisors, higher-level supervisors, as well as staff from Programs, Human Resources, Training, Classification, Volunteer and Intake Staffs. Interview data is summarized at the end of this narrative.

During the visit, in addition to PREA-related discussions with employees selected during the site review, the Auditor conducted random and targeted offender interviews, as noted below, and also random and specialized staff as noted below. The offenders and staff were well aware of PREA and the zero-tolerance policy of the Agency. Offenders interviewed were knowledgeable about how and where to report sexual abuse and sexual harassment. They all indicated they had received written information either on their arrival or on the housing units for those that have been at the facility for a considerable amount of time. LGBTI offenders interviewed reported that they felt safe and the significant number of older offenders responded in a similar vein. All staff and offenders interviewed were very cooperative during the interview process.

### **Offender Interviews**

There were 36 offenders interviewed during the audit team's visit, 17 random selections and 19 from targeted offender categories. Contracting provisions regarding security characteristics and ages and medical condition, etc. of offenders received have reduced the number of targeted offender numbers available to interview. The offenders were supportive of the PREA efforts by the warden and the administrative staff. There were few general population complaints about staff treatment or fairness, and input was positive overall. The offenders interviewed are aware of the PREA education programs.

During all interviews, it was evident and well communicated that offenders felt safe and secure. All offenders felt that staff would take very seriously any report of sexual abuse, assault, harassment or retaliation. Offenders communicated multiple methods of reporting and many stated that they would feel comfortable directly telling a staff member

at any time. All offenders made mention of the reporting phone numbers and most mentioned the posting of the phone numbers and that they received information in regard to PREA upon intake. Interviewed offenders who had made reports of sexual harassment stated that staff took immediate action to ensure they were safe while initiating an investigation and providing information about the outcome and said that they felt comfortable speaking with staff about this matter.

All offenders communicated that an appropriate announcement was made by opposite-gender staff as required by the standard and they were never naked in full view of staff, (it is noted that staff doesn't work in opposite-gender housing absent a staffing exigency.)

The offenders were respectful and talked freely with the auditor and described their treatment by staff members as fair. All offenders interviewed said they felt safe and they knew how to access services and the grievance process, that they were aware of multiple methods of reporting available, to include telling any staff member, utilizing the hotline, reporting to an outside third party, writing to outside agencies, and submitting anonymous reports in writing. This information is also available in the offender handbook.

Based upon the offender population at the facility, the PREA Auditor Handbook recommends that a minimum of 30 total offender interviews must be conducted; a minimum of 15 random offenders and 15 targeted offender interviews. This number was adjusted to allow for the absence of youthful offenders in this facility; the self-identification of no transgender offenders; and the policy of not placing offenders at risk into protective custody. This reduced the targeted offender totals available, so the auditor increased numbers of targeted interviewed in the disabled categories as well as in the category of individuals who had reported any abuse either during or before confinement.

The auditor conducted the following number of offender interviews during the on-site phase of the audit:

Category of Offenders	Number of Interviews Conducted
Random Offenders (Total)	17
Targeted Offenders (Total)	19
Total Offenders Interviewed	36
Breakdown of Targeted Offender Interviews:	
Youthful Offenders: <u>No Youthful Offenders in BDCC</u>	0
Offenders with a Physical Disability	2
Offenders who are Blind, Deaf, or Hard of Hearing	0
Offenders who are LEP	0
Offenders with a Cognitive Disability	3
Female Offenders	4
Offenders who Identify as Lesbian, Gay, or Bisexual	3
Offenders who Identify as Transgender or Intersex	0
Offenders in Segregated Housing for High Risk of	0

### Sexual Victimization:

No offenders have been housed in Segregation in the past 12 months for being at risk for sexual victimization. Policy is to segregate the alleged predator but not a victim.

Offenders Who Reported Sexual Abuse	3
Offenders Who Reported Sexual Victimization During Risk Screening	4
Total Targeted Offender Interviews	19

### Staff Interviews

The auditor interviewed 37 staff in the course of the audit, 15 random staff and 19 targeted staff, plus 3 required senior staff in leadership roles. The officers on the shifts stated they feel safe working here and all staff had been through PREA training. The officers generally felt that the reason that there are not a lot of incidents at the facility is that support staff and officers make sure they talk with the offenders whenever the offenders have issues or questions. In interviews, correctional officers and staff expressed satisfaction with PREA training and felt they knew required actions if incidents were to occur.

Staff is professional in their interaction with the offenders and other staff, but it is noted that many of them are also newly hired. The auditor observed a sense of pride in all levels of staff in the facility regarding their jobs; officers interviewed and talked with said they were involved in the PREA Audit preparation process and committed to the success of the facility. Staff and officers feel that their contributions are recognized, that they make a difference, and their interviews supported that Bayou Dorcheat Correctional Center is a safe and good place to work.

Training is provided concerning cross-gender pat searches in the event there is an emergency, but these searches are routinely prohibited. Staff is aware of the prohibition of physically examining a transgender or intersex offender to determine sex. Staff is aware of the requirement for immediate reporting and all methods of offender reporting.

All specialized staff interviewed were well-versed in their respective areas of responsibility regarding PREA and affirmed their facility compliance with the applicable PREA standards. All uniformed facility staff are trained as first responders and are familiar with their duties although there were a few training needs evident from the interviews. There are no SAFE or SANE- trained staff at the facility, but Bayou Dorcheat CC uses the nearby Ochsner-LSU Hospital in Shreveport for SAFE/SANE needs and forensic examinations. Staff were familiar with the procedures regarding reporting, responding and basics of evidence preservation by initial responders.

The facility refers all cases or allegations of sexual assault and sexual abuse to the Sheriff's Office Investigator at the facility for investigation. The investigator has received appropriate specific training and was familiar with the required processing of evidence and prosecution.

Interview Numbers:

- 1 Warden
- 1 PREA Coordinator
- 1 PREA Compliance Manager
- 1 Community Advocacy Agency Head (2 Interviews)
- 1 Contract Administrator
- 1 Administrative (Human Resources Staff)
- 3 Intermediate or higher-level facility staff; (SGT/ shift supervisors)
- 1 Medical and mental health staff- 1 Nurse
- 1 Investigator
- 1 Staff who perform screening for risk of victimization and abusiveness
- 1 Staff who supervise Segregation
- 2 Staff on the incident review team
- 1 Designated staff member charged with monitoring retaliation
- 3 First responder staff
- 3 Intake staff (Booking)
- 15 Randomly Selected Staff Interviews

### **Conclusion**

The Bayou Dorcheat Correctional Center of the Webster Parish Sheriff's Office is compliant with the U.S. Department of Justice PREA Standards.

On May 30, 2019, the auditor conducted an out-brief to the Warden and the PREA Compliance Manager to give them an overview of the process and thank them for their participation. The timeline and expectations for the remainder of the audit were discussed. The auditor expressed appreciation for the exceptional hospitality and cooperation of everyone involved.

The auditor explained the procedures that would follow the completion of the audit, i.e. the triangulation of all data from the site visit and site review, the documents submitted and reviewed, and the interviews completed. It was explained that any areas found not to meet standards would need to be corrected and the auditor would work with the leadership and the facility PREA Manager to accomplish the needed corrections. This occurred in the 180-day Corrective Action (CA) period following the Interim Report to the facility, and extensive and frequent communication with the PREA Compliance Manager (PCM) occurred over that 6 month period.

The willingness of all staff involved to accomplish PREA compliance was acknowledged and their determination to become compliant was evident. Under the leadership of the Warden, the leadership team, and members of the staff are all sensitive to ensure this facility comes into compliance with PREA standards.

Positive attributes that supported eventual compliance include that Bayou Dorcheat is a smaller facility, where most offenders are easily observed, where many are frequent repeaters well-known to the local staff, and where offenders feel safe. Across the board, the staff displayed a commitment to keep themselves and offenders safe and secure and to try to assist them in changing their lives. Staff perform many overlapping duties and have several simultaneous responsibilities, and they are dedicated to doing their jobs well. Staff attitude was perhaps the strongest resource present for becoming compliant as the facility moved ahead.

The facility does not have the staff and resources available to large urban jails but the resulting need to use the same staff in several overlapping areas also makes changes easier to accomplish. The camera quality is excellent although a few blind spots still exist and need coverage, and the facility is pursuing meeting this need. The virtually total same-gender supervision emphasis helps support compliance with a number of PREA objectives.

The openness of the facility design makes separation of special categories more difficult to achieve even as it makes some security/safety areas easier to observe and keep secure. The quality of the physical plant is negative in terms of achieving compliance and presents especially difficult challenges at the Women's Facility. The training program is new and needs a number of changes but the PCM is very dedicated and addressed these needs during the Corrective Action period. The other areas needing correction presented some challenges but were resolved with the support of the LA DOC PREA statewide Coordinator coordinating and assisting the Parish Warden and PCM in this CA process.

### **Summary of Audit Findings**

<b>Number of Standards Exceeded:</b>	<b>0</b>
<b>Number of Standards Met:</b>	<b>43</b>
<b>Number of Standards Not Met:</b>	<b>0</b>

### **Corrective Actions**

There were a number of areas in need of corrective action following the onsite review, as would be expected in an initial PREA Audit. Issues or observations needing Corrective Action (CA) raised during the facility site review, interviews and pre-audit work were:

115.15 Gender Supervision



The female confinement space was, on rare occasion, supervised by a male deputy in the absence of an available female staff member. Security camera technology in the all-male correctional center has blocking technology to prevent observing the private parts of naked offenders as they shower, complete toilet functions, etc. but that technology was not in place in the female facility and thus female offenders were shown on camera in various unclothed states and observable to a male deputy assigned to the desk monitor.

On July 21, Homeland Security (WPSO camera contractor) installed visual blocks on private areas of the women's cell and living spaces. This is now compliant.

#### 115.13 and Observation: Female Confinement Conditions

Interviews with staff and with female offenders addressed the significantly unsatisfactory conditions in which female offenders live. The crowding was significant enough to provide an atmosphere of potential confrontation and offenders pressuring and confronting each other on a regular basis. Cleanliness shortfalls, and utility or maintenance issues exacerbate these conditions and women reported routine stress over having no privacy or security from other offenders. There were virtually no program spaces and virtually no programs, so the women were largely idle all the time, and this resulted in some offenders routinely attempting to develop unauthorized relationships or pressure other offenders into such a relationship. These spaces do not appear to meet any standards for conditions of confinement, state or federal.

On 8/5/2019, the BDCC Warden forwarded comments from the report to the Webster Parish Police Jury, who have the Parish budget responsibilities for the women's spaces, and he requested support in improving facilities and security/safety issues regarding sexual safety and conditions of confinement. That request is under consideration.

On 8/1/2019, the population had been reduced to 63 females due to transfers made to improve conditions of confinement. This has remained reduced throughout the Corrective Action period and is a significant improvement.

Although local and State DOC legal standard compliance and programmatic issues are still working, the PREA safety issues in this area of operations are now compliant.

#### 115.81(1) Mental Health

At the time of the site review, there appeared to be a limited capability to provide the required mental health response, and probably not normally within the 14-day requirement. The local mental health program did not apparently provide any significant service to the offenders. At the male Correctional Center, the state DOC male offenders receive some mental health treatment, as well as substance abuse programs, but the DOC women received nothing similar.

The PCM reports that DOC substance abuse staff, placed there for male DOC offenders, have conducted substance abuse assessments of females confined. Because of the lack of adequate program space in the women's facility, the BDCC staff is pursuing resolutions to staffing issues in transporting females to the primary site for classes, etc. Significant numbers of confined females have substance abuse issues and there appear to be adequate DOC female numbers for group work similar to what the men receive. Interviews with mental health staff indicated a female group was potentially possible if 6-15 offenders qualified. During the site review, about 38 DOC females were in the facility.

Nationally, significant numbers of female offenders received into confinement report having been sexually abused prior to confinement- in the community, as children, or in other facilities. PREA requirements are for offenders to receive mental health screening and related services. Since the site review, if an offender reports having been a victim of sexual assault/abuse in the past, the offender meets with the PCM within 14 days to either request or decline counseling. The nurse would then set up the appointment with either Ochsner or Minden Behavioral Health Clinics. The only offenders who have reported being victimized by prior abuse are receiving mental health evaluations through that DOC sex offender program staff.

Since the site review, the PCM has worked with the community advocacy agency Project Celebration and they now conducting routine support groups for victims of sexual abuse and domestic violence; a significant resource to this underserved population.

Mental health interns from Southern University come into the facility and work with offenders one-on-one and also teach coping skills. The PREA Coordinator also reports that DOC mental health resources are present at BDCC primarily for DOC offenders but are available for any mental health crisis, including for local non-DOC offenders.

This area is compliant.

#### 115.81(2) Medical

Offender interviews reflected a lack of support providing medications they had received in the community prior to confinement, including psychotropic medications for significant mental issues and abuse-related trauma as well as issues like cancer, heart disease, etc. This is complicated by the inability of the nurse to prescribe such medications and the past general absence of referrals to mental health agencies or medical staff who could prescribe needed mental health medications.

Since the site review, the only prescriptions that not offered to the offenders are CDS medications. The medical staff does inform the DOC staff if the offender has higher-level needs and the physician is advised of the medications needed. The PREA Coordinator and PCM have reported that any offender needing medication beyond the BDCC capabilities can be referred to the state DOC for transfer consideration.

- Care here appears to be similar to or consistent with community standards.

- Interviews indicated that security personnel remained in the very small medical area even when the nurse was working with the offenders, largely eliminating any opportunity to report an issue or be forthcoming about prior abuse or issues of abuse. It is noted that offenders can request auditory privacy with the nurse or the assistants.

BDCC offers all victims of sexual abuse forensic Medical examinations at an outside facility, without financial cost to the victim, when evidentiary or medically appropriate at Ochsner-LSU Health in Shreveport, LA. Such examinations are performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) when possible. If SAFEs or SANEs cannot be made available, the examination is performed by other qualified medical practitioners. Testing for sexually transmitted diseases and other diseases as determined by the attending physician and counseling are made available to the alleged victim when appropriate. This area is compliant.

### 115.31 Training of Staff

The facility uses OJT primarily as their training method due to the small staff size and difficulty adjusting staff rosters.

Staff training has faced a shortfall in addressing PREA issues in several areas. Through documentation and interviews with both leadership and line staff, it is apparent that all staff receive training concerning the facility's zero-tolerance policy during the training process. Initial training regarding initial response to incidents has been provided and answers were generally satisfactory and reflected that training. However, it was noted during several staff interviews that staff had not received all the training as specified in the national Standards and in accordance with WPSO policies. Training-related answers were not consistent, in the following areas:

- Coordinated Response to a sexual abuse or assault incident
- Evidence preservation steps after an incident
- Search techniques for opposite gender or transgender offenders
- Not all contractors who interact with offenders attend initial or annual required PREA training.

The specialized investigative staff has completed the on-line NIC and other specialty training but the medical staff had not at the time of the site review. Medical staff also reported in the interview that annual PREA training provided to all staff is not required at BDCC for medical staff, although it is mandated in the standards.

On November 22, 2019, NIC training for medical staff was completed and the auditor was provided a certificate of that completion. The DOC PREA Coordinator has advised the auditor that the nurse also attended the regional PREA training provided by the DOC Coordinator subsequent to the audit. Medical staff now participate in annual staff correctional training with required sections including PREA. This area is compliant.

### 115.32 Contractor Training

The PAQ indicated no criminal background checks were done on contractors who might have contact with offenders in the 12 months prior to the site visit. THE PCM, in an October 22, 2019 email provided a copy of the contractor identification and information indicating that these checks have been completed. This area is compliant.

### 115.33 Offender Education

Interviews of randomly selected offenders indicated that not all required PREA assessment questions were asked at intake, and not all required offender education was received during the intake process. Inconsistent and wide-ranging answers were received from offenders interviewed regarding the intake process, as follows:

- Answers varied widely regarding whether PREA questions were all asked at intake.
- Women offenders interviewed often reported not seeing the PREA video.
- Many male offenders reported receiving a handbook but women, who are supposed to receive it at the women's facility, did not. It is noted that required reporting and advocacy information is in this Handbook at the PREA attachment.
- Some longer-term offenders reported having received a pamphlet on PREA but most newer offenders did not.
- It is noted that staff interviews indicated that even DUI's being held for 12 hours were asked the PREA questions and shown the video.

On October 22, 2019, the PCM provided the Auditor with a copy of guidance issued to all BDCC staff reiterating and mandating that every PREA question be asked and the shift supervisor is tasked to randomly check to ensure this occurs. This memo, also covered at muster training, also required that every offender view the PREA video before being relocated to assigned housing.

All women now receive the Handbook at the time of intake and that issue is resolved. The PREA video is now shown to all female offenders at the Parish Women's facility to ensure they have seen it there since the shifts were not consistent with allowing them to view it in the holding cell during intake. This area is compliant.

### 115.51 Offender Reporting

Multiple interviews reported that offenders in Block E, who could be disciplinary or merely newly arrived, had no access to phone or mail privileges at all, a PREA violation since they thus have no ability to report any allegations or issues, or request any support.

The facility reports that, as of January 10, 2020, this unit has mail access to the outside community. Since phone access is still denied, it becomes essential that offenders have access to addresses of agencies they can contact and this information has to be provided either by posters or inside the handbook that is required to be issued to every segregated offender. The PCM reports, and has provided photographs, showing the posters placed

into use and has verified that handbooks are issued to every offender at intake. Eliminating telephone access removed Crime Stoppers as an anonymous reporting resource but access is still available. All deputies have been trained that segregated offenders who request to make a call about a PREA allegation are to be escorted to the Booking area and allowed to make the call. Offenders are then able to confidentially call Crime Stoppers or LaFASA. Although this lack of anonymous access to Crime Stoppers weakens outside reporting of allegations, it is noted that the Sheriff has assigned a criminal Investigator to the facility to deal with offender issues Any offender can contact this investigator to file an allegation. The area Advocacy organization, Project Celebration, has agreed to accept written allegation reports from BDCC offenders in addition to requests to provide advocacy support. The PCM notified the auditors February 5, 2020 that the decision has been made to provide access to telephones in the Segregation area and that this action is underway.

Incident reporting signage, emergency phone numbers, etc., were posted as required in general population and housing units. Staff reported all required signs regarding PREA were posted; many offenders indicated that allegation reporting information was available but that advocacy support information was not posted, and this lack was reported especially by female offenders.

The PCM reported January 23, 2020, that Advocacy signs have been posted in all units to include the segregation area and the female housing units. Segregation units now have large postings that can be viewed unit-wide that provide data on how to contact Project Celebration for requesting advocacy/counseling support or reporting allegations. The PCM provided photographs of the signage. This area is compliant.

#### 115.89 Data Storage, publication, and destruction

PREA data needed to be published on the website or made publicly available in some manner. The PCM reported January 10, 2020, that arrangements were complete to publish the PREA data on the WPSO website. This is now compliant.

#### 115.16 Lack Of Availability Of Non-Offender Interpreters

The facility had utilized offender interpreters in the intake/booking area and reportedly in the medical area as well, according to several offender and line staff interviews. The facility Captain also used a telephone application (e.g. Google Translate) to assist in the few translation issues that arose at this small facility.

Since the site review, the PCM has obtained information on an interpreter service that is part of an existing court contract that BDCC can use. The facility falls under the contract for, and will use, the same Parish Certified Court Interpreters used by the District Court and Clerk's Office. This area is compliant.

## PREVENTION PLANNING

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

### 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*)

The WPSO has appointed a PREA Coordinator who has oversight of activities to develop, implement and oversee WPSO's efforts to comply with the PREA Standards in all units. She reports that she has adequate time for this function, in addition to her various administrative and management duties at her facility.

It is the policy of Bayou Dorcheat Correctional Center to provide a safe, humane and appropriately secure environment, free from threats of sexual abuse and sexual harassment for all staff, volunteers, contractors, and offenders by maintaining a program of prevention, detection, response, reporting, investigating and tracking of all alleged and substantiated incidents of sexual abuse. Bayou Dorcheat CC leadership has zero-tolerance for incidents of sexual abuse and sexual harassment. Bayou Dorcheat's CPL Ashley Johnson serves as PREA Compliance Manager to coordinate efforts to comply with the PREA standards. The PREA Compliance Manager (PCM) reported in the interview that she has sufficient time and authority to coordinate the facility's efforts to comply with PREA Standards.

The PREA Compliance Manager (PCM), working with the DOC PREA Coordinator, is responsible for monitoring PREA related activities, etc. The PREA Compliance Manager (PCM) ensures that each Standards requirement, including verification that all training, screening, assessments, reporting and monitoring) is accomplished in a timely manner.

The Department has a zero-tolerance policy toward victimization and sexual abuse within the facilities through the PREA Program. Full investigations, appropriate reporting, and compliance to the standards program will be treated as a top priority by administrators and investigators.

Staff who violate this regulation may receive disciplinary action, up to and including termination.

#### Standard 115.12: Contracting with other entities for the confinement of offenders

##### 115.12(a)

- If this agency is public and it contracts for the confinement of its offenders 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 offenders.)  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 offenders 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*)

BDCC does not contract out their confinement function but do contract for a few services and personnel and the contract manager and the PREA Coordinator interviews indicated that part of their job is to ensure every contract is totally clear on PREA requirements, training, etc. The PREA Coordinator stated that all PREA requirements are included in the contracts and further noted that all contractors are routinely audited by the State agency and the audit includes PREA requirement compliance.

#### 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 offenders 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 offenders 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 offenders 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 offender 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*)

DOC requires each facility housing DOC offenders to develop and document a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect offenders against sexual abuse. When designing new units, planning substantial expansions or modifications to existing units or when updating a video monitoring system, the Warden is tasked to consider how such expansions, modifications or updates would enhance the unit's ability to protect offenders from sexual abuse.

The facility has added additional video cameras since the last monitoring to assist the effectiveness of the facility PREA program. Each year a review and evaluation are conducted to note any areas of need or best practice in the placement of cameras. Currently, all areas of offender housing and/or activity area are well supervised.

The Warden reported in his interview that it requires continuous attention to ensure that priority and critical billets are filled in each shift. When calculating adequate more long-term staffing levels and determining the need for video monitoring, each unit is required to take into consideration the items listed in §115.13(A):

- 1) Generally accepted detention and correctional practices;
- 2) Any judicial findings of inadequacy;
- 3) Any finding of inadequacy from Federal investigative agencies;
- 4) Any findings of inadequacy from internal or external oversight bodies;
- 5) All components of the unit's physical plant (including blind spots or areas where staff or offenders may be isolated);
- 6) The composition of the offender population;
- 7) The number and placement of supervisory staff;
- 8) Institution programs occurring on a particular shift;
- 9) Any applicable State or local laws, regulations or standards;
- 10) The prevalence of substantiated and unsubstantiated incidents of sexual abuse;
- 11) Any other relevant factors.

Interviews with the Warden, PREA Compliance Manager, and senior staff indicated that incident data is considered in staffing reviews, but all interviews noted that there are few sexual assault incidents to actually review and the Sexual Assault Incident Reviews normally focus more on staffing, camera technology, blind spots and population characteristics. The PREA Coordinator, in her interview, indicated that she reviews every facility staffing plan annually. In circumstances where the staffing plan is not complied

with, the Warden is aware of and documents deviations from the plan.

The Warden, Captain, and PREA Compliance Manager assess whether adjustments are needed to the staffing plan, deployment of video monitoring systems or other monitoring technologies, and to determine the resources the facility has available to commit to ensuring adherence to the staffing plan.

The staffing plans determine and document whether adjustments are needed to the staffing plan, deployment of video monitoring systems or other monitoring technologies and the resources the facility has available to commit to ensuring adherence to the staffing plan.

In addition to rounds specified in institutional policy, the Warden requires both intermediate-level or higher-level supervisors to conduct and document unannounced rounds on all shifts for the purpose of identifying and deterring staff sexual abuse and sexual harassment. The policy prohibits staff from alerting other staff members that these supervisory rounds are occurring.

#### Standard 115.14: Youthful offenders

##### 115.14(a)

- Does the facility place all youthful offenders in housing units that separate them from sight, sound, and physical contact with any adult offenders through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful offenders [offenders <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 offenders and adult offenders? (N/A if facility does not have youthful offenders [offenders <18 years old].)  Yes  No  NA
- In areas outside of housing units does the agency provide direct staff supervision when youthful offenders and adult offenders have sight, sound, or physical contact? (N/A if facility does not have youthful offenders [offenders <18 years old].)  Yes  No  NA

##### 115.14(c)

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

This facility does not routinely house youthful offenders and just processes them into confinement and only retains them until they can be transferred to a youthful offender program in nearby Shreveport LA that is youth offender compliant.

The policy reported in the PAQ and discussed with the PCM is compliant but there were no youthful offenders to interview.

#### POLICY:

It is the policy of the Webster Parish Sheriff's Office that youthful offenders will not have sight, sound, or physical contact with adult offenders through the use of a shared day room, holding cell, or another common area.

In situations where youthful offenders and adult offenders are in areas where they may have such contact, staff will provide direct supervision at all times.

Facility staff will attempt to avoid placing youthful offenders on a segregated housing status to comply with this policy, but the safety of the youthful offender will take precedence.

Youthful offenders will be allowed access on a scheduled basis to the recreation area

designated for youthful offenders.

Absent exigent circumstances, staff will not deny youthful offenders daily exercise or recreation or access to education services, work opportunities, or other programs offered at the facility.

Intake/Booking staff shall notify the on-duty supervisor of any offender being processed that is under eighteen (18) years of age. Booking staff will ensure that all youthful offenders are screened and assigned to the designated housing area at the Bayou Dorcheat Correctional Center.

All male youthful offenders will be assigned to Alpha Cells 217, 219, 220, 243, 245, and/or 261. If the cells are unavailable, youthful male offenders will be housed in Booking Cell# 33 or Cell# 113 unless BDCC is housing a youthful female offender in which case youthful males will be placed in alternative housing options. If further housing arrangements are made staff will ensure it is a safe, humane, and appropriately secure environment.

The supervisor will ensure that procedures for housing youthful offenders are followed and will inform the Warden and/or Assistant Warden(s) of the youthful offender's custody status.

The Warden and/or Assistant Warden(s) will notify Medical Staff/Mental Health services that a youthful offender has been admitted to the facility within 72 hours of their arrival.

Youthful offenders will be offered programming at a minimum of one hour a week with a mental health clinician, counselor, educational volunteer, and/or programming services contractor/volunteer. Youthful offenders will also be afforded the opportunity for additional programs through education and substance abuse where applicable.

Youthful offenders will be afforded at least one appointment with a mental health clinician and/or counselor.

Once a week, a list of any new youthful offenders admitted to the BDCC will be made available to the Webster Parish School Board to be screened for additional programming eligibility.

#### Standard 115.15: Limits to cross-gender viewing and searches

##### 115.15(a)

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

##### 115.15(b)

- Does the facility always refrain from conducting cross-gender pat-down searches of female offenders in non-exigent circumstances? (N/A here for facilities with less than 50 offenders before August 20,2017.)  Yes  No  NA
- Does the facility always refrain from restricting female offenders' 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 offenders before August 20, 2017.)  Yes  No  NA

#### 115.15(c)

- Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?  Yes  No
- Does the facility document all cross-gender pat-down searches of female offenders?  Yes  No

#### 115.15(d)

- Does the facility implement a policy and practice that enables offenders to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?  Yes  No
- Does the facility require staff of the opposite gender to announce their presence when entering an offender housing unit?  Yes  No

#### 115.15 (e)

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

Cross-Gender Supervision:

The female confinement space is, on rare occasion, supervised by a male deputy in the absence of an available female staff member. Security camera technology in the all-male correctional center has blocking technology to prevent observing the private parts of naked offenders as they shower, complete toilet functions, etc. but that technology was not in place in the female facility and thus female offenders were shown on camera in various unclothed states and observable to the male deputy on the desk monitor at the time of the audit. The security contractor remedied this with blocking technology immediately after the audit.

The Webster Parish Sheriff's Office permits only same-sex searches and there have been no cross-gender searches this past 12 months. During emergencies or other exigent circumstances requiring the immediate need, deputies may conduct a pat search (frisk) on an offender of the opposite sex with proper authorization from a supervisor. All searches will be conducted in a professional and respectful manner and in the least intrusive manner possible, consistent with security needs. All Deputies receive training on same-sex pat searches (frisk) as part of their mandatory training. Deputies must document any search conducted on a member of the opposite sex. This rule applies to



all types of searches identified in the Bayou Dorcheat Parish Sheriff's Office policies and procedures pertaining to Searches.

Interviews indicated, for example, that the site review for the PREA audit was an unusual departure wherein opposite gender persons actually entered a unit. Noted also was the prohibition of cross-gender searches of any type, with the normal exception for exigent circumstances (which have not occurred). Multiple interviews were conducted with random and specialized staff. Interviews showed that the facility does an excellent job of ensuring it announces the presence of opposite gender staff the rare times they appear in a unit. During the site review, staff were aware of the requirement of announcing the presence of the opposite gender and did so accordingly and in a timely manner. All announcements were made either from the control unit or as entry occurred. Cross-gender visits are actually rare as all units are staffed with same-gender staff as the offenders in that unit, although on rare occasion a male will work in the female unit due to a shortage in the very small female staff numbers. Staffing appeared adequate but this is a small facility and the number of line staff is small.

Interviews with both staff and offenders stated that offenders are able to shower, perform bodily functions, and change clothes without a non-Medical staff of the opposite gender viewing their buttocks or genitalia, except in exigent circumstances or when such viewing is incidental to routine rounds. Upon entering a housing unit, all cross-gender staff announces their presence. During the facility site review, opposite gender announcements were made in all areas. It is additionally noted that opposite gender direct supervision in housing areas is rare in the women's facility and non-existent in the men's facility, and this information was provided in both staff and offender interviews as well as documented on the staffing rosters. Announcement of opposite gender staff entering a unit is documented in the log by the Control Room operator in that area to provide compliance documentation for the standard.

No search or physical exam is permitted when the sole purpose of the search or physical exam is to determine the offender's genital status. Random staff and Medical staff both stated in interviews that only Medical staff could perform any similar examination.

All correctional security staff is trained to conduct cross-gender pat-down searches and searches of transgender and intersex offenders in a professional and respectful manner, in the least intrusive manner possible while maintaining good security practices. During interviews, it was noted that staff was aware of the procedure to use in the event that they had to search a transgender offender, but it is rarely used due to there being so few in number.

Standard 115.16: Offenders with disabilities and offenders who are limited English proficient

115.16(a)

- Does the agency take appropriate steps to ensure that offenders 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: offenders who are deaf or hard of hearing?  Yes  No
- Does the agency take appropriate steps to ensure that offenders 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: offenders who are blind or have low vision?  Yes  No
- Does the agency take appropriate steps to ensure that offenders 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: offenders who have intellectual disabilities?  Yes  No
- Does the agency take appropriate steps to ensure that offenders 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: offenders who have psychiatric disabilities?  Yes  No
- Does the agency take appropriate steps to ensure that offenders 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: offenders who have speech disabilities?  Yes  No
- Does the agency take appropriate steps to ensure that offenders 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 offenders 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 offenders with disabilities including offenders 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 offenders with disabilities including offenders 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 offenders with disabilities including offenders 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 offenders 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 offender interpreters, offender readers, or other types of offender assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the offender's safety, the performance of first-response duties under §115.64, or the investigation of the offender'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 PAQ reports no use of offender interpreters in the past 12 months, however, staff and offender interviews indicate the opposite. The facility has reportedly utilized offender interpreters in the intake/booking area and reportedly in the medical area as well, according to several staff interviews. The facility Captain uses a telephone app to assist in the few translation issues that arise.

WPSO Policy is that all facilities take appropriate steps to ensure that offenders with disabilities (including, for example, offenders who are deaf or hard of hearing, those who are blind or have low vision, those who have intellectual, psychiatric, or speech disabilities), have an equal opportunity to participate in or benefit from all aspects of the WPSO's efforts to prevent, detect and respond to sexual abuse and sexual harassment.

Bayou Dorcheat CC does use offender interpreters for routine purposes, primarily non-certified offenders, as interpreters.

Appropriate steps are required to ensure that offenders with disabilities deaf, hard of hearing, blind, have low vision, intellectual disabilities, psychiatric disabilities, speech disabilities, limited English proficient, or limited reading skills), have an equal opportunity to participate in or benefit from all aspects of the facilities efforts to prevent, detect and respond to sexual abuse and sexual harassment. Written materials are provided for offenders with hearing disabilities, and access is provided through online translation services (i.e. Google, etc.) for non- or limited English proficient offenders and video presentations are available for offenders with limited reading skills as well as staff assistance.

#### Standard 115.17: Hiring and promotion decisions

##### 115.17(a)

- Does the agency prohibit the hiring or promotion of anyone who may have contact with offenders 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 offenders 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 offenders 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 offenders 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 offenders 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 offenders 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 offenders?  Yes  No

#### 115.17(c)

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

115.17(e)

- Does the agency either conduct criminal background records check at least every five years of current employees and contractors who may have contact with offenders 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 offenders 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 offenders 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*)

As indicated by interviews with the PREA Coordinator, Compliance Manager and the Human Resources (HR) staff member, Bayou Dorcheat does not hire, promote, or enlist the services of any contractor who may have contact with offenders who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility or other institutions. Per policy, there shall be no hiring, detail or promotion of an applicant, employee or contractor 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;
- Has been civilly or administratively adjudicated to have engaged in the above conduct. Any incidents of sexual harassment are a determining factor as to whether to hire or promote, or to enlist the services of a contractor.

Prior to hiring, detailing or promoting any employee/applicant or enlisting services of a contractor who may have contact with offenders Bayou Dorcheat CC conducts criminal background checks in accordance with DOC and Sheriff's Department policies. The PAQ indicated no criminal background checks were done on contractors who might have contact with offenders in the past 12 months but these checks were done after the site review and data provided the auditor October 22, 2019. Prior to hiring, the Human Resources Office contacts each applicant's prior community confinement facility, jail, lockup, and/or prison employers. An Authorization to Contact Previous Employers is required and completed by all applicants prior to the effective date of hire. Applicants for hire, detail to special duty, or direct promotion must also answer these questions prior to the effective date of hire or promotion.

All applicants (including promotions) are required to answer verbal and written questions

relative to previous misconduct described in 115.17(a), according to interviews with supervisory and HR staff. Applicants must notify Human Resources if such charges have been brought against them. Current employees must notify their immediate supervisor. The form PREA Requirements for Applicants and Employees Being Considered for Hire, Detail to Special Duty and/or Promotion is utilized upon hire for this purpose.

Each employee has a personal responsibility to disclose to the Warden within 72 hours, any such conduct of which he/she accused, charged, and/or convicted. Applicants and employees who fail to disclose this information are subject to disciplinary action up to and including termination.

Unless prohibited by law, information regarding substantiated allegations of sexual abuse or sexual harassment involving current or former employees upon receiving a request from a community confinement facility, jail, lockup, prison, juvenile facility, or other institutions for whom such employee has applied to work is provided.

Human Resources staff ensures a criminal history check is conducted at the time of application submission and at least once every five years for employees. Business office staff ensure annual criminal history checks are conducted on all contractual employees. Prior to approval as a volunteer, a criminal history check is conducted on volunteers and every two years thereafter.

All Sheriff's department staff hired this past year had criminal background checks and there were also zero service contract staff where criminal background checks were required. Random staff interviews interviewed indicated these had been done and they were aware of them when they occurred.

## Standard 115.18: Upgrades to facilities and technologies

### 115.18 (a)

- If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect offenders 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 offenders 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 designing new units, planning substantial expansions or modifications to existing units or when updating a video monitoring system, the Warden stated he does consider how such expansions, modifications or updates would enhance the unit's ability to protect offenders from sexual abuse.

#### Female Confinement Conditions:

Interviews with staff and with female offenders across the board addressed the significantly unsatisfactory conditions in which female offenders live. The crowding is significant enough to provide an atmosphere of potential confrontation and offenders pressuring and confronting each other on a regular basis. Cleanliness shortfalls, and utility or maintenance issues exacerbate these conditions and women report routine stress over having no privacy or security from other offenders. There are virtually no program spaces and virtually no programs, so the women are largely idle all the time, and this results in some offenders routinely attempting to develop unauthorized relationships or pressure other offenders into such a relationship. These spaces do not appear to meet any standards for conditions of confinement, state or federal.

As of July 10, 2019, the facility PCM advises that the first step in this area is that they have begun offering weekly support groups by Project Celebration, the statewide victim crisis agency, to survivors of sexual assault and domestic violence.

On 8/5/2019, the BDCC Warden forwarded comments from the report to the Webster Parish Police Jury, who have the Parish budget responsibilities for the women's spaces, and he requested support in improving facilities and security/safety issues regarding sexual safety and conditions of confinement. That request is under consideration.

The DOC substance abuse staff located at BDCC for male offenders has conducted a substance abuse assessment of females confined and the BDCC staff is pursuing

resolving staffing issues in transporting females to the primary site for classes, etc.

On 8/1/2019, the population had been reduced to 63 females due to transfers made to improve conditions of confinement. This has remained reduced.

Although local and State DOC programmatic issues are still working, the PREA safety issues in this area of operations are compliant.

## RESPONSIVE PLANNING

### Standard 115.21: Evidence protocol and forensic medical examinations

#### 115.21(a)

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

#### 115.21(b)

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

#### 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*)

There were no forensic exams conducted during the past 12 months.

Evidence Protocol and Forensic Medical Examinations Policy:

- All victims of sexual abuse have access to a forensic Medical examination off-site at

Minden, a local hospital, at no cost to the victim, where evidentiary or Medically appropriate.

- Examinations performed will be conducted by individuals that have received Sexual Assault Forensic Examiners (SAFE's) or Sexual Assault Nurse Examiners (SANE's) training or by qualified Medical practitioners.

Offenders who are victims of sexual abuse have access to victim advocates on staff and to staff at a local community violence response and rape crisis center, Project Celebration, an agency that has an MOU with WPSO. Offenders may request a victim advocate on staff or from a community-based organization to accompany and support through the forensic Medical examination, investigatory interview and to provide emotional support, crisis intervention, information, and referrals. The Victim Advocate consults with the assigned investigator and offers assistance to the alleged victim as is appropriate. According to interviews with the PCM, an Advocate, and the investigator, a facility Advocate assists in the facility and community Advocates can be available at the hospital:

- as needed.
- Any investigations that cannot be handled at the facility are transferred to the WPSO criminal division for action. Bayou Dorcheat correctional investigators use the same standards of investigation as 115.21 (a) – (e).

As requested by the victim, the Advocate may participate in supporting victims throughout the forensic Medical examination process (ensuring compliance in confidentiality laws) and investigatory interviews and provide emotional support, crisis intervention, information, and referrals.

All conversations between the Victim Advocate and the alleged victim remain confidential except when:

- Disclosure of the confidential information is necessary to protect the victim or another (staff or offender) from potential harm; or
- The identity of an otherwise unknown alleged sexual predator is revealed.

## Standard 115.22: Policies to ensure referrals of allegations for investigations

### 115.22(a)

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

115.22(b)

- Does the agency have a 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*)

The Department has adopted a zero-tolerance policy toward victimization and sexual

abuse through the PREA Program. Full investigations, appropriate reporting, and compliance to the standards program are treated as a top priority by administrators and investigators. During the past 12 months, there were 20 PREA instances of allegations of sexual abuse or harassment and all received administrative investigations, none received criminal investigation, and all were completed.

The Investigators ensure that an administrative and/or criminal investigation is conducted in all cases of sexual abuse and sexual harassment they receive.

Claims made which are out of the scope of the training provided to Bayou Dorcheat CC investigators would be referred for investigation to the Webster Parish Sheriff's Office criminal investigation unit and the case file would show it was referred to the criminal division. However, the current facility investigator has extensive criminal investigation experience and also works closely with the criminal division leadership.

## TRAINING AND EDUCATION

### Standard 115.31: Employee training

#### 115.31(a)

- Does the agency train all employees who may have contact with offenders on its zero- tolerance policy for sexual abuse and sexual harassment?  Yes  No
- Does the agency train all employees who may have contact with offenders 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 offenders on offenders' right to be free from sexual abuse and sexual harassment  Yes  No
- Does the agency train all employees who may have contact with offenders on the right of offenders 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 offenders on the dynamics of sexual abuse and sexual harassment

in confinement?  Yes  No

- Does the agency train all employees who may have contact with offenders on the common reactions of sexual abuse and sexual harassment victims?  Yes  No
- Does the agency train all employees who may have contact with offenders 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 offenders on how to avoid inappropriate relationships with offenders?  Yes  No
- Does the agency train all employees who may have contact with offenders on how to communicate effectively and professionally with offenders, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming offenders?  Yes  No
- Does the agency train all employees who may have contact with offenders 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 offenders at the employee's facility?  Yes  No
- Have employees received additional training if reassigned from a facility that houses only male offenders to a facility that houses only female offenders, or vice versa?  Yes  No

#### 115.31(c)

- Have all current employees who may have contact with offenders 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*)

The facility has 88 staff who have contact with offenders and all have received PREA training.

All training on sexual abuse includes the following:

- A zero-tolerance policy for sexual abuse and sexual harassment;
- How to fulfill their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures;
- The rights of offenders and employees to be free from sexual abuse and sexual harassment;
- The rights of offenders to be free from sexual abuse and sexual harassment;
- The rights of offenders and employees to be free from retaliation for reporting sexual abuse and sexual harassment;
- The dynamics of sexual abuse and sexual harassment in confinement;
- The common reactions of sexual abuse and sexual harassment victims;
- How to detect and respond to signs of threatened and actual sexual abuse;
- How to avoid inappropriate relationships with offenders;
- How to communicate effectively with offenders including, gay, bisexual, transgender, intersex, or gender nonconforming.

The training provided is geared to adult male offenders. Staff who transfer from a female institution receive an orientation to the differences in gender protocols.

All employees received annual training this past year on PREA and the current sexual harassment policies and procedures, and all are required to sign a training roster as

verification of their attendance and understanding of the training. All current staff and new hire employees sign the Sexual Assault and Sexual Misconduct with Offenders Acknowledgement Form and the Malfeasance in Office Form and both forms are maintained in the employee's personnel file.

Employee training regarding all areas of the PREA program are evident as observed during staff and offender interviews. All staff are well versed on the comprehensive required response procedures. Many staff were observed with a card that is carried on their person at all times listing the required steps in the event that a PREA allegation is reported. All staff are aware of the requirement to report immediately and maintain confidentiality concerning allegations. Staff are aware of the requirement to take all allegations seriously and procedures required for reports from other confinement facilities.

The Department provides Correctional Officers with refresher training annually, to ensure that all employees are aware of current sexual abuse and sexual harassment policies and procedures. All security staff are trained to conduct cross-gender pat-down searches, and searches of transgender and intersex offenders, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs.

During orientation and annually thereafter, all staff are trained in the prevention, detection, response, reporting, and investigation of sexual abuse.

Training also includes specialized training for Investigators but interviews indicate not for Medical staff. Medical staff employed by the agency have received appropriate training to assist them in arranging for the conduct of forensic examinations, but they do not perform them. The agency documents that Medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere.

Medical and mental health care practitioners also receive the training mandated for employees under §115.31 or for contractors and volunteers under §115.32, depending upon the practitioner's status at the agency.

Staff training has faced a shortfall in addressing PREA issues in several areas. Through documentation and interviews, it is apparent that all staff receive training concerning the facility's zero-tolerance policy during the training process. Initial training regarding initial response to incidents has been provided and answers were generally satisfactory and reflected that training. However, it was noted during several staff interviews that staff had not received all the training as specified in the national Standards and in accordance with WPSO policies. Training-related answers were not consistent, in the following areas:

- Coordinated Response to a sexual abuse or assault incident
- Evidence preservation steps after an incident
- Search techniques for opposite gender or transgender offenders

All BDCC staff members attended PREA Training conducted by the LA DOC PREA Coordinator on October 10, 2019 and October 17, 2019 to ensure total compliance with training requirements.

## Standard 115.32: Volunteer and contractor training

### 115.32 (a)

- Has the agency ensured that all volunteers and contractors who have contact with offenders 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 offenders 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 offenders)?  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*)

There are Contractors at the facility or who supervise workgroups, primarily 50 National Guard Employees, as well as food vendors, etc. Not all contractors who interact with offenders attend initial or annual required PREA training but these contractors are always supervised by WPSO deputies from the facility or have received the training (e.g., those assigned to National Guard work projects.) BDCC staff are also present when offenders

are on National Guard work parties but these Guard members have received annual training which includes PREA requirements.

At the time of the site review, there were 30 volunteers on board at that time, primarily for church services, counseling, etc. Approximately 50-60 volunteers visit the facility on a recurring basis and numbers fluctuate by season, holiday, etc. All volunteers are trained and the total number who may cycle through the facility during the year is approximately 100.

BDCC policy requires that all volunteers, interns, and contractors who have contact with offenders have been trained on their responsibilities under the Department's sexual abuse and sexual harassment prevention, detection and response policies and procedures, however, it appears not all contractors have been trained who should have been.

Volunteers, interns, and contractors must sign the Sexual Assault and Sexual Misconduct with Offenders Volunteer Acknowledgement Form stating that they understand that any violation shall result in disbarment from the facility and may include the filing of criminal charges as warranted.

The PCM oversees volunteer training, and the Training Department oversees staff and interns/student workers' training and is also responsible for ensuring that all who have contact with offenders receive training on their responsibilities. Refresher training is annual, usually every November according to staff interviews.

Interviews with the human resources manager and the PCM indicated that contractors and volunteers are informed prior to the awarding of the contract and prior to their approval of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment. Contractors and volunteers are required to sign the Sexual Assault Sexual Misconduct with Offenders form (kept in their personnel files). Violations of this policy serve as grounds for revoking the contract and terminating the volunteer(s) access. Contractors and volunteers are also responsible for reporting incidents of sexual abuse and sexual harassment.

All BDCC staff members attended PREA Training conducted by the LA DOC PREA Coordinator on October 10, 2019, and October 17, 2019, to ensure total compliance with training requirements.

#### Standard 115.33: Offender education

##### 115.33(a)

- During intake, do offenders receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?  Yes  No
- During intake, do offenders 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 offenders 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 offenders 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 offenders either in person or through video regarding: Agency policies and procedures for responding to such incidents?  Yes  No

#### 115.33(c)

- Have all offenders received such education?  Yes  No
- Do offenders receive education upon transfer to a different facility to the extent that the policies and procedures of the offender's new facility differ from those of the previous facility?  Yes  No

#### 115.33(d)

- Does the agency provide offender education in formats accessible to all offenders including those who are limited English proficient?  Yes  No
- Does the agency provide offender education in formats accessible to all offenders including those who are deaf?  Yes  No
- Does the agency provide offender education in formats accessible to all offenders including those who are visually impaired?  Yes  No
- Does the agency provide offender education in formats accessible to all offenders including those who are otherwise disabled?  Yes  No

- Does the agency provide offender education in formats accessible to all offenders including those who have limited reading skills?  Yes  No

115.33(e)

- Does the agency maintain documentation of offender 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 offenders through posters, offender 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*)

At intake, offenders receive information on the zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment. They receive required information on their right to be free from sexual abuse and sexual harassment; to be free from retaliation for reporting incidents, and procedures for responding to incidents. The PCM provides the offenders that have been a victim of sexual abuse a pamphlet with the information for Project Celebration and LaFASA to refer for continued care upon release.

Offender orientation is conducted during the intake process, excluding holidays. Offenders are provided with information verbally and through an orientation video that explains the rules, regulations and other important information that each offender needs to know before they are put into the general population.

Many of the interviews of offenders indicated that not all required PREA questions are asked at intake although a few offenders indicated they had been asked all questions. Recommend, at a minimum, that the leadership put out training and instructions to staff that staff are required to go over every question on the forms, and that short cuts will not be allowed. Inconsistent and wide-ranging answers were received from offenders interviewed regarding the intake process. The intake routine needs to be evaluated to

look at the following input received:

- Answers varied widely regarding whether the PREA intake questions were all asked at intake.
- Women interviewed often reported not seeing the PREA video.
- Many male offenders reported receiving a handbook but women, who are supposed to receive it at the women's facility, did not. It is noted that reporting and advocacy information is in the Handbook at the PREA attachment.
- Some longer-term offenders reported having received a pamphlet on PREA but most newer offenders did not.
- It is noted that, contrary to offender interviews, staff interviews indicated that even DUI's being held for 12 hours were asked the PREA questions and shown the video.

The facility utilizes different formats to ensure offenders understand the information that is being presented, including;

- Offenders who are limited English proficient;
- Offenders who are deaf;
- Offenders with visual impairment; and
- Those offenders who show signs of other disabilities including those with limited reading skills.

Offenders are familiar with the facility's PREA program as well as the methods of reporting, hotline number and ways to prevent issues. Information provided to the offenders concerning PREA is provided in hard copy format in the offender handbook, handouts, and posters. Several offenders with cognitive difficulties were interviewed and they expressed that staff spent additional time to ensure they explained all requirements and that they understood.

#### Standard 115.34: Specialized training: Investigations

##### 115.34(a)

- In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators 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*)

The newly assigned Investigator received training in conducting sexual abuse and sexual harassment investigations in a confinement facility. Investigator and Warden interviews confirmed that the training includes:

- Techniques for interviewing sexual abuse victims;



- Proper use of Miranda and Garrity warnings;
- Sexual abuse collection; and
- Criteria and evidence required to substantiate a case for administrative action or prosecution referral.

Training includes that offered by WPSO and training offered by the National Institute of Corrections. Documentation of this training is retained in the Training Department for training credit and documentation. Additionally, they receive classes on sexual assault, human trafficking investigations, etc.

All Law Enforcement staff are trained and certified to initiate all types of investigations. All BSO Corrections Bureau Deputies have received training on how to respond to PREA incidents, as have the 4 Investigators in the Criminal Division.

### Standard 115.35: Specialized training: Medical and Mental Health Care

#### 115.35 (a)

- Does the agency ensure that all full- and part-time Medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment?  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

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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*)

At the time of the site visit, the Medical staff, per interviews with the nurse and the PCM, were not trained in current agency and PREA policy, including the following:

- To detect and assess signs of abuse;
- To preserve physical evidence of sexual abuse;
- To respond effectively and professionally to victims of sexual abuse and sexual harassment;
- How to report allegations or suspicions of sexual abuse and sexual harassment.

In addition to the specialized training requirements and the requirement to complete NIC training related to this area, Medical staff does not receive the training required for all staff. During orientation and annually thereafter, the policy is that all staff receive training in the prevention, detection, response, reporting and investigation of sexual abuse. Medical staff appears to not have completed any specialized PREA training and report that annual PREA training is not required for medical staff as mandated in the standards.

On November 22, 2019, NIC training for medical staff was completed and the auditor was provided a certificate of that completion. The DOC PREA Coordinator has advised the

auditor that the nurse also attended the regional PREA training provided by the DOC Coordinator subsequent to the audit.

Medical staff now participate in annual staff correctional training which has required sections including PREA.

## SCREENING FOR RISK OF SEXUAL VICTIMIZATION AND ABUSIVENESS

Standard 115.41: Screening for risk of victimization and abusiveness

115.41(a)

- Are all offenders assessed during an intake screening for their risk of being sexually abused by other offenders or sexually abusive toward other offenders?  Yes  No
- Are all offenders assessed upon transfer to another facility for their risk of being sexually abused by other offenders or sexually abusive toward other offenders?  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 offenders for risk of sexual victimization: (1) Whether the offender has a mental, physical, or developmental disability?  Yes  No
- Does the intake screening consider, at a minimum, the following criteria to assess offenders for risk of sexual victimization: (2) The age of the offender?  Yes  No
- Does the intake screening consider, at a minimum, the following criteria to assess offenders for risk of sexual victimization: (3) The physical build of the offender?  Yes  No
- Does the intake screening consider, at a minimum, the following criteria to assess offenders for risk of sexual victimization: (4) Whether the offender has previously been incarcerated?  Yes  No
- Does the intake screening consider, at a minimum, the following criteria to assess offenders for risk of sexual victimization: (5) Whether the offender's criminal history is exclusively nonviolent?  Yes  No
- Does the intake screening consider, at a minimum, the following criteria to assess offenders for risk of sexual victimization: (6) Whether the offender 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 offenders for risk of sexual victimization: (7) Whether the offender is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the offender about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the offender 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 offenders for risk of sexual victimization: (8) Whether the offender has previously experienced sexual victimization?  Yes  No
- Does the intake screening consider, at a minimum, the following criteria to assess offenders for risk of sexual victimization: The offender's own perception of vulnerability?  
 Yes  No
- Does the intake screening consider, at a minimum, the following criteria to assess offenders for risk of sexual victimization: Whether the offender is detained solely for civil immigration purposes?  Yes  No

115.41(e)

- In assessing offenders 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 offenders 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 offenders 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 offender's arrival at the facility, does the facility reassess the offender'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 offender's risk level when warranted due to a: Referral?  Yes  No
- Does the facility reassess an offender's risk level when warranted due to a: Request?  Yes  No
- Does the facility reassess an offender's risk level when warranted due to a: Incident of sexual abuse?  Yes  No
- Does the facility reassess an offender's risk level when warranted due to a: Receipt of additional information that bears on the offender's risk of sexual victimization or abusiveness?  Yes  No

115.41(h)

- Is it the case that offenders 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 offender's detriment by staff or other offenders?  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*)

At intake, all offenders are screened to assess their risk for being sexually abused or abusive toward other offenders, using the LADPS&C high-risk screening process. The screening is normally conducted the day of arrival and utilizes WPSO PREA intake forms and processes. This intake assessment and reassessment was found to be inconsistent during the site visit, but it is now performed by the PCM in order to ensure consistent and thorough application and that all PREA questions are asked at reception. To ensure compliance in the absence of the PCM, the BDCC leadership issued guidance issued to all BDCC staff (October 22, 2019) reiterating and mandating that every PREA question be asked and the shift supervisor is tasked to randomly check to ensure this occurs. This memo, also covered at muster training, also required that every offender view the PREA video before being relocated to assigned housing.

WPSO's PREA Screening Checklist includes the following:

- Whether the offender has a mental, physical or developmental disability;
- The age of the offender;
- The physical build of the offender;
- Previous incarcerations;
- Exclusively nonviolent criminal history;
- Whether the offender has prior convictions for sex offenses against an adult or child;
- Whether the offender is or is perceived to be gay, lesbian, bisexual, transgender,

- intersex, or gender nonconforming;
- Has the offender previously experienced sexual victimization;
- The offender's perception of vulnerability;
- Whether the offender is detained solely for civil immigration purposes.

In addition, the screening also includes:

- Prior acts of sexual abuse;
- Prior convictions for violent offenses;
- If known to the facility: a history of prior institutional violence or sexual abuse.

An offender(s) risk is always reassessed when warranted due to referral, request, incident of sexual abuse or receipt of additional information that bears on the offender's risk of sexual victimization or abusiveness

No offender is disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked on the PREA Screening Checklist. Offender(s) are informed that any information given in response to questions asked are of a confidential nature and will not be disseminated in any way that will be exploited to the offender's detriment.

Bayou Dorcheat CC uses the LA DOC PREA Screening Checklist, an assessment tool utilized to assess an offender's probability of being a PREA Blue High-Risk Sexual Victim (HRSV), a PREA Red High-Risk Sexual Predator (HRSP) or if neither, classified as PREA Green.

- PREA Blue HRSV: Based on the Checklist, any offender within the custody of the WPSO who has been identified as an individual who has been confirmed as a sexual victim or appears to be at high risk for sexual predation.
- PREA Red HRSP: Based on the Checklist, any offender within the custody of the WPSO who has been identified or confirmed as an individual with the propensity to sexually assault others.
- PREA Green: Based on the Checklist, any offender within the custody of the WPSO with no significant risk of sexual victimization or sexually predatory behavior.

Decisions concerning housing assignments, jobs, and group activities for PREA Blue HRSV and PREA Red HRSP offenders are the responsibility of the PCM, based on the Checklist, record review, prior facility behavior and current behavior. If mental health intervention is indicated, a referral may be made by the medical staff nurse.

Transgender or intersex offender housing and programming assignments are considered on a case-by-case basis as to whether a placement would endanger the offender's health and safety or present management or security problems. Transgender offenders can shower separately, and each unit documents a Shower Preference Statement. Questions

regarding the identification of a transgender or intersex offender's genital status are referred to WPSO's Medical staff member and the Warden for review and, if needed, determination whether a physical examination in a private setting by a health care provider is necessary.

## Standard 115.42: Use of screening information

### 115.42(a)

- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those offenders 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 offenders 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 offenders 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 offenders 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 offenders 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 offender?  Yes  No



115.42(c)

- When deciding whether to assign a transgender or intersex offender to a facility for male or female offenders, does the agency consider on a case-by-case basis whether a placement would ensure the offender's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns offenders 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 offenders, does the agency consider on a case-by-case basis whether a placement would ensure the offender'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 offender reassessed at least twice each year to review any threats to safety experienced by the offender?  Yes  No

115.42(e)

- Are each transgender or intersex offender'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 offenders given the opportunity to shower separately from other offenders?  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

offenders, does the agency always refrain from placing: lesbian, gay, and bisexual offenders 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 offenders, does the agency always refrain from placing: transgender offenders 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 offenders, does the agency always refrain from placing: intersex offenders 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*)

Once an offender is determined as a PREA Blue HRSV and/or PREA Red HRSP at any time during incarceration, the offender is evaluated by the Classification Board for appropriate housing and programs and referred to a mental health professional. The mental health professional meets with the offender upon receipt of the referral to offer services and encourage programming.

The screening information is used as follows to keep separate those offenders at high risk of being sexually victimized from those at high risk of being sexually abusive:

- Housing assignments;
- Bed assignments;
- Work assignments;
- Education assignments; and
- Program assignments.

Individualized determinations are made to ensure the safety of each offender by the Reception and Diagnostic Centers, which determine placement in a La DPS&C facility. Once at Bayou Dorcheat CC, the facility does not place lesbian, gay, bisexual offenders on a tier solely on the basis of such identification or status and the auditor found them located across the entire housing spectrum.

Transgender offenders are given an opportunity to shower separately from other offenders by completing a Shower Preference Statement, but few choose this option as showers are relatively private anyway.

Staff interviewed indicated that the PCM is notified at intake or by any staff member at any time who identifies an offender as a PREA Blue HRSV and/or PREA Red HRSP. She ensures that this information is entered into the offender's Annual Assessment and Master Record for monitoring purposes.

Offenders who report that they have been victimized by sexual abuse in any previous prison are in the DOC sex offender program and are receiving mental health evaluations as well as support and a treatment plan.

### Standard 115.43: Protective Custody

#### 115.43(a)

- Does the facility always refrain from placing offenders 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 offender in involuntary segregated housing for less than 24 hours while completing the assessment?  Yes  No

#### 115.43(b)

- Do offenders 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 offenders 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 offenders 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 offenders 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 offenders 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 offender'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 offender 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*)

There has been zero use of protective segregation in the past 12 months according to the PAQ and interviews with the PCM and Warden. Offenders who report they are a victim of sexual abuse are placed in restrictive housing on a different tier than the accused perpetrator, this being the only reasonable alternative available other than a transfer of one of the offenders. Segregated housing for the victim is only used as a means to protect the offender from the aggressor.

Generally, the offender is held in restricted housing only until the investigation is completed and a determination made regarding the allegation.

An offender placed in segregation because of a high risk of sexual victimization is required to have access to programs, privileges, education and work opportunities commensurate to offenders in the general population. Documentation is maintained indicating which opportunities were limited, the duration of the limitations and the reasons for the limitations.

Placement in involuntary segregation and disciplinary segregation is reviewed after the first seven days and every 30 days thereafter.

Offenders at high risk for sexual victimization are not placed in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there are no available alternative means of separation from likely abusers. If the facility restricts access to programs, privileges, education or work opportunities, the facility documents this information. If the facility cannot conduct an assessment immediately, they may hold the offender in involuntary segregated housing for less than 24 hours while completing the assessment.

## REPORTING

### Standard 115.51 Offender Reporting

#### 115.51 (a)

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

#### 115.51b)

- Does the agency also provide at least one way for offenders 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 offender reports of sexual abuse and sexual harassment to agency officials?  Yes  No
- Does that private entity or office allow the offender to remain anonymous upon request?  
 Yes  No
- Are offenders 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

#### 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

115.51d)

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

Offenders at Bayou Dorcheat Correctional Center may report sexual abuse and sexual harassment, retaliation by other offender or staff, and staff neglect that may have contributed to an incident through the mail, regular mail, filing a grievance, or by calling the Advocacy group Project Celebration.

Offenders receive various information on PREA issues, prevention, self-protection and reporting specifying examples of ways to report, including:

- Any staff member, contractor, or volunteer
- Family Member
- Friend or another trusted source
- Calling the Local PREA hotline
- Outside agencies or advocacy groups
- By submitting a grievance
- Calling the National PREA Sexual Assault Hotline
- By submitting a request form and/or "KITE

Offenders may verbally, in writing, or anonymously report sexual abuse and sexual harassment. Staff who are notified by an offender of sexual abuse and/or sexual

harassment will follow directions provided on the back of their identification cards, which include first responder steps as well as completing an Unusual Occurrence Report detailing the incident.

Staff in random interviews were aware in every case that they are required to report sexual abuse and sexual harassment and may do so anonymously. All staff indicated they would not need to remain anonymous and would simply use their chain of command.

Multiple interviews reported that offenders in Block E, who could be disciplinary or merely new, had no access to phone privileges at all, only to mail. The facility reports that, as of January 10, 2020, this unit has mail access to the outside community. Since phone access is still denied, it becomes essential that offenders have access to addresses of agencies they can contact and this information has to be provided either by posters or inside the handbook that is issued and retained by every segregated offender. Additionally, by eliminating telephone access, the facility has apparently removed Crime Stoppers as a reporting resource but it is noticed that the Sheriff has assigned a criminal investigator to the facility to deal with offender issues that arise and any offender can contact this investigator to file an allegation. Additionally, all deputies are aware that if an offender in segregation requests to make a call about a PREA incident that they are to be escorted to Booking and allowed to make the call. They are able to call Crime Stoppers, LaFASA, or any other means necessary to make a claim; it just is not confidential.

## Standard 115.52: Exhaustion of Administrative Remedies

### 115.52(a)

- Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address offender grievances regarding sexual abuse. This does not mean the agency is exempt simply because an offender 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 offenders 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 offender 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 offender 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 offenders 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 offender 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 offender does not receive a response within the time allotted for reply, including any properly noticed extension, may an offender 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 offenders, staff members, family members, attorneys, and outside advocates, permitted to assist offenders 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 offenders? (If some third-party files such a request on behalf of an offender, 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 remedies process.) (N/A if agency is exempt from this standard.)  Yes  No  NA
- If the offender declines to have the request processed on his or her behalf, does the agency document the offender'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 offender 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 offender 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 offender 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) take 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 offender for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the offender 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*)

Within the past 12 months, there were zero uses of the grievance process for an allegation of sexual abuse and no grievances alleging the danger of imminent sexual abuse during this period. One offender was disciplined this past year for filing a grievance in bad faith.

Offenders may use the Administrative Remedy Procedure (ARP), grievance or any informal method to report sexual abuse and/or sexual harassment. The offender's report does not have to be submitted to the staff member who might be the subject of the complaint. Grievances may also be placed in institution mail. The investigation of the accusation(s) is not referred to a staff member named in the grievance.

A decision on the grievance relating to sexual abuse and/or sexual harassment is required to be made within 90 days of the initial filing of the grievance. The offender is notified in writing of any extension in time that is needed to respond and the approximate date. If a response is not received at any level of the grievance process an offender should consider this as a denial at this level.

Third parties, including fellow offenders, staff members, family members, attorneys, and outside advocates are permitted to assist offenders in filing requests for administrative remedy as it pertains to sexual abuse or sexual harassment. Third-party reporting filed on behalf of the offender requires the offender to agree to proceed as a condition of processing the request. If the offender declines to have the request processed the

offender will complete the ARP Drop Form.

Bayou Dorcheat Correctional Center has in place a procedure for filing emergency grievances alleging an offender is subject to a substantial risk of imminent sexual abuse. The facility provides the offender with a response within 48 hours and final response in 5 calendar days, excluding weekends and holidays. The decision on the grievance determines whether the offender faces a substantial risk of imminent sexual abuse.

The facility documents the actions taken in response to the emergency grievance and the final decision of actions taken.

If determined that an offender filed a grievance with malice, the offender can be disciplined.

BDCC does not require an offender to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse.

#### Standard 115.53: Offender access to outside confidential support services

##### 115.53(a)

- Does the facility provide offenders with access to outside victim advocates for emotional support services related to sexual abuse by giving offenders 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 offenders and these organizations and agencies, in as confidential a manner as possible?  Yes  No

##### 115.53(b)

- Does the facility inform offenders, 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 offenders 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*)

Offenders may request at the time of the allegation to have access to receive outside assistance from victim advocates for emotional support. Those offenders detained for civil immigration receive mailing addresses, telephone numbers and toll-free numbers to national immigration services agencies.

Offenders are placed on notice that all telephone calls are monitored with the exception of properly placed privileged calls between an offender and his attorney.

Bayou Dorcheat CC has an agreement with Project Celebration for external Victim Advocacy, who coordinates some training with LaFASA.

Project Celebration is an agency that is able to provide crisis counseling and reporting avenues. The Project Celebration Sexual Assault Executive Director was interviewed both prior to and following the site visit regarding advocacy issues at Bayou Dorcheat correctional programs and provided a positive assessment of their operation, except for some criticism of the women's physical plant and surroundings. She reported that the PCM is responsive and flexible and coordinate and communicate with her very well, she has had no problems at all with access or cooperation and considers them to be very open in their working together. Interactions she has with offenders are dealt with expeditiously if the offender has agreed the information can be shared with the facility.

According to the interview, virtually all calls received by their agency are related to harassment and that sexual abuse allegations from Bayou Dorcheat have largely disappeared. There have been zero hospital visits for forensics this past year for Bayou Dorcheat. She noted two sensitive incidents of harassment, not physical abuse, that the

facility rectified and dealt with immediately upon their awareness and she thought they did an excellent job. As of April 2019, BDCC has an in-house PREA Investigator, who will follow the terms of this MOU. The agreement between BDCC and Project Celebration includes:

BDCC agrees to:

1. Make involvement of a certified rape crisis advocates a component of the standard response to a report of sexual assault and/or a request for help from a survivor of sexual violence.
2. Any time that an incident or allegation of sexual abuse is discovered or reported within 72 hours of the incident, BDCC will transport the victim of sexual abuse to University Health for a forensic medical examination, and to meet with a rape crisis advocate from Project Celebration, I
3. If the incident occurred more than 72 hours prior to the report, BDCC will ensure that the victim receives a medical evaluation and any needed treatment; a mental health evaluation; and contact information for the sexual assault/rape crisis center.
4. Provide inmates with confidential, 24-hour access to the rape crisis hotline. 5. Ensure that Project Celebration advocates are cleared to enter BDCC for meetings, training sessions, or to meet with clients. Provide for other logistical needs, such as a private meeting space for counseling sessions.
6. PREA Compliance Manager or Director will make direct contact with the crisis center in the event of a sexual assault incident that requires the assistance of a victim advocate.

Project Celebration Agrees to:

1. Respond to requests from BDCC to provide advocacy when inmates are brought to the University Health Center for sexual assault forensic exams.
2. Respond to calls from BDCC inmates received on the rape crisis hotline.
3. Provide follow-up services (ie: emotional support, etc) and crisis intervention contacts to victims of sexual assault at BDCC, as resources allow.

#### Standard 115.54: Third-Party Reporting

115.54 (a)

- Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?  Yes  No

- Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an offender?  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*)

Third parties (which may include other offenders, unit staff, family members, attorneys, and outside advocates) may also assist offenders by making sexual abuse harassment reports, and/or initiating formal grievances.

Bayou Dorcheat Correctional Center has methods in place to receive third-party reports of sexual abuse and sexual harassment. Individuals may call Project Celebration, notify the assigned Sheriff's Department investigator, file a grievance, the PREA Hotline, use institutional mail or use regular mail. Posters and the PREA handbook provide information to access third-party reporting. If utilized, the Advocacy group Project Celebration then contacts the facility Warden.

## OFFICIAL RESPONSE FOLLOWING AN INMATE REPORT

### Standard 115.61: Staff and agency reporting duties

#### 115.61(a)

- Does the agency require all staff to report immediately and according to agency 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 offenders 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 offenders 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*)

Staff is required to report immediately any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment, retaliation, or staff neglect or violation of responsibilities that may have contributed to an incident of sexual harassment or retaliation that occurred in the facility. Apart from reporting to their designated supervisor, staff has been directed to refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in this policy, to make treatment, investigation, and other security and management decisions.

Medical practitioners are required to report sexual abuse as referenced above and the offender is informed of this requirement at the initiation of services and the limitations of confidentiality. LA statute requires that the facility report on behalf of adults which are considered vulnerable under the aforementioned statutes, any allegations to the designated State or local service agency under mandatory reporting laws.

All allegations of sexual abuse and sexual harassment are reported to Investigations, including third-party and anonymous reports.

All allegations of sexual assault, sexual misconduct or sexual harassment by either staff or offender may be reported to any staff member. The staff member who receives such reports, whether verbally or in writing, immediately notify the supervisor who ensures that an Unusual Occurrence Report (UOR) is completed. All PREA related UOR's go immediately up the chain of command.

Any allegation of sexual abuse is reported to WPSO's PREA Coordinator and PREA Investigator

immediately following the initial notification to the Warden. The assigned investigator immediately notifies the Victim Advocate (but no later than the next business day), that an alleged sexual abuse has occurred.

#### 115.62 (a)

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

Immediate steps are taken when the facility learns that an offender might be subject to a substantial risk of imminent sexual abuse. PREA time limits of 48 hours for initial response and 5 days for resolution are observed in this process and, in actuality, the initial response is virtually immediate.

When staff learns that an offender is subject to a substantial risk of imminent sexual abuse, they are trained to take immediate action to protect the alleged victim and to assume all reports of sexual victimization, regardless of the source of the report (third party, anonymous, verbal, etc.) are credible and respond accordingly. Every staff member interviewed was aware of and reflected this approach.

#### Standard 115.63: Reporting to other confinement facilities

##### 115.63(a)

- Upon receiving an allegation that an offender 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*)

The facility has received no allegations of sexual abuse at Bayou Dorcheat from another facility. The data and subsequent investigation referrals were reviewed during the file review. Allegations received from other confinement facilities that an offender was sexually abused while confined at Bayou Dorcheat are reported directly to the Chief and the Warden and the Warden ensured that allegations were thoroughly investigated in the same manner as are all allegations.

Upon receiving an allegation from an offender that he was sexually abused while confined at another facility, the Warden stated in his interview that he notifies their executive in writing. An email is usually sent from the Bayou Dorcheat warden to the other warden, or from investigator to investigator of the facility where the alleged abuse occurred. Notification is provided as soon as possible, but no later than 72 hours after receiving the allegation and documentation is placed in the offender's Master Record. Documentation of the notification is also logged in the case logbook. One notification to another facility received no response and was reported to DOC.

Immediate steps are taken when it appears that an offender might be subject to a substantial risk of imminent sexual abuse. PREA time limits of 48 hours for initial response and 5 days for resolution are observed in the process.

#### Standard 115.64: Staff first responder duties

##### 115.64 (a)

- Upon learning of an allegation that an offender 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 offender 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 offender 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 offender 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*)

There were 20 allegations in the past year that an offender was sexually abused and the responding staff member (a security first responder in every case) had to separate the alleged victim and abuser in every case. There were 0 cases that were reported in enough time for collecting physical evidence and the required first responder steps were followed in each case.

All staff interviewed, including non-uniformed facility staff, were well familiar with proper steps and procedures for initial responses to an incident.

The first staff member receiving the report/allegation and/or the appropriate supervisor advises the victim not to shower or otherwise hygienically clean; or, if the assault was oral, not to eat, drink, or brush their teeth or otherwise take any action that could damage

or destroy physical evidence pending completion of the gathering of that evidence and/or the initial investigation. Almost every staff member reported this step.

First responders secure the alleged crime scene if feasible and if forensic evidence may exist. The only persons allowed to enter a secured crime scene are the assigned investigator(s), Medical staff and/or the Warden, as needed. The crime scene remains secured until released by the investigator.

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.

Louisiana law requires all biological evidence collected in cases involving homicide and rape to be held in secure custody indefinitely or turned over to the local Sheriff's Office if they are handling the criminal investigation.

The alleged victim would be promptly escorted under appropriate security to the infirmary for assessment. When released from the infirmary or emergency room, the alleged victim is to be segregated from the alleged aggressor and screened by a mental health professional with appropriate referrals made.

The credibility of an alleged victim, suspect or witness is assessed on an individual basis and not be determined by the person's status as detainee or staff.

Alleged aggressors who are offenders are held in segregation pending investigation and remain there until the investigation is complete unless other circumstances require the transfer of the alleged aggressor. The offender accused of predatory behavior is always evaluated by mental health staff prior to the disciplinary hearing of the violation.

In every case where the alleged aggressor is a staff member, there is no contact between the alleged aggressor and the alleged offender/victim without the approval of the Warden.

#### Standard 115.65: Coordinated response

##### 115.65 (a)

- Has the facility developed a written institutional plan to coordinate actions among staff first responders, Medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of

sexual abuse?  Yes  No

#### Auditor Overall Compliance Determination

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

Each supervisor and senior staff member interviewed was aware of the steps required by the various parties following any incident and most line staff were aware of just their own requirements and some of the requirements of their supervisors; some struggled to relate the required information and steps.

#### Actions Required After Report of Sexual Abuse

- When staff learns that an offender is subject to a substantial risk of imminent sexual abuse, take immediate action to protect the alleged victim. Staff report and respond to all allegations of sexually abusive behavior and sexual harassment. Assume all reports of sexual victimization, regardless of the source of the report (third party, anonymous, verbal, etc.) are credible and respond accordingly.
- Only designated employees specified by policy should be informed of the incident, as it is important to respect the victim's security, identity, and privacy.
- All allegations of sexual abuse are to be handled in a confidential manner throughout the investigation.
- All conversations and contact with the victim should be sensitive, supportive, and non-judgmental.

#### Evidence Protocol

If the abuse occurred within 72 hours, law enforcement procedures will be followed to enable evidence collection.

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

##### 115.66 (a)

- Are both the agency and any other governmental entities responsible for

collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with any offenders 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*)

Interviews with the WPSO PREA Coordinator and Warden support that Bayou Dorcheat CC and WPSO have no contracts or agreements that would limit their ability to remove the alleged staff sexual abuser from contact with any offender pending the outcome of the investigation or of a determination of whether and to what extent any staff discipline is warranted.

#### Standard 115.67: Agency protection against retaliation

##### 115.67(a)

- Has the agency established a policy to protect all offenders and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other offenders 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 offender victims or abusers, removal of alleged staff or offender abusers from contact with victims, and emotional support services for offenders 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 offenders 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 offenders who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by offenders 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 offender 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 offender 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 offender 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 offenders, 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*)

Retaliation is prohibited in WPSO. If detected or alleged, the appropriate supervisor is directed to immediately contact the facility investigative section. Staff is trained to also report any claims of retaliation against offenders and other staff for reporting abuse, as well as any staff neglect or violation of responsibility that may have contributed to an incident or retaliation. The PCM is responsible for collaborating with the Investigator to monitor retaliation. Interview of the Assistant Warden indicates a system of informal checks and maintaining sensitivity to housing changes, disciplinary reports, job changes, etc. She indicated she maintains contact even in cases determined to be unfounded. Further, both the investigator interview and the PCM interview indicated that the 90 days

was a guideline and had been continued past that level when it appeared advisable.

There are multiple protection measures in place for offenders or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with an investigation. Except in instances where the investigation determines that a report of sexual abuse is unfounded, the facility does the following for at least 90 days following a report of sexual abuse:

Monitor the conduct and treatment of offender or staff who report sexual abuse to see if there are changes that may suggest possible retaliation by other offenders or staff;

- Monitor the conduct and treatment of offenders who suffered sexual abuse to see if there are changes that may suggest possible retaliation by other offenders or staff;
- Act promptly to remedy any retaliation;
- Monitor offender disciplinary reports;
- Monitor offender housing changes;
- Monitor offender program changes;
- Monitor negative performance review of staff;
- Monitor reassignments of staff;
- Continue monitoring beyond 90 days if the initial monitoring indicates a continuing need.

Offenders receive a periodic status check for at least 90 days following a report of sexual abuse; the facility investigator monitors the conduct and treatment of offenders or staff who reported the sexual abuse and offenders who were reported to have suffered sexual abuse. If any changes suggest retaliation, the investigator discusses them with the PREA Compliance Manager and Deputy Warden in order to act promptly to remedy any such retaliation. Items monitored include offender disciplinary reports, housing or program changes, or negative performance reviews or reassignments of staff.

Such monitoring continues beyond 90 days if the initial monitoring period indicates a continuing need. The reason is documented on the PREA Agency Protection against Retaliation for Offenders/Staff Form. If an offender who is being monitored for retaliation is transferred, the PREA Compliance Manager at the sending facility follows up with the receiving facility to ensure continuity of retaliation monitoring.

Standard 115.68: Post-allegation protective custody

#### 115.68(a)

- Is any and all use of segregated housing to protect an offender 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*)

According to interviews with supervisors and the Investigator and PCM, and a review of random offender files, no offenders were held in involuntary protective custody for assessment during the past 12 months and all required standards/protocols are in existing policy if it occurs. Two staff interviewed related using PC in a couple of rare cases and this does not appear consistent with policy; however, the largest majority of information received does not support that this use occurred.

## INVESTIGATIONS

### Standard 115.71: Criminal and administrative agency investigations

#### 115.71 (a)

- When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? [N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).]  Yes  No  NA
- Does the agency conduct such investigations for all allegations, including third party and anonymous reports? [N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).]  Yes  No  NA

#### 115.71(b)

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

#### 115.71 (c)

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

#### 115.71(d)

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

#### 115.71(e)

- Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as offender or staff?  
 Yes  No
- Does the agency investigate allegations of sexual abuse without requiring an offender 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*)

The BDCC Investigator oversees all investigations and works in conjunction with the Warden, and PCM. The PCM also tracks SAFE/SANE evaluations and enters required data into the annual State report on investigations. He has received training in regard to investigating sexual abuse in a confinement setting, to include evidence collection and crime scene preservation

All PREA investigations start out at the facility level and referred for further investigation as deemed necessary based on the type of incident and the reasonable suspicion or potential that the incident involved legitimate criminal activity. All facility investigations are conducted by a Louisiana Certified Law Enforcement Investigator who has received training on how to handle criminal investigations. Once the deputies identify that a sexual assault may have been committed, they secure the scene and wait for the criminal investigator to show up and take over the incident. All allegations of sexual abuse/assault or sexual harassment are investigated and are referred administratively or for criminal prosecution. Staff is aware of the procedures required for an immediate first responder as well as those necessary to secure a crime scene following an allegation.

Prompt attention is given to providing objective and thorough investigations pertaining to sexual abuse and/or sexual harassment that are conducted regardless of how they are reported. When sexual abuse is alleged, The BDCC investigator has received special training in sexual assault and sexual misconduct investigations; crime scene management; elimination of contamination; evidence collection protocol; and crisis intervention.

Investigations include the collection of and preservation of direct and circumstantial evidence as well as interviews with the victim(s), the suspected perpetrator(s) and any witnesses. Investigators also check for prior reports or complaints that may have been filed against the suspected perpetrator. Per the investigator's interview, he is trained to be objective and consider the facts of the allegation(s) and not weigh the individuals' status as an offender or as an employee. Offender victims are not subjected to a polygraph examination as a condition of preceding with an investigation.

Investigations (both criminal and administrative) review all details including what staff actions or inactions may have led to the sexual abuse and/or sexual harassment and these later receive Sexual Assault Incident Reviews per WPSO policy.

Substantiated allegations of sexual abuse are referred for criminal prosecution. Investigative reports of unsubstantiated or unfounded claims are maintained in accordance with the Records Management Program, which requires that reports from the active year plus 6 years be archived.

In an investigation of recent sexual assault or sexual misconduct occurring within 72 hours, steps that policy and interviews indicate would be taken by the Warden or designee include the referral for forensic examination and detailed preservation and study of the scene. The Warden reports he is always notified, and an investigation initiated as directed. Based upon the initial inquiry and/or evidence that the allegation represents possible criminal activity, the Warden notifies local law enforcement and the facility investigative section. At the initiation of the investigation, the alleged victim(s) and alleged aggressor(s) are immediately separated if not already done. The Warden or PREA Compliance Manager coordinates with the assigned investigator in decisions regarding the housing and management of the alleged offender/victim(s), alleged offenders and any alleged offender/witness(es) so as not to inadvertently interfere with the criminal investigation.

Investigations of sexual abuse occurring more than 72 hours after the incident is relatively similar, except that a determination is made based upon the amount of time that has passed since the alleged incident as to whether the alleged offender aggressor should be placed in a dry cell to preserve forensic evidence. This scenario actually happened during the first day of the audit. The offender reported an alleged abuse that he said occurred several days prior to reporting it. He was then seen by medical and mental health and investigators were sent out to conduct the criminal investigation.

Substantiated allegations are forwarded to the local prosecutor for a decision regarding prosecution, and the PREA Investigator works with the District Attorney's Office to ensure appropriate criminal prosecution of substantiated cases of sexual assault. Cases sent for criminal prosecution are maintained as long as the alleged abuser is incarcerated or the employee is still employed, plus five years. The release of the accused abuser (offender or staff) does not constitute grounds for termination of an investigation.

#### Standard 115.72: Evidentiary standard for administrative investigations

##### 115.72 (a)

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

##### Auditor Overall Compliance Determination

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

- Does Not Meet Standard (*Requires Corrective Action*)

Per policy and interviews with the investigator, Warden and PCM, neither WPSO nor the BDCC Investigator or other staff impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.

#### Standard 115.73: Reporting to offenders

##### 115.73(a)

- Following an investigation into an offender's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the offender 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 offender'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 offender? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)  Yes  No  Yes  NA

##### 115.73(c)

- Following an offender'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 offender's unit?  Yes  No
- Following an offender'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 offender'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 offender'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 offender's allegation that he or she has been sexually abused by another offender, 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 offender's allegation that he or she has been sexually abused by another offender, 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*)

WPSO policy is that offenders shall be notified of the outcome of investigations into allegations made by the offender that he suffered sexual abuse. Following the conclusion of an investigation into an offender's allegation that the offender suffered sexual abuse, the investigator interviewed stated that he informs the offender as to whether the allegation was determined to be substantiated, unsubstantiated or unfounded. If the facility did not conduct the investigation, it would request the relevant information from the investigative entity in order to inform the offender of the investigative findings but all investigations this past year were done by the assigned investigator.

Reporting is done by the Investigator and PCM and offenders sign receipt documenting the delivery of the information.

Following an offender's allegation that an employee has committed sexual abuse against him unless it has been determined that the allegation is unfounded or unless the offender has been released from custody, the offender is informed of the following:

- The employee is no longer posted within the offender's housing unit;
- The employee is no longer employed;
- The facility learns of the employee's indictment on charges related to sexual abuse;
- The facility learns of the employee's conviction on charges related to sexual abuse.

Following an offender's allegation that an offender has committed sexual abuse against him, he is notified of the following:

- The alleged abuser has been indicted on a charge related to sexual abuse;
- The alleged abuser has been convicted of a charge related to sexual abuse.
- These notifications are documented in the case report.

The investigator indicated that all notifications use the Notification of Outcome of PREA Allegation form for substantiating delivery of the notice and that outcomes of all 20 allegations in the past year were delivered in this manner.

## DISCIPLINE

Standard 115.76: Disciplinary sanctions for staff

115.76 (a)

- Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment 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*)

In the past 12 months, no staff were charged with or disciplined for violating agency policy regarding sexual abuse. One contractor was reported to law enforcement for investigation

regarding sexual abuse allegations.

All employees are subject to disciplinary sanctions up to and including termination for violating Department Regulations regarding the Prison Rape Elimination Act and regarding Sexual Harassment and Unlawful Discrimination based Upon Sex. Termination is the presumptive disciplinary sanction for an employee who engages in sexual abuse.

The seriousness of the conduct is considered in determining the appropriate response according to the interview with the Warden. Regarding sexual harassment, repeated for the purpose of counseling sessions is more than three complaints. A third alleged sexual harassment complaint against a staff member requires a formal counseling session with the appropriate supervisor to discuss the complaint. Serious sexual harassment complaints, even if committed once, is still addressed by the Warden or leadership designee.

Alleged inappropriate touching of a romantic nature by staff, whether wanted or unwanted, are evaluated on a case by case basis to determine if the incident is a violation of PREA. Disciplinary sanctions are commensurate with the nature and circumstances of the acts committed, the employees' disciplinary history, and the sanctions imposed for comparable offenses.

Substantiated cases of sexual abuse and/or sexual harassment are reported to local law enforcement regardless of whether the employee is terminated or resigns to avoid termination. Those employees with licensure are reported to the appropriate licensing boards.

#### Standard 115.78: Corrective action for contractors and volunteers

##### 115.77(a)

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

Contractors and volunteers who engage in sexual abuse are prohibited from having contact with offenders and banned from the institution indefinitely. Violations of this policy by contractors and volunteers are reported to law enforcement and the respective licensing board. There was one referral this past year of a volunteer or contractor to law enforcement authorities.

#### Standard 115.78: Disciplinary sanctions for offenders

##### 115.78 (a)

- Following an administrative finding that an offender engaged in offender-on-offender sexual abuse, or following a criminal finding of guilt for offender-on-offender sexual abuse, are offenders 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 offender's disciplinary history, and the sanctions imposed for comparable offenses by other offenders 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 offender'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 offender 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 offender 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 offenders to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between offenders.)  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*)

There were no findings of offender-on-offender sexual abuse in the past 12 months.

Offenders found guilty pursuant to a formal disciplinary of engaging in offender-on-offender sexual abuse are written-up on a rule violation as enumerated in Disciplinary Rules and Procedures for Adult Offenders. All sexual contact between offenders is prohibited and violators will be charged with the appropriate rule violation. Sanctions are commensurate with the nature and circumstances of the abuse committed and include the offender's disciplinary history and comparable offenses by other offenders.

Offenders are disciplined for violations of rules for engaging in sexual conduct with an employee. Offenders and staff are informed that there is no consenting to sexual activity in the Department of Corrections between an employee and offender.

The PCM and Warden interviews indicated that the disciplinary process takes into consideration the mental faculties of the offender who perpetrated the act when determining the sanctions. In these cases, a referral to mental health is made and the report deferred until the completion of the mental health evaluation. Reports of sexual abuse and/or sexual harassment made in good faith and based on a reasonable belief that the alleged conduct occurred is not false reporting or considered lying. Decisions are based on the preponderance of the evidence.

## MEDICAL AND MENTAL CARE

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

#### 115.81(a)

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

#### 115.81(b)

- If the screening pursuant to § 115.41 indicates that a prison offender has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the offender 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 offender has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the offender 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 offenders before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the offender 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*)

If offenders claim to have been a victim of sexual assault/abuse in the past, they meet with the PCM and have a form they sign within 14 days to either request or decline counseling. The nurse would set up the appointment with either personnel at Ochsner or Minden Behavioral Health Clinic at her discretion. However, it is noted that the actual referral and provision of such services are required and not discretionary.



Mental health interns from Southern University come into the facility and meet with offenders one to one and also teach coping skills.

At the male Correctional Center, the state DOC male offenders receive some mental health treatment, as well as substance abuse programs, but the DOC women receive nothing similar although there are between 35-40 DOC female offenders confined at the Courthouse facility.

It is noted that significant numbers of females have substance abuse issues and there would appear to be adequate DOC numbers for group work similar to what the men receive. Interviews with these mental health staff indicated a female group would potentially be possible if 6-15 offenders qualified. At the time of the audit, about 38 females were in the facility and, given the high proportion of substance abuse issues among female offenders, that program appears feasible but that is a DOC decision.

The PREA Coordinators reports that an initial substance abuse assessment of the women was completed and staff is pursuing options related to transport of females to the larger facility for treatment and classes.

Project Celebration has just begun conducting weekly support groups for victims of sexual abuse and domestic violence since the onsite review and this will be a significant resource to this underserved population.

If the PREA screening indicates that an offender has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, or that an offender perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, there is no mental health staff to ensure that the offender is offered a follow-up meeting with a Medical or mental health practitioner within 14 days of the intake screening. The PCM reports that Project Celebration advocacy staff has agreed to assist in meeting the 14-day requirement.

Any information related to sexual victimization or abusiveness that occurred in an institutional setting is limited to treatment staff (and others only as necessary) in order to develop 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. The Medical practitioner stated they obtain informed consent from offenders before reporting information regarding prior sexual victimization that did not occur in an institutional setting unless the offender is under the age of 18.

Standard 115.82: Access to Emergency medical and mental health services

115.82(a)

- Do offender 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 offender 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*)

The policy is that offenders receive timely, unimpeded access to emergency medical treatment and crisis intervention services in accordance with the professional judgment rendered by medical practitioners. Staff interviewed supports that crisis intervention is rare for mental health issues, and also that medical response is often slow. BDCC has

added to their medical staff and the nurse now has two assistants to allow them to more quickly provide services and respond to the offenders in need of medical help.

All PREA incident cards (carried by every staff member) list the preliminary steps to protect the offender-victim and include the immediate notification of Medical and mental health staff.

Victims of sexual abuse or sexual harassment are not often evaluated and treated, and also receive follow-up services that include treatment plans and referrals upon discharge.

Bayou Dorcheat CC offers all victims of sexual abuse forensic Medical examinations at an outside facility, without financial cost to the victim, when evidentiary or medically appropriate at Ochsner-LSU Health. Such examinations are performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) when possible. If SAFEs or SANEs cannot be made available, the examination is performed by other qualified medical practitioners. Testing for sexually transmitted diseases and other diseases as determined by the attending physician and counseling are made available to the alleged victim when appropriate. There has not been a case that has required a sexual assault forensic exam or testing for sexually transmitted diseases. In the event an actual physical sexual assault occurs, the offender would be immediately taken to LSU for these things. Also, a victim advocate from Project Celebration would be there with the offender. BDCC has not had a referral to mental health due to a substantiated PREA case or sexual assault that occurred at BDCC or WPJ.

Mental health evaluations are conducted by DOC counselors. If further counseling is required, we would set up an appointment with Minden Mental Health or LSU.

Referral to Mental Health does not often occur. It is unclear what mental health support is available after an incident occurs or how the medical nurse determines who might be referred for evaluation or treatment.

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

##### 115.83(a)

- Does the facility offer Medical and mental health evaluation and, as appropriate, treatment to all offenders 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 offender 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 offender 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 offender-on-offender 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*)

Offenders who have been victimized by sexual abuse in any previous prison, jail, lock-up or juvenile facility are not always offered medical and mental health evaluations as required and appropriate and they meet with the PCM within 14 days of arrival to determine whether they elect to receive treatment. Bayou Dorcheat CC frequently offers a sex offender- related program targeted to such offenders that is offered by mental health staff at the facility..

Victims of sexual abuse are offered tests for sexually transmitted infections as appropriate. These services are at no cost to the victim regardless of whether the victim names the abuser or cooperates with any investigation.

## DATA COLLECTION AND REVIEW

### Standard 115.86: Sexual abuse incident reviews

#### 115.86(a)

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

#### 115.86(b)

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

115.86(c)

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

115.86(d)

- Does the review team: Consider whether the allegation or investigation indicates a need to change 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*)

The facility staff conducts a Sexual Abuse Incident Review within 30 days of the conclusion of every sexual abuse investigation unless the allegation is determined to be unfounded. The review team includes upper management officials, with input from line supervisors, investigators, and, medical providers. The review team prepares a Sexual Abuse Incident Review Form that follows the elements of the Standard. The completed form is maintained by the PREA Compliance Manager.

The review the auditor interviewed all agreed that the review considers the following:

- A need to change policy or practice to better prevent, detect, or respond to sexual abuse;
- Was the abuse motivated by race, ethnicity, gender identity, lesbian, gay, bisexual, transgender, or intersex identification status or the perceived status;
- An examination of the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse;
- Adequacy of staffing levels in the area;
- Considers whether monitoring technology should be deployed are augmented;
- A report of the findings is submitted to the Warden.

There were 20 administrative investigations of alleged sexual abuse in the last 12 months, 18 have been completed and 17 were followed by an incident review within 30 days and one was delayed for further information.

## Standard 115.87: Data Collection

### 115.87(a)

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

### 115.87 (b)

- Does the agency aggregate the incident-based sexual abuse data at least annually?

Yes  No

115.87(c)

- Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?  Yes  No

115.87(d)

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

115.87(e)

- Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its offenders? (N/A if agency does not contract for the confinement of its offenders.)  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*)

WPSO collects and tracks uniform data of sexual abuse at facilities. This incident-based data instrument includes all the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice's Bureau of Justice Statistics.

WPSO Procedures for Reporting to the United States Department of Justice:



- WPSO's PREA Investigator and PCM prepare the annual Survey of Sexual Victimization (SSV Report) containing required statistics for WPSO owned and operated facilities. These forms are submitted by the PREA Investigator and PCM to the United States Department of Justice by September 1<sup>st</sup> of each year for the statistics accumulated in the prior calendar year. The Warden submits copies of both SSV reports to the Sheriff's Office.
- The aggregate numbers of the SSV reports' statistics are to be posted on WPSO's website by October 1<sup>st</sup> of each year.
- The Department maintains sexual abuse data collected pursuant to La. R.S. 115.87 for at least 10 years after the date of initial collection.

#### Standard 115.88: Data review for corrective action

##### 115.88(a)

- Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response 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*)

Reviews of all data collected are used to assess and improve the effectiveness of sexual abuse prevention, detection, and response policies, practices, and training, including identifying problem areas in WPSO. Bayou Dorcheat CC's annual report contains statistics for the fiscal reporting year and can be compared to the previous year data.

Investigations (both criminal and administrative) review all details, including what staff actions or inactions may have led to the sexual abuse and/or sexual harassment, and these are reviewed at each successive level per WPSO policy. Investigative reports are compiled in accordance with WPSO's Standardized Case Report Format, which includes descriptions of physical and testimonial evidence as well as the reasoning behind credibility assessments and findings.

The Warden and PCM stated that the Warden approves the Annual Reports and submits them to the Sheriff's Office (WPSO). Review of this data is accomplished at each level for analysis, determining trends or needs, etc.

For annual reporting purposes redaction is not needed as it (the report) only contains statistical data and does not refer to any individual(s).

## Standard 115.89: Data Storage, publication, and destruction

### 115.89 (a)

- Does the agency ensure that data collected pursuant to § 115.87 are securely retained?  
 Yes  No

### 115.89(b)

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

### 115.89(c)

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

### 115.89(d)

- Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?  Yes  No

### Auditor Overall Compliance Determination

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

WPSO's PREA Coordinator makes an annual report regarding all sexual abuse data from WPSO facilities available to the public through WPSO's website, [www.WPSO.net](http://www.WPSO.net). The report consists of numbers only and does not include personal identifiers or specific institutions. Bayou Dorcheat Correctional Center provides its data to the PREA

Coordinator. All reports are also available through a public records request.

All data is securely preserved and retained in accordance with the procedures outlined in 115.87. In accordance with Department Regulations regarding the Records Management Program, Investigative Reports are retained as Active plus six years.

Investigations (both criminal and administrative) review all details including what staff actions or inactions may have led to the sexual abuse and/or sexual harassment, and these are later reviewed for potential changes to policy or operations. Investigative reports are compiled in accordance with WPSO Standardized Case Report Format, which includes descriptions of the physical evidence and testimonial evidence as well as the reasoning behind credibility assessments and facts and findings.

Cases sent for criminal prosecution are maintained as long as the alleged abuser is incarcerated or the employee is still employed, plus five years. The release of the accused abuser (offender or staff) does not constitute grounds for termination of the investigation.

The PREA Coordinator and investigator report that unsubstantiated or unfounded claims are maintained in accordance with the Department Records Management Program, which requires the active year plus 6 years to be archived.

## AUDITING AND CORRECTIVE ACTION

### Standard 115.401: Frequency and scope of audits

#### 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 offenders, residents, and detainees?  Yes  No

115.401(n)

- Were offenders 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 Warden, PREA Compliance manager and staff were extremely supportive and made all efforts to ensure full access and ease of audit operation for the auditor, both before and after the site visit and during the time at the

Standard 115.403: Audit contents and findings

## 115.403 (f)

- The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports 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*)

There is no prior reporting as this is the initial PREA audit. The LA WPSO PREA Coordinator publishes all required reporting data and makes an annual report regarding all sexual abuse data from WPSO facilities available to the public through WPSO's website: [www.WPSO.net](http://www.WPSO.net)

### 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 offender or staff member, except where the names of administrative personnel are specifically requested in the report template.

William Peck  
Auditor Signature

February 5, 2020  
Date