

PREA AUDIT: AUDITOR'S SUMMARY

REPORT ADULT PRISONS & JAILS



Name of facility: Mabel Bassett Correctional Center			
Physical address: 29501 Kickapoo Rd., McLoud, OK 74851			
Date report submitted: 01/16/2015			
Auditor Information			
Address: American Correctional Association, 206 North Washington St., Suite 200, Alexandria, VA 22314			
Email: mom@kideral.com			
Telephone number: 208-794-1901			
Date of facility visit: December 15-17, 2014			
Facility Information			
Facility mailing address: <i>(if different from above)</i>			
Telephone number: 405-425-2500 <input type="checkbox"/> <input type="checkbox"/>			
The facility is:	<input type="checkbox"/> Military	<input type="checkbox"/> County	<input type="checkbox"/> Federal
	<input type="checkbox"/> Private for profit	Municipal	X State
	<input type="checkbox"/> Private not for profit		
Facility Type:	Jail	X Prison	
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Agency Information			
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Governing authority or parent agency: <i>(if State of Oklahoma Applicable)</i>			
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AUDIT FINDINGS

NARRATIVE:

The Prison Rape Elimination Act (PREA) Audit for the Mabel Bassett Correctional Center from initial notification through this auditor’s Summary Report Adult Prisons and Jails/PREA Audit final report began in November 2014 with the notice that the Oklahoma Department of Corrections through the American Correctional Association (ACA) had scheduled a PREA Audit with a tour date of December 15-17, 2014, of the Mabel Bassett Correctional Center, McLoud, Oklahoma. PREA Certified Auditor Marilyn McAuley was notified by ACA e-mail of her appointment and schedule.

The audit process started with contact from Millicent Newton-Embry, PREA Coordinator, Oklahoma Department of Corrections, Oklahoma City, Oklahoma. Mabel Bassett Correctional Center Deputy Warden-Administration Carla H. King mailed a USB thumb drive to the auditor. The thumb drive contained four essential areas; the daily facility count for twelve months prior to the audit, the check list file for each standard including copies of compliance documents, copy of the ACA Visiting Committee Report (VCR) for the May 5-7, 2014 Standards Compliance Reaccreditation Audit and the PREA Audit: Pre-audit Questionnaire Adult Prisons and Jails. A tremendous amount of material was included in these four folders (facility count sheets folder, standards folder, ACA VCR Report, and ACA questionnaire folder). The daily facility count identified the daily population for the 1st, 10th, and 20th day of the month for the past twelve months. The 43 standards folders (one for each standard) contained substantiated compliance documentation for each of the standards addressing: interviews, health appraisals of the incoming inmates, and treatment of offenders with intersex conditions, gender identity disorder, gender dysphoria, and staff personnel discipline forms. ACA Standards Compliance Reaccreditation Report provided medical and investigative reports. The fourth folder contained the Pre-audit Questionnaire which was a stand-alone folder. The Questionnaire provided a lot of material that was comprehensive, specific, and very helpful to the auditor.

The PREA Resource Audit Instrument used for Adult Prisons and Jails was furnished by the National PREA Resource Center. To summarize, there are seven sections, A through G, comprised of the following: A) Pre-Audit Questionnaire, sent by Oklahoma Department of Corrections; B) the Auditor Compliance Tool; C) Instructions for the PREA Audit Tour; D) the Interview Protocols; E) the Auditor’s Summary Report; F) the Process Map; and G) the Checklist of Documentation.

Following the protocols of making contacts, and checking on the posting of notices (posting was initiated through the American Correctional Association and the facility, Mabel Bassett Correctional Center) the auditor, on her own, began review of the Pre-Audit Questionnaire and the material sent prior to discussion and the audit

visit. Each item on the thumb drive was reviewed. Of particular interest to the auditor was the detailed information in the Pre-Audit Questionnaire completed by the facility PREA Compliance Manager (PCM) and the PREA Compliance Coordinator in December 2014. Also, in this preliminary review, special interest was taken in the compliance documentation provided for each standard. The information from the standards files was used to complete the list of the PREA Compliance Audit Instrument Checklist of Policies/Procedures and other Documents in advance to identify additional information that might be required.

The Oklahoma Department of Corrections contracted with ACA to do the PREA Audit of Mabel Bassett Correctional Center December 15-17, 2014 and Kate Barnard Community Corrections Center December 17-19, 2014. It was decided that management from the two facilities and the auditor would meet Sunday evening, December 14, at an informal dinner in Oklahoma City with Debbie Morton, Acting Warden of Mabel Bassett Correctional Center and Division of Community Corrections Sharon Harrison, District Supervisor of Kate Barnard Community Corrections Center and key staff. Also attending the dinner were Millicent Newton-Embry, Agency PREA Coordinator, Reginald Hines, Division Manager, Lydia McBride, Assistant District Supervisor, Kate Barnard Community Corrections Center (PREA point of contact) Glenroy Hines, Chief of Security, Kate Barnard Community Corrections Center, Carla King, Deputy Warden, Mabel Bassett Correctional Center.

Upon arrival the auditor received a notebook with documentation on Oklahoma Department of Corrections' Participation in the Review Panel on Prison Rape's Supplemental Hearings on Sexual Victimization in Prisons. The hearings evaluated the Mabel Bassett Correctional Center (MBCC), which the Bureau of Justice Statistics (BJS) identified as having a high prevalence of sexual victimization, and the Jackie Brannon Correctional Center (JBCC), which the BJS identified as having a low prevalence of sexual victimization. Reference BJS, Sexual Victimization in Prisons and Jails Reported by Inmates, 2011-2012 (May 2013).

The Panel conducted its supplemental hearings on the morning of Thursday, August 28, 2014 at the U.S. Department of Justice, Office of Justice Programs in Washington, D.C. Sworn testimony was given by Oklahoma Department of Corrections (ODOC) Director Robert Patton, MBCC Warden Rickey Moham, and JBCC Warden Emma Watts. As regards to MBCC, Director Patton was charged with; 1) identify factors that led to the high incidence of sexual victimization at the MBCC during the time of the BJS report; 2) summarize the measures that ODOC and MBCC have taken to reduce the prevalence and incidence of both inmate-on-inmate and staff-on-inmate sexual assault; 3) summarize ODOC's and MBCC's progress in implementing the Prison Rape Elimination Act National Standards 28 C.F.R.pt. 115(2013); 4) describe the measures that the ODOC and MBCC have taken to protect from sexual victimization those inmates who have mental-health problems, are non-heterosexual, or have a history of prior victimization; 5) identify the distinctive needs of the MBCC, as a facility that houses only female inmates, in preventing sexual victimization; 6) describe the process for investigating an incident of inmate-on-inmate or staff sexual misconduct at the MBCC and 7) describe the ODOC's process for providing information to appropriate Oklahoma District Attorneys about the sexual assault of an inmate.

Director Patton testified that (1) sexual assault victims were at one time unable to be completely separated from offender sexual predators as the MBCC is the only medium/maximum security facility for female offenders in Oklahoma. Finding appropriate housing assignments for offenders with mental health needs were challenging and could lead to higher incidences of sexual victimization if the sexual predator was unable to be moved or discharged. Installation of fencing inside the facility to differentiate the two security levels helped alleviate this issue. Another factor of concern for the MBCC was narrowly defining what constituted sexual assault or abusive sexual contact and investigation of every allegation as a PREA incident. The curriculum and lesson plans for educating staff and offenders on the PREA standards were revised to better define what constitutes sexual assault.

According to Director Patton 2) measures taken to reduce the prevalence and incidence of sexual assault is to establish a climate that constantly reinforces the statement that these actions will be the subject of zero tolerance. Every allegation of sexual assault, misconduct and harassment is thoroughly investigated. Rickey Moham, MBCC Warden testified that additional cameras, staffing adjustments and staggered services including meal service are measures taken to reduce the prevalence of assaults. Implementation of the Prison Rape Elimination Act National Standards 3) includes the Department's Operating Policy (OP)-030601, entitled Oklahoma Prison Rape Elimination Act (PREA policy). A comprehensive, mandatory training program is centered on this policy and is provided to all staff. For offenders, an in-depth facility orientation is also conducted within seven days to educate them on ODOC's zero tolerance stance concerning victimization and

sexual assaults along with how and where to report sexual assault. The agency initiated training for county sheriffs, collaboration was initiated with the Oklahoma City YWCA Rape Crisis Forensic Staff and contract language was added to all vendor contracts for housing of offenders in jails, prisons or community settings which addresses compliance with PREA standards. Warden Moham reported MBCC assigned a correctional case manager as the facility PREA Compliance Manager effective April 2014 and MBCC established a PREA hotline for offender use where they are able to pick up any offender phone on the housing unit and directly report a possible assault to qualified staff outside the facility. The auditor was able to confirm this implementation program with staff, contractors and inmate interviews, tour of all buildings and observations of day to day activity and review of ODOC policies, procedures and forms that substantiate compliance with the PREA standards.

Director Patton testified that measures to protect offenders 4) who have mental-health problems, are non-heterosexual, or have a history of prior victimization MBCC screening process identifies an offender's mental-health needs through assessment by mental health staff and mental-health needs, age, history of vulnerability, sexual predator identification and other risk/needs factors identified by staff or communicated by the offender are considered by intake and facility staff when making cell/housing assignments.

Identifying the distinctive needs of MBCC, as a facility that houses only female inmates 5) according to Director Patton includes; increasing the ability to educate offenders addressing healthy relationships; increasing treatment of offenders to address their history of trauma, domestic violence and assault; increasing video capability in the facility; enforcement of immediate consequences and sanctions for offender-on-offender consensual sex acts; and recruiting more gender-specific applicants for correctional officer positions.

The process for investigating an incident of inmate-on-inmate or staff sexual misconduct 6) at MBCC according to the Director includes separating the alleged victim from the alleged suspect while the incident is under investigation, staff conducts preliminary interviews, offenders are immediately provided support by mental health staff, the facility head ensures immediate notification is made to the inspector general, if physical evidence is present, the crime scene is secured and documented by a staff member, offenders also receive support from community rape advocates in the event of a sexual assault exam, and sufficient information results in an agent who has received specialized training assigned to investigate. The auditor confirms this process is as stated by staff and inmate interviews and review of policies and forms. A 2 ½" X 3 ½" card was designed to be placed with their ODOC staff identification that has instructions for Coordinated Response to an Incident of Sexual Abuse marked Confidential and describing First Responder and Supervisory Staff instructions.

The last area describing the ODOC's process for providing information to appropriate Oklahoma District Attorneys about the sexual assault of an inmate 7) according to Director Patton finds if there is a substantiated finding of sexual assault which violates state statute, a copy of the investigation and supporting documentation is forwarded to the appropriate district attorney or United States attorney for possible criminal prosecution.

The auditor stayed in Oklahoma City, Oklahoma and commuted each day to McLoud, Oklahoma with the Department's agency-wide PREA Coordinator. The site visit began at 7:00 a.m. on Monday, December 15 with arrival at the Administration Building. The Auditor and PREA Coordinator entered the front gate with the appropriate security precautions and proceeded to the Administration Building. Warden Moham was out on sick leave. During a brief meeting with the Acting Warden, Warden's Assistant, PREA Coordinator, PREA Compliance Manager, Deputy Warden and the Acting Chief of Security the auditor was given a Welcoming Book titled PREA Compliance Audit Book with an Introduction to the Facility, Offender Manual in English and Spanish, Audit Questionnaire, Oklahoma Prison Rape Elimination Act OP-030601 and various PREA Forms. At this time, a review of the inmate population was made and random inmates were selected from each housing unit for interview by the auditor. Random selection resulted in 20 inmates selected to be interviewed including one non English inmate and two lesbian inmates. Utilizing the PREA Compliance Audit Instrument for PREA Audit Tour the tour started with Sergeant Ellis in Control Unit.

The tour of the Mabel Bassett Correctional Center 15 buildings proceeded as follows: Administration, 1 building, Career Tech, #2, Housing units, 3 multiple occupancy cell units and one open bay/dorm unit, 19

Building (4), Maintenance, # 11, Vocational/Educational, # 6, Laundry, # 9, Food Service #7, Gym, 8 building, Canteen, # 3, Control/Visiting # 5, Medical, # 12, OCI/Citadel, # 13, Outside Maintenance, # 14, Property, # 16, Sally Port, #17, Yard Control, #18, Warehouse, # 20, CERT trailer, #21, and Dog Kennel, #22. During the tour of the facility auditor observed the areas, interviewed administration, program and security staff and inmates and checked for "blind-spots" in all levels of custody.

The tour was completed Monday afternoon, but followed up with revisits Tuesday and Wednesday. The auditor established interviews in a shift briefing room in the administrative complex within Building 1, offices of specialized staff and housing units. Utilizing the PREA Compliance Audit Instrument – Interview Guide for Specialized Staff fifteen (15) staff were interviewed. As per the PREA Compliance Audit Instrument – Interview Guide for a Random Sample of Staff, 20 staff were selected including 10 correctional officers who have contact with adult inmates. Staff interviews were also set up with the selection of random staff from each shift, specialized staff to include intermediate or higher-level facility staff, medical and mental health staff, administrative staff, volunteers and contractors, investigative staff, staff that perform screening for risk of victimization and abusiveness, staff who supervise inmates in segregated housing, incident review team members, intake staff, staff charged with monitoring retaliation, and others designated by the interview protocols. The PREA auditor proceeded with interviews. After the tour staff and inmate interviews began including intake and screening of inmates at the MBARC. This process continued for approximately 3 hours and culminated with the auditor meeting directly with each inmate and reviewing screening materials, intake documents, and inmate file screens as appropriate. This process re-emphasized to the auditor, Mabel Bassett Correctional Center's commitment to PREA law. The auditor left the facility and continued to discuss and review operations with the PREA Coordinator in route until 8:00 p.m. that evening.

The following day, Tuesday, December 16, 2014 the auditor began at 7:30 a.m. with a review of the 43 PREA Standards and the Pre-Audit Questionnaire with the auditor completing the following PREA Audit tools: Auditor Compliance Tool and PREA Compliance Audit Instrument Checklist of Policies/Procedures and other documents provided by the PREA Manager. Assisting the second day was: Millicent Newton-Embry, Agency-Wide PREA Coordinator, Debbie Morton, Acting Warden, Carla King, Deputy Warden-Administration, John Seright, Acting Chief of Security Amandia Callen, Warden's Assistant-Acting Procedures Officer and Nancy Cejka, PREA Compliance Manager-Case Manager. Following these intensive reviews of selected standards and the questionnaire, the auditor again began interviews continuing until about 7:00 p.m. that evening.

While at Mabel Bassett Correctional Center, 35 staff was formally interviewed from scripted questions. The interviews included the Warden, the PREA Compliance Manager, Medical and Mental health, health care staff, intake staff, human resource staff, and other specialized facility staff mentioned in the protocols. Additionally, approximately 20 inmates were formally interviewed including inmates from each housing unit, inmates processing through intake, inmates in segregation, non-English speaking and two lesbians. There were no intersex or transgender inmates listed at Mabel Bassett Correctional Center.

In addition to these formal interviews, many informal discussions were held with staff and inmates who assisted in this PREA compliance audit. The auditor commented on how much information was received in these formal and informal interviews.

Wednesday, starting at the facility at 8:30 when the auditor met with the ACA compliance team to discuss any concerns, problems, issues, or circumstances that, in their view, would relate to the good order, management, and operation of the Mabel Bassett Correctional Center. There were no issues rising to the level of PREA noncompliance. The auditor concluded the interview and tour process. An informal interview was held at noon with the Acting Warden and some of her key staff. The auditor indicated that she would have an interim/final report within 30 days. At this time she would have reviewed her notes and have had discussions with the PREA Compliance Manager and PREA Coordinator and arrive at conclusions on each standard. The auditor noted there were no red flags that had come to the auditor's attention and moreover, she was positively impressed with the Mabel Bassett Correctional Center's commitment to the PREA audit process.

DESCRIPTION OF FACILITY CHARACTERISTICS:

The Mabel Bassett Correctional Center (MBCC), formerly Central Oklahoma Correctional Facility (COCF), was

built in 1998 by Dominion Management Services and operated by Correctional Services Corporation (CSC) as a private prison. The Oklahoma Department of Corrections purchased and moved into the facility in May of 2003. Mabel Bassett Correctional Center sits on 113.6 acres (91.6 outside and 22 acres inside) in McCloud, Oklahoma. This is the largest female facility to house offenders in the State of Oklahoma.

The facility is surrounded by a double 12 foot fence with razor wire on both fences, a fence alarm system and surveillance cameras with pan and tilt capability. An armed patrol officer patrols the perimeter fence 24 hours, seven days a week.

Mabel Bassett Correctional Center houses Death Row, Maximum, Medium, and Minimum security offenders in three multiple occupancy cell housing units and one open bay/dorm housing unit. The Mabel Bassett Assessment and Reception Center (MBARC) opened in January 2008 and is the receiving point for female offenders entering the Department of Corrections system from county jails in Oklahoma's 77 counties. The facility capacity is 1,184 plus 102 MBARC. At the time of the PREA Audit the current population was 1143 plus 23 MBARC.

The facility consists of fifteen buildings including five housing units. Two correctional officers maintain posts in each unit during each shift. One officer will be assigned to the control area of the housing unit and is responsible for log entries, telephone and radio communications, equipment inventories, and the opening and closing of pod and offender doors. The other officer assigned to the unit is responsible for monitoring offender movement and behavior, roving patrol of all pods in the unit, searches, and counts and to assist in the kitchen and outside areas when needed. At intake, offenders receive medical and psychological evaluations, a reading achievement test, and a Level of Service Inventory (LSI) to determine needs and custody level.

Support services include food service, warehouse, kitchen; Education, Vocational, Training, library, Health Services, armory, lock shop, visiting room, laundry, maintenance, Oklahoma Prison Industry, and other support services occupy four buildings.

Mabel Bassett Correctional Center is responsible for agency offender hospital security at the hospital unit located at Oklahoma University (OU) Medical Center in Oklahoma City. The hospital security unit is staffed and supervised by Mabel Bassett Correctional Center and provides security for all agency male and female offenders requiring hospitalization. This unit consists of security of a Department of Corrections secure medical care ward located on the 6th floor of the OU Medical Center as well as a secure holding cell area for offenders awaiting physician appointments, also located on the hospital complex.

Inmate housing and security in this facility is of particular importance. There are essentially five living units. The units consist of D, C-1, C-2, C-3, and Segregated Housing Unit. The facility is divided equally into two sections, one half of the facility is considered Minimum security and the other half is considered Medium to Maximum security. Housing unit D is a Minimum security and units C-1, C-2 and C-3 are Medium security. Unit C-2 holds the Assessment and Reception Maximum security pod. This mix of housing on the compound offers a variety of levels for supervision and security using everything from dorm to single cells to appropriately manage the population. The auditor visited each housing unit to get an understanding of the operation, management and safety of the facility.

The following is presented in the Welcome Book extended to the auditor. The mission of the Oklahoma Department of Corrections is "To Protect the Public, Protect the Employees, and Protect the Offenders." The mission of the Mabel Bassett Correctional Center is "to provide custody and control for maximum, medium, and minimum security female offenders including offenders on death row and administrative segregation and offenders with chronic medical and mental health needs and serve as the Assessment and Reception Center for all female offenders sentenced in all 77 Oklahoma counties. The facility will protect the public by reducing the risk of re-incarceration of female offenders by providing gender-responsive programming; education, vocational training, and work skill development; and evidence-based reentry services."

Facility demographics.

Rated capacity: 1184 + 102 MBARC

Actual capacity: 1143 + 23 MBARC

Age range of population: 18 – 76

Security: Minimum/Medium/Maximum

Number of full-time staff: 149; (49) Administrative, (5) Support, (12) Program, and (78) Security

SUMMARY OF AUDIT FINDINGS:

Number of standards exceeded: 1

Number of standards met: 41

Number of standards not met: 0

Number of standards non-applicable: 1

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

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

The Oklahoma Department of Corrections established an Oklahoma Prison Rape Elimination Act with

OP-030601 in November 2014. It is the policy of the Oklahoma Department of Corrections (DOC) to provide a safe humane and secure environment for all offenders. The agency supports and administers a program of education, prevention, detection, response, investigation and tracking of all reported acts of sexual assault and harassment. Punishment for the perpetrator is enforced. This plan requires DOC maintain a zero tolerance for offender-on-offender sexual assault, staff sexual misconduct and sexual harassment toward offenders. Every allegation of sexual assault, misconduct and harassment is thoroughly investigated. PREA posters will be displayed throughout each facility and will be visible to all staff, offenders and visitors.

The auditor got a good outline of this Zero Tolerance Policy, beginning with 1) administration and designation of staff, 2) offender management and services, 3) offender screening and assessment, 4) reporting allegations, 5) investigation, 6) training and education and 7) data collection followed up with additional administrative considerations. Staff participation in the program is essential in implementing, monitoring and improving the Zero Tolerance Policy while identifying aggressive behavior and taking the necessary steps to ensure the safety and security of Oklahoma correctional institutions. Oklahoma's Prison Rape Elimination Act Policy is essential to the operations at MBCC and shall be adhered to at all times to ensure continuity and professionalism throughout the system.

Through discussions with staff and inmates, observation of bulletin boards, posters, handouts and materials, review of inmate and staff handbooks, and personnel policies, it is clear that the Mabel Bassett Correctional Center is committed to Zero Tolerance of sexual abuse and sexual harassment.

The Zero Tolerance Policy says the agency shall designate a PREA Coordinator to oversee agency efforts to comply with PREA standards. Each facility (minimum security and above) shall assign one staff member as the facility PREA Compliance Manager with overall responsibility of coordinating facility efforts to comply with PREA standards. Organizational charts were reviewed and it was noted that the MBCC PREA Compliance Manager, appointed in April 2014 has direct access to the Warden. The State-wide PREA coordinator and the MBCC PREA Compliance Manager when interviewed using the structured PREA Audit Tools indicated they have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards.

Of particular note is the staff and inmates knowledge of the zero tolerance of sexual abuse and sexual harassment when interviewed by the auditor. The Zero Tolerance Policy is posted in the housing units and the subject is a major part of training to new staff and existing staff on a regular basis.

§115.12 - Contracting with other entities for the confinement of inmates

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

Oklahoma OP-030401 Private Prison Monitoring Requirements states any contract between DOC and a private prison contractor whereby the contractor provides for the housing, care, and control of offenders in a non-departmental facility operated by the contractor will contain in addition to other provisions, terms and conditions specific facility requirements of 57 O.S. 561-3 and 563. 1-2. Also, contractors must comply with Oklahoma Department of Corrections procedures as specified in the contract and as updated in the contract renewal.

Employees of Private Businesses and Governmental Entities Contracting with the Oklahoma Department of Corrections, requires compliance with agency policy, specifically, Zero Tolerance towards all sexual abuse and sexual harassment. Per this policy the contractor

shall be required to comply with all PREA Prison and Jail standards and will be monitored by the host district.

Contracts and examples of contracts were reviewed. The interview with the Agency Contract Manager was reviewed. Contract employees were interviewed and it was clear from this review and interviews that Zero Tolerance and compliance with PREA law is substantiated. Contracts themselves each contained PREA statement documents of compliance requirements.

§115.13 – Supervision and Monitoring

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

The Mabel Bassett Correctional Center is a minimum/medium/maximum security facility with staffing and perimeter security outlined in the description of the facility. The Warden and staff, including the Human Resource Department's comprehensive involvement, have assured staffing according to the needs and priorities set by the agency. The Warden and the Human Resource Manager at MBCC routinely review the staffing plan, recruitment policies, and institutional needs to assure the safety of staff and inmates.

Oklahoma DOC Prison Rape Elimination Act OP-030601 states each facility shall have intermediate and higher level staff conducts unannounced rounds to identify any deviation from policy and procedure, including deviation from compliance with the Prevention of Sexual Abuse and Sexual Harassment Policy. Staff compliance is maintained through these unannounced rounds as well as through incident reviews and reports. Logs are maintained of the unannounced rounds.

The MBCC Staffing Plan includes adequate levels of staffing and video monitoring to protect offenders against sexual abuse. The Staffing Plan is monitored and updated annually. The post orders address supervision duties and responsibilities including unannounced rounds. Interviews confirmed staff and inmates felt safe at MBCC.

§115.14 – Youthful Inmates

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

The Oklahoma DOC will provide confinement and supervision of offenders under the age of 17 as noted in the Youthful Offender Response Plans developed by the Joseph Harp Correctional Center (JHCC – male offenders) and Mabel Bassett Correctional Center (MB – female offenders) and will have direct supervision, level of risk assessment, adequate program space by staff who are trained in the developmental, safety and other specific needs of the youthful offenders. There is a DOC Youthful

§115.15 – Limits to Cross-Gender Viewing and Searches

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

Oklahoma DOC PO-030601 states when the gender of the housing unit changes to the opposite gender a notification will be made to offenders announcing the staff member's presence when entering the housing unit, an offender shall be able to shower, perform bodily functions and change clothing without non-medical staff of the, opposite gender viewing them except in exigent circumstances, strip searches and visual body cavity searches will be conducted by gender specific staff and cross-gender strip searches shall be documented.

Policy and procedures governing cross gender viewing and searches were reviewed as well as actual searches conducted during the audit visit. Policy does allow cross gender strip and cross gender visual body cavity searches of inmates in emergency situations. However, no cross gender viewing or searches are conducted absent exigent situations. Interview of offenders confirmed there were no cross-gender pat searches being done.

Interviews, observations and review of procedures confirmed staff of the opposite gender announces their presence when entering inmate housing. It was confirmed by interviews with staff and inmates that inmates can perform bodily functions, change clothing and shower without staff of the opposite gender completely viewing them. Inmates and staff felt there was some sense of privacy. All staff received training in conducting pat-down searches, counts, and unannounced rounds to help assure compliance with the standard that limits cross gender viewing and searches.

§115.16 – Inmates with Disabilities and Inmates who are Limited English Proficient

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

Oklahoma OP-030601 and OP-060201 provides disabled inmates 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 and provide inmates with limited English proficiency equal opportunity. Agency policy prohibits use of inmate interpreters or other types of inmate assistants except in limited circumstances where there may be an extended delay in obtaining an effective interpreter. In the past 12 months, there have been zero (0) use of inmate interpreters, readers or other types of inmate

assistants. One of the offenders interview was limited English proficient and was assisted by an interpreter.

§115.17 – Hiring and Promotion Decisions

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

Oklahoma DOC has five OPs pertaining to criminal background checks, promotions, hiring of employees and contractors, and policy concerning criminal background checks of current employees and contractors. These policies were reviewed by the auditors. These reviews reveal that before the hiring of any new employee who has contact with inmates, a criminal background check is done. Additionally, agency policy requires criminal background record checks be conducted at least every five years and that there is a system in place to do the record checks. Personnel files were reviewed, the Warden and Human Resource Manager were interviewed and it was evident that the agency policy and PREA law were being followed concerning hiring, promotional decisions and background checks.

§115.18 – Upgrades to Facilities and Technology

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

Oklahoma DOC OP-150101 Physical Plan outlining responsibility, procedures, planning, and design was used for a new Chapel that opened November 2014. The plan states the design must consider the effect of the design, acquisition, expansion or modification upon the agency's ability to protect offenders from sexual abuse. It has been determined there is a need for cameras in the Chapel and activity will be monitored by staff until cameras are installed. Review of the project confirmed adherence to the consideration to protect offenders.

The MBCC is planning on upgrading and expanding the video monitoring system and by policy the electronic surveillance system or other monitoring technology shall consider how such technology may enhance the agency's ability to protect offenders from sexual abuse. There are approximately 103 cameras strategically placed throughout the facility, some are for viewing purposes and others are utilized for recording. Several of these cameras are pan tilt zoom equipped strategically placed around the perimeter to enhance security. No cameras directly interfere with inmates' ability to shower, dress, and perform bodily functions with some privacy. Comprehensive supervision and limited access to blind spots, or unsupervised areas assist with prevention of sexual assault/sexual abuse. During the interview with the agency head he advised over two million dollars has been spent on the installation of video cameras and recording systems to protect offenders from a variety of issues including sexual abuse and the project is continuing.

§115.21 – Evidence Protocol and Forensic Medical Examinations

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

Oklahoma is responsible for administrative and criminal sexual abuse investigations. Oklahoma OP-030601, OP-040117 and OP-140118 requires the facility maintain or attempt to enter into MOU or other agreements with community service providers who are able to provide offenders with confidential emotional support services related to sexual abuse and ODOC has a MOU pending with Unzer Center and signed MOU with YWCA Oklahoma City for these services. These policies assure PREA trained investigators follow a uniform evidence protocol through the use of the Sexual Abuse Checklist operating memorandum. Emergency medical healthcare along with forensic examinations by SANE/SAFE staff are procured from International Association of Forensic Nurses. The facility offers all inmates who experience sexual abuse, access to forensic medical examinations. Forensic medical examinations are offered without financial cost to the victim. There have been no forensic medical examinations by SANE/SAFE staff during the past 12 months.

§115.22 – Policies to Ensure Referrals of Allegations for Investigations

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

Oklahoma's PREA Policy ensures referrals of all allegations for investigation. Documentation is made of all reports of sexual abuse and sexual harassment. These are investigated and reported with findings; documentation is maintained. Agency OP-040117 Investigations and Reporting Procedures indicate the immediacy of reporting these incidents and crimes to the Office of the Inspector General (OIG). The PREA Plan also outlines sexual abuse response and investigation and offender protection investigations, all of which are also outlined for inmates in the offender orientation. Interviews with the investigative staff, random staff and inmates indicate knowledge and familiarity with these policies. The number of criminal and/or administrative investigations of alleged inmate sexual abuse and harassment that were received in the past 12 months was 17. During the past 12 months, the number of allegations resulting in administrative investigations were 16 and during the past 12 months, the number of allegations referred for criminal investigation were 1. Agency policy and the institutional procedure comply with PREA requirements relating to allegations and the investigation of such. The agency and institution both document all allegations of sexual abuse and referrals of allegations of sexual abuse and sexual harassment for criminal investigation.

§115.31 – Employee Training

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard)

for the relevant review period

Does Not Meet Standard (requires corrective action)

Oklahoma's PREA Policy addresses all ten points of the PREA Employee Training Standard. Training records, staff interviews and curriculum review indicated that staff at the MBCC was well-trained. Staff is knowledgeable about the Zero Tolerance Policy for sexual abuse and sexual harassment. They were clear on how to perform their responsibilities in detection, reporting and responding. Staff has received PREA written documentation outlining the Oklahoma's mission statement, the officers' code of ethics and a list of pertinent, timely items such as first responder duties, emergency situations and safe prisons program. A 2 ½" X 3 ½" laminated card identifying the Department's policy on Zero Tolerance and the other side identifies the requirement of Coordinated Response to an Incident of Sexual Abuse for First Responder and Supervisory Staff. This PREA tool was designed for each staff member to be placed with their DOC identification card. The Employee training covers information and notices detailing Zero Tolerance Policy for sexual assault/abuse, red flags suicide prevention and response techniques all emphasize and support the training efforts for MBCC correctional staff. Quarterly PREA training is given to employees who may have contact with inmates.

The auditor, in reviewing staff training rosters and acknowledgements and interviewing staff training, noted that there is teamwork exhibited by the facility as a whole and there is an importance placed on professionalism and the efforts in complying with PREA standards, ACA standards and in the daily performance of duties. Random staff interviews and random inmate interviews also clearly indicated a thorough and consistent training program.

Note: an emphasis on how much attention has been paid to PREA training is shown by having 131 of 617 total employees trained or re-trained on PREA requirements. This auditor considers this, 115.31, to "exceed standards".

§115.32– Volunteer and Contractor Training

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

Per Oklahoma OP-030601 all DOC staff, contract staff, non-departmental offender work crew supervisors, volunteers and interns shall be trained and understand the agency's Zero tolerance for sexual abuse or harassment and retaliation against an offender or employee in any form as a result of reporting an allegation of sexual abuse/harassment.

The auditor interviewed individuals in all categories and found they have been trained in their responsibilities and requirement of the zero tolerance policy. The HR records show all volunteers and contractors who have contact with inmates have been trained in their responsibilities under Oklahoma's policies which include procedures regarding sexual abuse/harassment prevention, detection, and response. In the past 12 months, 286 volunteers and contractors were trained in the agency's policies and procedures regarding sexual abuse/harassment prevention, detection and response.

§115.33 – Inmate Education

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

Oklahoma DOC policy ensures every offender receive a written copy of DOC's orientation material during assessment and reception both verbal and written about sexual abuse and harassment, agency's Zero tolerance standard, prevention/intervention, self-protection, how to report acts or suspicions of sexual abuse, assaults or harassment by offenders or staff to include reporting utilizing the offender PREA hotline. Documentation of the training is maintained by the facility.

Admission and Orientation was observed, the Inmate Handbook was reviewed and interviews with staff and inmates revealed that inmates receive training and information about the Zero Tolerance Policy and how to report instances of, or suspicions of abuse or harassment. Inmates received training at intake, handouts during intake, and video training during orientation. Training is updated as required. The number of inmates who received information at intake was 1,604. The number of inmates committed during the past 12 months whose length of stay in the facility was for 30 days or more, who received comprehensive education were 1,473. The number of inmates in the facility, who did not receive comprehensive education within 30 days, was zero (0). Inmate PREA education is available in different formats to accommodate all inmates. Key information about the agency's PREA policy is continuously and readily available through posters, handouts and other written formats. The agency maintains documentation of inmate's participation in PREA education. Inmate interviews confirmed PREA education.

§115.34 – Specialized Training: Investigations

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

Oklahoma DOC policy requires specialized training be provided for employees who may respond as part of their job duties to report incidents of sexual assault. DOC Inspector General Agents have documented specific training requirements. The auditor reviewed Oklahoma policy, along with investigator training curriculum (including a power point) and personnel policy, and found they all reflect that investigators are trained in conducting sexual abuse investigations in confinement settings and the training is documented. The specialty training was verified through investigator interviews and review of training records and the curriculum. There are 13 investigators currently employed by Oklahoma who have received and completed the required training. The agency maintains documentation showing that investigators have completed this training. The Office of the Inspector General (OIG) manages the PREA compliance training.

§115.35 – Specialized training: Medical and mental health care

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

Oklahoma PREA policy requires Mental Health and medical staff be trained to detect and assess signs of sexual abuse and/or predation, preserve evidence of sexual abuse, respond to sexual assault victims and be fully knowledgeable of DOC procedures in regard to PREA. A comprehensive power point presentation PREA for Medical Services is part of the training requirement. The numbers of medical and mental health care practitioners who work regularly at the facility are 34 and 100% have received the training required by policy. The agency maintains documentation showing that medical and mental health practitioners have completed the required training. Observations, review of documentation and interviews with staff and inmates confirm MBCC is compliant with this PREA standard.

§115.41 – Screening for Risk of Victimization and Abusiveness

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

Oklahoma PREA Policy requires all offenders receive a mental health screening and/or evaluation during the initial reception and assessment within 24 hours of arrival, offenders at risk for sexual victimization are identified and monitored, sensitive information is not exploited, and housing assignment made ensuring safety and security. The policy addresses and outlines the screening processes for the risk of victimization and abusiveness. An Offender Assessment Screening Form addresses the risk of sexual victimization or the risk of sexual abuse of other inmates. This form is completed within 72 hours of intake. The intake process was reviewed and the auditors observed the process. The intake process conforms to PREA standards. The form/checklist for screening, include questions regarding mental, physical and developmental disabilities and whether or not the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex or gender nonconforming, and whether or not the inmate has previously experienced sexual victimization. The inmates own perception of vulnerability was also pursued. The screening/intake process was well managed and thorough. This information was further related to the Warden and additional committee staff for appropriate use and placement. There were 1,577 inmates entering the facility in the past 12 months and were screened. Of these, none were reassessed within 30 days for risk of sexual victimization or being sexually abusive. This assessment, and screening process performed at MBCC appears to positively assist in the effective and efficient inmate security and management at this facility.

§115.42 – Use of Screening Information

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

Oklahoma PREA Policy requires the facility use information from the risk screening evaluation in accordance with OP-30102 in order to inform staff making housing, work, education and program assignments with the goal of keeping offenders at risk of being sexually victimized separate from those at high risk of being sexually abusive. The screening information is collected as data on a Cell Assessment Form and used for offender cell assignment.

Interviews with intake and mental health staff supported by interviews with inmates as well as observation and review of documentation supports the use of the screening information as being on a "need to know" basis and consistent with appropriate custody and security.

§115.43 – Protective Custody

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

Oklahoma PREA Policy states offenders at high risk for sexual victimization shall not be placed in involuntary segregated housing unless an assessment of all available alternatives has been made. If the offender is placed in segregated housing for this purpose access to programs, privileges, education and work opportunities will be made possible. During the last twelve months no inmates have been assigned to involuntary segregated housing.

The auditor, from inmate and staff interviews, felt that the staff at the MBCC was very creative in addressing individual housing needs and program needs consistent with the security and safety of the individual inmate.

§115.51 – Inmate Reporting

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

The Oklahoma DOC PREA Plan has established procedures allowing for multiple internal ways for inmates to report privately to agency officials. Additionally, the Mabel Bassett Correctional Center Offender Manual issued to each offender provides sexual assault awareness, facts for the offender who sexually assaults other offenders, Rape avoidance and what to do if you are sexually assaulted. Offenders may report allegations directly to staff, the Chief of Security, family members or the Oklahoma State Bureau of Investigation who has a MOU with the Department to provide offenders with confidential reporting. Third parties, including fellow offenders, staff members, family members, attorneys, and advocates, shall be permitted to assist offenders and request for administrative remedies relating to an allegation of sexual abuse. Emergency grievances alleging substantial risk of imminent sexual abuse

may be filed. This information is attainable in inmate handbooks, posters, bulletin boards, information handouts, libraries and, of course, through staff.

Interviews with inmates and staff revealed that inmates know how to report sexual abuse and sexual harassment and staff knows how to report sexual abuse and sexual harassment. Review of documentations show the process is working. Review of documentation and observation of use of the Offender Manual indicate the offenders are well informed of their rights under PREA.

§115.52 – Exhaustion of Administrative Remedies

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

The Oklahoma Department has an administrative procedure for dealing with inmate grievances regarding sexual abuse along with policy and procedures for filing emergency grievances alleging that an inmate is subject to substantial risk of imminent sexual abuse. Agency OP-090124 Offender Grievance Procedure addresses offender grievances and management of offender grievances is available to inmates and staff. Grievances are allowed at any time regardless of when the sexual abuse occurred. Additionally, the Offender Manual and DOC PREA Plan cover these topics. In the past 12 months, there were no grievances filed alleging sexual abuses.

§115.53 – Inmate Access to Outside Confidential Support Services

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

Oklahoma PREA Policy requires the facility provides inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates address, telephone numbers for local, state, or national victim advocacy or rape crisis organizations with toll-free hotline numbers when available. Also, the Policy requires MBCC staff inform the offender prior to giving access to victim advocates the extent to which communications will be monitored and extent to which reports will be forwarded to authorities in accordance with mandatory reporting laws.

There are lists of outside confidential support services provided to the inmate population. There is a signed Memorandum of Understanding (MOU) or agreement with YWCA and pending MOU with UNZER community service providers that have been willing and able to support inmates with these emotional services related to sexual abuse in this community.

The institution has solicited help. The Religious Department chaplains have been trained in these kinds of support services and work with the inmate population to meet their needs. Review of documentation, interviews with staff and inmates confirm the offenders have access to support services.

§115.54 – Third-Party Reporting

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

Oklahoma PREA Policy mandates the facility provide a method to receive third-party reports of offender sexual abuse or sexual harassment and publicly distributes information on how to report resident sexual abuse/harassment on behalf of offenders. Oklahoma post advertisements with this information in the facility, developed curriculum used in mandatory PREA training, brochures, pamphlets, handouts and displays this PREA information on the agency's website.

§115.61 – Staff and Agency Reporting Duties

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

Agency PREA Policy requires all staff to report immediately and according to agency policy any knowledge, suspicion, or information they receive regarding an incident of sexual abuse/harassment that occurred in a facility whether or not it is part of the agency. Staff must also, per policy, report immediately and according to policy retaliation against offenders or staff who reports incidents, and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. Policy prohibits staff from revealing any information related to sexual abuse report to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions.

Review of Oklahoma PREA policy, MBCC Medical Orientation, MBCC Mental Health Service Orientation for new offenders, interviews with staff and offenders and signed forms confirm staff is aware and follows policy for staff reporting duties as required by the PREA standard.

§115.62 – Agency Protection Duties

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

Oklahoma PREA Policy requires staff to take immediate action to protect the offender immediately when knowledge, suspicion, or information is received regarding an incident of sexual abuse/harassment. The facility did not determine that an inmate was subject to a substantial risk or imminent sexual abuse. The MBCC staff is very knowledgeable and well trained in their protection duties when an inmate is subject to imminent sexual abuse or risk of imminent sexual abuse. Staff interviews and review of documentation confirmed the PREA standard is taken seriously and is being followed.

§115.63 – Reporting to Other Confinement Facilities

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

Upon receiving an allegation that an inmate was sexually abused while confined at another facility, it is required by Oklahoma PREA Policy, that the Warden of the facility that received the inmate must immediately notify the facility where the sexual abuse is alleged to have occurred. Through review of policy and in the interview with the Warden, it was noted that the staff is knowledgeable of this procedure. During the past 12 months, the number of allegations the facility received that an inmate was abused while confined at another facility was three (3). One of the allegations was closed noted insufficient evidence and Statute of Limitations. The other two (2) allegations are from November 2014 and are being investigated. Review of documentation confirmed; notification process within the 72 hour requirement, allegations were documented, and investigations. Screening information as well as specialized staff and inmate interviews support compliance.

§115.64 Staff First Responder Duties

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

Oklahoma PO-030601 requires that upon learning of an allegation that an inmate was sexually abused, the first security staff member to respond to the report shall require; separate alleged victim and abuser; preserve and protect crime scene; collect any evidence; if timeframe allows collect and protect evidence and advise offender to not take any action that could destroy evidence. In the past 12 months 17 offenders alleged that they were sexually abused. The first responder to these allegations was seven (7) security staff and ten (10) non-security staff. When the first staff responder was not a security staff member, the responder was required to request the alleged victim not take any actions that could destroy physical evidence and then security staff was notified. The allegations were not within the time period that still allowed for the collection of physical evidence.

The Oklahoma Investigation OP-040117; Evidence Handling; and the Office of the Inspector General Operating Procedure Manual; all detail the policy and action for the first responder to an allegation of sexual abuse. The first security staff member to respond to the report that an inmate was sexually abused is required to separate the alleged victim and abuser, preserve and protect the crime scene,

and request the alleged victim take no action to destroy evidence. Policy also requires that efforts be made to ensure the alleged abuser does not take any action that could destroy evidence, and then notify the immediate supervisor or shift commander.

The Mabel Bassett Correctional Center has further emphasized first responder duties by distributing cards and handouts on sexual assault/abuse to include steps to take if a sexual assault occurs. These steps and duties were confirmed by random staff interviews, investigative staff interviews, higher and intermediate level supervisor interviews, and through review of training curriculum and documents. Of particular importance are a 2 1/2" X 3 1/2" laminated card that each staff member wears with their DOC identification. One side of the card identifies the Department's Zero Tolerance PREA and the other side explains Coordinated Response to an Incident of Sexual Abuse as First Responders. Interviews with staff, review of documentation and examination of policies and procedures confirm MBCC is compliant for this standard.

§115.65 – Coordinated Response

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

Mabel Bassett Correctional Center MB-030601-01 dictates responding to an allegation of sexual abuse requires a coordinated effort between unit security staff, the Office of the Inspector General, medical and mental health services and victim advocates or victim offender representatives. Procedures have been outlined to provide a systematic notification in the response process following a reported sexual abuse incident. The PREA Plan details coordinated actions to be taken in response to an incident of sexual abuse. Interviews with the Warden and higher-level staff indicated a commitment by the facility leadership for handling a coordinated response.

§115.66 – Preservation of ability to protect inmates from contact with abusers

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

Oklahoma is not responsible for collective bargaining on the agency's behalf. Oklahoma is a Union State and does not have collective bargaining that would interfere with the preservation of the agency's ability to protect inmates from contact with abusers.

§115.67 – Agency protection against retaliation

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

The Oklahoma Department of Corrections PREA Policy OP-030601 protects all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations, from retaliation by staff or inmates. Also, personnel policies covering sexual harassment and discourteous conduct of a sexual nature, general rules of conduct, sexual misconduct with offenders, discrimination in the workplace, also protect against retaliation. There is a 90 day monitoring time period for retaliation review. An offender 90 day monitoring form, and a staff 90 day monitoring form, as well as other intervention practices confirms the agency's commitment to prevent retaliation.

The facility has designated the two Deputy Wardens the responsibility of monitoring retaliation by inmates and staff. The Warden is responsible for monitoring staff retaliation.

There have been zero (0) number of times of an incident of retaliation has occurred in the past 12 months.

§115.68 – Post-Allegation Protective Custody

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

Oklahoma DOC PREA Policy OP-030601 prohibits the placement of inmates who allege to have suffered sexual abuse in involuntary segregated housing unless an assessment of all available alternatives has been made and a determination has been made that there is no available alternative means of separation from likely abusers. If determined such housing is necessary, the MBCC would explore other alternatives such as a transfer. There have been zero (0) number of inmates who allege to have suffered sexual abuse who were held in involuntary segregated housing in the past 12 months.

§115.71 – Criminal and Administrative Agency Investigations

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

Oklahoma PREA Policy OP-030601 and Investigations OP-040117, addresses investigations under general considerations. The OPs follows: 1) a uniform evidence protocol to investigate sexual abuse and sexual harassment, 2) sexual investigations shall be conducted promptly, early, and objectively including third-party and anonymous reports, and 3) the use of investigators who have been specially trained in sexual abuse investigations pursuant the Oklahoma policy. Additionally, the agency's Administrative OP-040117 Reporting Incidents/Crimes to the Office of the Inspector General, establishes policy related to criminal and administrative agency investigations. This policy includes the direction that allegations of conduct which appear to be criminal are referred for prosecution. The Office of the Inspector General addresses and ensures retention of all written reports for as long as the alleged abuser is incarcerated or employed by the agency +5 years.

Review of OPs, Specialized training PowerPoint for IG investigations, specialized training rosters for IG investigations, incident notification checklist, and request for investigation, comprehensive report and sexual assault report confirms this standard is considered a priority and compliant.

§115.72 – Evidentiary Standard for Administrative Investigations

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

Oklahoma Policy imposes a standard of preponderance of the evidence for determining whether or not allegations of sexual abuse or sexual harassment are substantiated. Interviews with specially trained investigators confirmed compliance with the standard.

§115.73 – Reporting to Inmate

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

The Agency PREA Policy requires that all inmates who make allegations of sexual abuse shall be informed as to whether the investigative finding was substantiated (sent to prosecution/sustained) or unsubstantiated (administratively closed/not sustained) or unfounded. Additionally, the offender victim shall be notified following the suspect assailant indictment or conviction on the related charge. Interviews with investigators confirm that an inmate who makes an allegation that she suffered sexual abuse at MBCC is informed verbally or in writing as to whether or not the allegation was determined to be substantiated or unsubstantiated or unfounded following an investigation. During the last twelve months there were five (5) administrative investigations completed with three offenders no longer in the facility and notification sent to two offenders advising the allegations were unfounded. Review of the Notification of Investigation Status signed by the offender confirmed the notification required by policy.

§115.76 – Disciplinary sanctions for staff

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

Disciplinary sanctions for violations of the agency's policy relating to sexual abuse or sexual harassment are commensurate with the nature and circumstances of acts committed per PREA OP-030601. In the personnel policies of the Oklahoma Department of Corrections disciplinary sanctions are listed up to and including termination for violation of agency sexual abuse and sexual harassment policies. Personnel policies; Progress Disciplinary Procedure OP-110215 and PO-110415 showing Cause for Discharge relate to sexual harassment, discourteous conduct of a sexual nature, general rules of conduct in disciplinary action, guidelines for employees and sexual misconduct with offenders, detail the sanctions and actions required. In the past 12 months, there has been two (2) staff from the facility that has violated agency sexual abuse or sexual harassment policies. Review of documentation shows there were no disciplinary sanctions in 2013 and 2014 to date.

§115.77 – Corrective action for contractors and volunteers

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

Oklahoma DOC OP-030601 requires any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with inmates and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies and the facility shall take appropriate remedial measures, and shall consider whether to prohibit further contact with inmates, in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer. In the past 12 months, there has been one contractor terminated for personal contact with an offender. Review of documentations, interviews with staff, investigators and offenders find this standard is a priority and enforced.

§115.78 – Disciplinary sanctions for inmates

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

Oklahoma DOC Policy OP-030601 requires inmates be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse and sanctions shall be commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories. The disciplinary process considers whether an inmate's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed. Review of OP-060125 Department Offender Disciplinary Procedure, Acts Constituting Violations, Disciplinary Hearing Report, Offense Report and Mental Health Recommendation, interviews with staff and offenders confirm disciplinary sanctions for inmates are according to the PREA standard.

§115.81 – Medical and mental health screenings; history of sexual abuse

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

All inmates at MBCC that disclosed prior sexual victimization during screening are offered follow-up with a medical or mental health practitioner. This follow-up, as outlined in DOC PREA PO-030601, and correctional mental health care policies is administered by the mental health staff and offered within 14 days of intake screening. Follow-up is outlined in Health Screening Form and Mental Health Evaluation. Information related to sexual victimization or abusiveness that occurred is strictly limited to medical and mental health practitioners. Medical and mental health practitioners obtained informed consent before reporting prior sexual victimization that did not occur in an institutional setting. During the last 12 month 100% of inmates who disclosed prior victimization during the screening were offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening. Interviews with Medical and Mental Health staff confirmed they have received specialized training regarding sexual abuse and sexual harassment, are required to report any knowledge suspicion or information regarding an incident to a designated supervisor or official immediately upon learning of it, ensure victims of sexual abuse receive timely and unimpeded access to emergency medical treatment and crisis intervention services immediately. Offenders confirmed the Medical and Mental Health services available to them.

§115.82 – Access to emergency medical and mental health services

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

Agency PO-030601 mandates inmate victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services, at no cost to the inmate, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment. If no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, security staff first responders shall take preliminary steps to protect the victim pursuant to § 115.62 and shall immediately notify the appropriate medical and mental

health practitioners. The medical department at MBCC is staffed 24 hours a day by medical staff employed by the Oklahoma Department of Corrections. Offenders in need of emergency services are transported to the Oklahoma University Medical Center in Oklahoma City, OK.

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

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

Medical/mental health treatment is outlined in the Oklahoma OP-030601 and in the section 140118.01 Medical resource Manual, which further addresses ongoing care and follow-up. Review of policy and manual and additional forms including; PREA Response Checklist, Offenders Guide to Sexual Misconduct, Zero Tolerance Acknowledgement, Progress notes- treatment follow up, Treatment Plans, Referrals, and Mental Health Evaluation of Abusers Healthcare. Employees interviewed at the MBCC confirmed their commitment and dedication to appropriate and personalized total healthcare to the inmates. Random interviews with inmates also confirm compliance. Sexual assault awareness brochures and handout materials received at intake and other information in the Inmate Handbook advises the inmate population of the offerings by the Medical and Mental Health Department concerning evaluation, treatment and ongoing medical and mental health care as appropriate for the sexual abuse treatment of inmates, victims and abusers.

§115.86 – Sexual abuse incident reviews

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

Oklahoma PO-030601 requires a facility conduct a sexual abuse incident review at the conclusion of every criminal or administrative sexual abuse investigation, unless the allegation has been determined to be unfounded. This review must be conducted within 30 days of the conclusion of the sexual abuse investigation.

The MBCC, in the past 12 months, has reviewed no administrative investigations of alleged sexual abuse or criminal investigations of alleged sexual abuse, excluding unfounded incidents since there were no investigations to review. The facility review team meets monthly and includes the Warden, Deputy Wardens, PREA Compliance Manager, Chief of Security, Mental Health Clinical Coordinator and

Unit Managers. Review of notification of Review Team meeting, documentation of sexual assault/abuse incident review and interviews with top management, security and specialized staff confirm the Review Team has been trained and meets the requirements of this standard.

§115.87 – Data Collection

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

The agency's Inspector General Office collects accurate information and data for every allegation of sexual abuse at facilities under its control. The Oklahoma Department of Corrections, through its PREA Policy PO-030601 directs this data collection. The agency aggregates this incident-based sexual abuse data at least annually. The Office of the Inspector General annual report is approved by the Director, available on the agency website and updated annually corroborating this standard.

§115.88 – Data Review for Corrective Action

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

The MBCC OP-030601 requires the agency annual report appear on the agency's website and provide monthly reports to improve the effectiveness of its sexual abuse prevention, detection and response policies and training, including identifying problem areas, and taking corrective action on an ongoing basis. Interviews with the Warden, higher intermediate staff plus review of the monthly and annual reports, substantiates this data collection and review for corrective action.

§§115.89 – Data Storage, Publication, and Destruction

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

The agency PO-030601 ensures that the incident based information and aggregate data is collected and securely retained for at least ten years after date of initial collection unless Federal, State or local law requires otherwise, considered confidential information and is maintained by the Office of Inspector General. The records retention schedule brochure was reviewed by this auditor along with a memo from records management indicating security of the Oklahoma government records from creation to final disposition. The Office of the Inspector General makes available to the public its annual report on PREA on the agency's website. The policy on records retention schedule and the report on records management were reviewed and confirm storage, publication, and destruction is per PREA standard.

AUDITOR CERTIFICATION:

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

Marilyn (Lynn) McAuley

January 17, 2015

Auditor Signature

Date