

PREA AUDIT REPORT Interim Final
ADULT PRISONS & JAILS

Date of report: 06/12/2022

Auditor Information			
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Telephone number: (317) 835-3533			
Date of facility visit: May 20, 2021 through May 22, 2021			
Facility Information			
Facility name: Ponce 1000 Medium and Maximum Security Institution			
Facility physical address: Bo. El Tuque - Cucharas Sector; Ponce, P.R.			
Facility mailing address: <i>(if different from above)</i> 3699 Ponce BYP Ponce, P.R. 00728-1500			
Facility telephone number: 1 (787) 864-8886			
The facility is:	<input type="checkbox"/> Federal	<input type="checkbox"/> State	<input type="checkbox"/> County
	<input type="checkbox"/> Military	<input type="checkbox"/> Municipal	<input type="checkbox"/> Private for profit
	<input type="checkbox"/> Private not for profit		
Facility type:	<input checked="" type="checkbox"/> X Prison	<input type="checkbox"/> Jail	
Name of facility's Chief Executive Officer: Pedro Santos Echevarria			
Number of staff assigned to the facility in the last 12 months: 16			
Designed facility capacity: 779			
Current population of facility: 357			
Facility security levels/inmate custody levels: Medium-Maximum Security Prison			
Age range of the population: 18 and above			
Name of PREA Compliance Manager: Juan Santiago Molina		Title: PREA Institution Manager/Correctional Officer	
Email address: jsmolina@dcr.pr.gov		Telephone number: (787) 492-0200 ext.234	
Agency Information			
Name of agency: Department of Correction and Rehabilitation-Puerto Rico			
Governing authority or parent agency: <i>(if applicable)</i> Estado Libre Asociado de PR (Free Associated State of Puerto Rico)			
Physical address: Juan Calaf Avenue, Urb. 3 Nuns, Hato Rey P.R. 00917 (Avenida Juan Calaf, Tres Monjitas, Hato Rey P.R. 00917)			
Mailing address: <i>(if different from above)</i> Section 71308, San Juan, P.R. 00936 (Apartado 71308, San Juan P.R. 00936)			
Telephone number: (787) 273-6464			
Agency Chief Executive Officer			
Name: Ana I. Ecobar Pabon		Title: Secretary	
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Agency-Wide PREA Coordinator			
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AUDIT FINDINGS

NARRATIVE

On May 20, 2021, in coordination and cooperation with the Puerto Rico Department of Correction and Rehabilitation (DCR-PR), USDOJ Certified PREA Auditor DeShane Reed conducted a facility audit of the DCR-PR *Ponce 1000* Institution. The audit commenced with Pre-Audit Briefing meeting (9:30am) consisting of DCR-PR *Ponce 1000* Institution administration and supervisory security staff. In attendance was the following from DCR-PR *Ponce 1000* Institution: PREA Auditor, PREA Auditor-Translator, Ponce 1000 PREA Compliance Officer, *Ponce 1000* Co-Superintendent, DCR-PR PREA South Region PREA Manager. The PRE-Audit meeting commenced with introductions, review of the PREA audit schedule and agenda, on-site document requests, lists of inmates for interviewing and a tour of the entire DCR-PR *Ponce 1000* Institution.

This PREA audit (May 20, 2021 - May 22, 2021) commenced with a full tour of DCR-PR *Ponce 1000* Institution's multiple single-cell housing locations, program locations, visitation area, cafeteria, food prep kitchen, library, laundry, showering locations, offices, recreation, and educational locations within DCR-PR *Ponce 1000* Institution. After a complete tour and initial on-site documentation review, the PREA Auditor moved into interviewing a selecting a random sample of inmates. A total of 21 inmates were interviewed, with a specific selection focused on the following category of inmates, based on PREA audit requirements: (Inmates with prior victimization, LGBTI, disability, current PREA allegation(s), limited English proficiency, and inmates in segregation). The PREA Audit also consisted of 22 interviews of a random selection of *Ponce 1000* Institution staff including: *Ponce 1000* Institution PREA Compliance Manager, Investigation/Retaliation Team, Contractors, Volunteers, Medical/Mental Health Practitioners, Intake and Classification, Contracted Medical Personnel, Psychologist/Mental Health Personnel, and other *Ponce 1000* Institution Corrections Institution specialized staff. The PREA Auditor also reviewed multiple files and physical documents while on-site, which allowed the PREA auditor to verify if *Ponce 1000* Institution was compliant with PREA facility standards and/or confirm any areas of non-compliance.

On May 22, 2021, the PREA Audit of *Ponce 1000* Institution concluded with a Post-Audit Debriefing. The same representatives from the Pre-Audit Briefing meeting were in attendance. The PREA Auditor shared that the information presented by the auditor within this Post-Audit Debriefing did not depict a final audit reporting. The PREA Auditor continued by sharing several highlights of the *Ponce 1000* Institution. The staff was welcoming and pleasant to the PREA Auditor. Staff seemed to be eager to learn more about PREA, as well as share their current knowledge of PREA. The double-cell housing dormitory was clean and organized. As a result of *Ponce 1000* Institution being an institution for Medium-Maximum risk offenders, the facility seemed to have several program options for inmates to participate within the facility. Most of inmate's days are in scholastic classes, recreational, in career-related programs or on housing dormitory. The PREA Auditor also thanked *Ponce 1000* Institution for allowing this auditor unimpeded access to the entire facility, through tour, documentation access, inmate access, and flexibility of interviews. The PREA Auditor also shared any observable areas that were not meeting standards and likely require a Corrective Action.

As it pertains to PREA Physical Plant observations, *Ponce 1000* Institution has 1 building with 21 double-cell housing units (10 Housing Units in use which includes segregation). Eleven Housing Units were closed at the time of this onsite audit/tour. There were 10 open housing units, which includes 1 open segregation housing unit. Additionally, due to the lower inmate population, all inmates are housed in their own single cell. The building also consists of medical and social services for inmates, recreation, dining, education, and administrative offices. *Ponce 1000* Institution does have a total of 72 cameras with, 18 in use and 54 not in use. The cameras do not record and only capture real-time activity. *Ponce 1000* is highly dependent on proper staff supervision of all inmates. The 10 housing locations are double-celled, facing the control room, which provides a clear sight path for roaming Correctional Officers and Control Room Officers easy observation with proper supervision.

The PREA Auditor observed that the showers in each housing dormitory had half-wall showers that separated them from other inmates, The institution utilized cloth shower curtains in the front of the showers. This provided showering privacy from other inmates in the day area, and still allowed for proper security. Finally, the PREA Hotline telephone on the housing units are all not working and the toll-free for inmate to call to report a PREA Incident, are only available from 8:30am-4:30pm Monday through Friday (no weekend access). This limits one of *Ponce 1000*'s major avenue for inmates to report a PREA Incident.

The Post-Audit Debriefing concluded with the Auditor thanking the *Ponce 1000* Institution staff for their cooperation, efficiency, and coordination in allowing the audit to move along uninterrupted. The PREA Auditor also informed the *Ponce 1000* Institution staff that a PREA Interim Audit report will be submitted concluding this facility audit.

DESCRIPTION OF FACILITY CHARACTERISTICS

Ponce 1000 Institution is a 779-inmate designed capacity Medium-Maximum Custody Correctional Institution. *Ponce 1000* Institution houses only male inmates ages 18 and older. According to the facility, they do not house youthful inmates. The physical plant consists of approximately 1 building. The building contains administrative offices, Central Desk, psychologist, kitchen, dining, courtyard, and 10 housing units (in use) totaling 779 bed capacity.

Ponce 1000 Institution is a Medium-Maximum Custody institution for high-risk inmates. Inmates are monitored through rotations of security staff, who are expected to conduct and document “rounds” a minimum of one hour per round. Additionally, supervisory staff are required to conduct documented “unannounced rounds” throughout their daily shifts. Superintendents are required to make “unannounced rounds.” Services and programs are provided within the *Ponce 1000* Institution.

Due to not having no recordable camera technology for video monitoring assistance and investigations, *Ponce 1000* Institution rely heavily on staff supervision through sight/sound supervision by Correctional Officers, as well as predictable and unpredictable random unannounced rounds per shift by Supervisory security staff (Sergeant or higher). To make up for blind spots, *Ponce 1000* Institution relies heavily on consistent, vigilant and unpredictable staff sight and sound supervision. At the time of the PREA Facility Audit, *Ponce 1000* Institution had approximately 209 Correctional Officers and Non-Officer Status Staff, who have contact with inmates in the job roles. Additionally, approximately 27 volunteers and contracted individuals who may have contact with inmates within their daily roles are at *Ponce 1000* Institution. Finally, *Ponce 1000* Institution works in cooperation with the Office of Investigations of the Correctional System (OISC) regarding institution related PREA Investigations. *Ponce 1000*’s PREA Investigation Team works in collaboration with DCR-PR’s Office of Investigations of Systems of Corrections (OISC) by gathering institutional evidence, conducting interviews, and retrieving documents relevant to the PREA Investigations.

Finally, *Ponce 1000* Institution’s emergency medical services are largely provided by their onsite Medical Center. *Ponce 1000* medical services are largely provided through a contractual relationship partnership with *Physicians Correctional Group*. *Physicians Correctional Group* provides 24-hour emergency triage services for all DCR-PR Institutions. Any inmate requiring medical care beyond the scope of *Physicians Correctional Group*, is transported to *Ponce 500 (a DCR-PR Medical Prison)*, Damas Hospital (Ponce), or Centro Medical in San Juan, Puerto Rico. Centro Medico’s Certified SANE Nurses also conducts any forensic sexual assault medical exams.

SUMMARY OF AUDIT FINDINGS

The PREA site audit of DCR-PR *Ponce 1000* Corrections Institution consisted of a comprehensive assessment (May 20, 2021-May 22, 2021), related to PREA's mission of prevention, detection, and responding to sexual abuse/sexual harassment, as well as the freedom from retaliation when reporting sexual abuse/harassment. The PREA Institution Audit also consisted of assessing the 43 PREA standards. The assessment of the DCR-PR *Ponce 1000* Corrections Institution included an exhaustive facility tour, review of electronic and on-site documents, reviewing investigations and retaliation follow-up documentation, comprehensive interviews with inmates, staff, volunteers, OISC Investigator, PREA Compliance Coordinator, *Ponce 1000's* PREA Compliance Manager, and DCR-PR *Ponce 1000's* Superintendents.

Based on the audit findings of 43 total PREA Standards, there were 29 PREA Standards in Compliance, 0 PREA Standard which were Non-Applicable, and 14 PREA Standards which were non-compliant and requiring Corrective Action. DCR-PR *Ponce 1000* Corrections Institution PREA Standards requiring Corrective Action are as follows: 115.12, 115.15, 115.31, 115.33, 115.41, 115.51, 115.53, 115.54, 115.61, 115.64, 115.81, 115.87, 115.88, and 115.89. The above-mentioned identified PREA standard areas requiring Corrective Action were either non-existent, in their beginning stages of compliance and require procedural consistency over time to be considered in compliance, or the institution's policy language did not align with the specific PREA standard.

With technical assistance from this PREA Auditor, throughout the Corrective Action period, DCR-PR *Ponce 1000* coordinated a plan of action steps to mitigate each *Non-Compliant* Standard area and bring each into *Compliance*. DCR-PR *Ponce 1000* was able to successfully adjust/revise their policies and procedures, conduct trainings, and establish a consistency of institutional practices to bring them into compliance with the 43 PREA Standards.

Number of standards exceeded: 0

Number of standards met: 43

Number of standards not met: 0

Number of standards not applicable: 0

Standard 115.11 Zero tolerance of sexual abuse and sexual harassment; PREA Coordinator

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

This PREA Auditor reviewed pre-audit documents submitted via electronic source, conducted on-site interviews, as well as on-site observations to determine compliance for Standard 115.11. DCR-PR Ponce 1000 Correctional Institution submitted DCR-PR "Policy to Prevent, Detect, Report, and Respond to Sexual Violence in Correctional Institutions" as evidence of compliance with PREA Standard 115.11. DCR-PR's "Policy to Prevent, Detect, Report, and Respond to Sexual Violence in Correctional Institutions" (VII-A, B, C) states, *"The Nominating Authority will appoint a "PREA Coordinator" who has the authority to implement and oversee the Agency's efforts in complying with the PREA standards in all correctional institutions. "Regional Compliance Manager" (North, South, and NIJ) will be employees appointed by the Nominating Authority, who have the authority to coordinate efforts in the correctional institutions, for the implementation of the PREA Standards. The Superintendent of each institution appoints a "Compliance Officer" to serve as the institution's PREA Liaison. The PREA "Compliance Officers" verify that their institution has posters and information leaflets about PREA, ensure that the established protocol is followed when an incident of sexual violence occurs, and notify the Regional Compliance Manager about any allegations or incidents of sexual violence and complete required reports."*

Also, DCR-PR's Organizational Chart identified their PREA Coordinator who oversees the DCR-PR's efforts to comply with PREA standards in all DCR-PR Correctional Institutions.

This PREA auditor concludes that Ponce 1000 is in compliance with PREA Standard 115.11.

Standard 115.12 Contracting with other entities for the confinement of inmates

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

This PREA Auditor reviewed pre-audit documents submitted via electronic source, conducted on-site interviews, as well as on-site observations to determine compliance for PREA Standard 115.12. This PREA Auditor reviewed DCR-PR's electronically submitted "Policy to Prevent, Detect, Report, and Respond to Sexual Violence in Correctional Institutions" (Recruitment of other entities for inmate confinement services-Page 15) which stated, *"If the DCRPR contracts services for inmates with private agencies and other entities, including with other government agencies, will include in any new or renewed contract the obligation of the contracted entity to adopt and comply with PREA standards. Any new or renewed contract will include surveillance that ensures that the contractor meets PREA standards."*

Ponce 1000's policy aligns with PREA Standard 115.12. This auditor also received a certified letter from DCRPR's PREA Coordinator stating that DCRPR's Ponce 1000 has no contract with any entity for the confinement of members of their correctional population.

This PREA auditor concludes that Ponce 1000 is in compliance PREA Standard 115.12.

Standard 115.13 Supervision and monitoring

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

This PREA Auditor reviewed DCR-PR Ponce 1000 Correctional Institution's pre-audit documents submitted via electronic source, conducted on-site interviews, as well as on-site observations to determine compliance for Standard 115.13. This PREA Auditor reviewed DCR-PR's institution-wide "Policy for Rounds of Supervision; Article VIII" which states, "*Regional Security Director visits their respective institutions twice a month randomly. The Institution's Superintendent should make rounds throughout their facility and the living quarters twice a week. Chief of Guards should randomly make rounds of all their respective institution's living quarters three times a week. The Shift Supervisor is mandated to randomly visit all the living quarters at least once on every shift 7 days a week (plus any situation which is required).*"

This PREA Auditor also reviewed "Rounds Logs" submitted through the Pre-Audit Questionnaire's electronic documentation and while conducting the on-site audit, which verified unannounced rounds of Supervisory Staff. The auditor also was present on site to review unannounced rounds, documented by supervisory staff, in the "Rounds" books on random housing units.

This auditor was also able to review on-site and discuss DCR-PR Ponce 1000 Correctional Institution's staffing plan with Ponce 1000's Superintendents and PREA Compliance Manager. Each shared that to cover direct-supervision open/vacant positions, Correctional Officers (on shift) in indirect supervision roles are moved to direct-supervision positions. Also, DCR-PR's mandatory overtime policy is currently in place and policy also allows for temporary reassigning of other institution's staff to address any staffing shortages.

This PREA auditor concludes that Ponce 1000 Correctional Institution is in compliance with PREA Standard 115.13.

Standard 115.14 Youthful inmates

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

This PREA Auditor reviewed DCR-PR's Ponce 1000 Correctional Institution's pre-audit documents submitted via electronic source, conducted on-site interviews, as well as on-site observations to determine compliance for PREA Standard 115.14. DCR-PR's Ponce 1000 Correctional Institution also submitted the DCR-PR "Policy to Prevent, Detect, Report, and Respond to Sexual Violence in Correctional Institutions (Section XVII-Information Gathering) as evidence of compliance with PREA Standard 115.14 which states, "*Keep separate the members of the young adult population from the members of the adult corrections population.*"

Additionally, this auditor reviewed classification documentation submitted by Ponce 1000, where youthful inmates were redirected to

other DCR-PR institutions which housed youth (under 18 years old) and those institutions which housed young adults (ages 18-21). Moreover, during the on-site visit, this PREA Auditor did not observe, nor reviewed documentation submitted within the “Daily Population Report” (12-month report) that any youthful inmates resided at DCR-PR Ponce 1000 Corrections Facility.

This PREA auditor concludes that Ponce 1000 is in compliance with PREA Standard 115.14.

Standard 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

This PREA Auditor reviewed DCR-PR Ponce 1000 Correctional Institution’s pre-audit documents submitted via electronic source, conducted on-site interviews, as well as on-site observations to determine compliance for Standard 115.15. This PREA Auditor reviewed DCR-PR’s “Administrative Order 2016 Respect and Interaction with the LGBTQ Population” which stated, “*Security personnel should be trained to perform the pat-searches or records the transgender population in a professional manner, and less invasive as possible, without neglecting safety aspects.*” Additionally, “DCR-Administrative Order Procedures” (VIII, Page 8), submitted electronically by Ponce 1000 stated, “*DCR Correctional Officials may not under any circumstance search an inmate solely to determine their sex or genital status. If this is unknown, it can be determined during talks with the inmate or through private medical exams with a medical practitioner.*” Additionally, DCR-PR’s “Policy to Prevent, Detect, Report, and Respond to Sexual Violence in Correctional Institutions” states, “*Members of the LGBTIN correctional population will have the same opportunities and access to the programs as others. It will be provided with facilities that allow the inmate to provide the same level of security as the rest of the correctional population. Physically examining members of the intersectional or transgender correctional population for the sole purpose of determining their genital status will not be allowed.*”

DCR-PR Ponce 1000’s policy aligns with PREA standard 115.15. During interviews with 21 inmates, it was a consensus that staff of opposite gender did NOT consistently announce when entering a housing location. There were also inconsistencies in 22 interviewed staff responses regarding procedures and training in cross-gender pat-searches. Furthermore, through inmate interviews, there was consistency in inmates stating that they could not shower without being viewed by staff of the opposite gender. However, when this auditor observed the inmate’s showers on their housing units, there were half-walls to separate inmates from other showering inmates. The front of the showers had half-size cloth shower curtains to provide privacy from inmates on the dayroom floor and staff viewing from the Control Room. This seemed to be sufficient privacy, without sacrificing security.

This auditor recommended a refresher training of all institutional security staff. Furthermore, this auditor recommended that one of the focuses of the training cover opposite gender staff announcing when entering male housing units, cross-gender searches, and transgender searches.

During DCRPR Ponce 1000’s Corrective Action period, Ponce 1000 submitted verification of staff refresher training on PREA Standards, preventing, and responding to incidents of sexual abuse/harassment, as well as opposite gender announcements when entering male housing units (all male facility), cross-gender pat searches, and transgender searches. Ponce 1000 submitted refresher orientation/trainings with sign-in sheets (dated 1/20/22 and 3/15/22) as evidence of conducting comprehensive staff training to their institutional staff. These training dates entailed trainings to their Civil Personnel, Corrections Officers, and Education staff on cross-gender and transgender pat searching. Finally, Ponce 1000 demonstrated a consistency in practice for this auditor to conclude compliance.

This PREA auditor concludes that Ponce 1000 is in compliance with PREA Standard 115.15.

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

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

This PREA Auditor reviewed DCR-PR Ponce 1000 Correctional Institution’s pre-audit documents submitted via electronic source, conducted on-site interviews, as well as on-site observations to determine compliance for PREA Standard 115.16. This PREA Auditor reviewed DCR-PR’s electronically submitted “Policy to Prevent, Detect, Report, and Respond to Sexual Violence in Correctional Institutions” (Guidance and Education for Members of the Correctional Population-Page 17) which stated, *“Members of the correctional population will receive guidance on the Agency’s policy of zero tolerance for sexual violence and will sign the Certification of Orientation form on the PREA Law (Annex A), certifying that they understood the educational material. During the admission process, the members of the newly admitted correctional population will be guided on the zero-tolerance policy of the Agency, through written material, video and poster publication in visible places. All information will be provided in English and Spanish. The orientation video will also have a sign language interpreter.”*

Additionally, during this PREA Auditor’s interviews with 22 staff and 21 inmates, all staff and inmates identified that there is an interpretation service hotline provided for limited-Spanish speaking inmates. Ponce 1000 also submitted DCR-PR’s contractual agreement and scope of services with *ASL Interpretation Services-Latino*, who provides interpretation services to all DCR-PR institutions.

After this auditor’s review of DCR-PR’s policy, review of consistency in practice, and review of submitted evidence of compliance, DCR-PR Ponce 1000 is in compliance with PREA Standard 115.16.

Standard 115.17 Hiring and promotion decisions

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

This PREA Auditor reviewed DCR-PR Ponce 1000 Correctional Institution’s pre-audit documents submitted via electronic source, conducted on-site interviews, as well as on-site observations to determine compliance for PREA Standard 115.16. This PREA Auditor reviewed DCR-PR’s electronically submitted “Policy to Prevent, Detect, Report, and Respond to Sexual Violence in Correctional Institutions,” which has all the necessary language to be in compliance with PREA Standard 115.17.

This PREA auditor also interviewed Human Resource (HR) Employment Manager (via email). She submitted documentation and evidence of prospective employee’s applications, criminal background checks, annual and 5-year background checks, as well as a roadmap of specific DCR-PR departmental pre-screening duties when considering for hire and promotions.

After this auditor’s review of DCR-PR’s policy, review of documentation and correspondence with Human Resources, and DCR-PR’s consistency in practice, DCR-PR Ponce 1000 is in compliance with PREA Standard 115.17.

Standard 115.18 Upgrades to facilities and technologies

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

This PREA Auditor reviewed documentation submitted by DCR-PR's Ponce 1000 Corrections Institution, which showed a Request for Proposal" solicitation to purchase cameras for Ponce 1000 in (February 11, 2019). Additionally, this auditor observed the limited camera use, with access for viewing from Ponce 1000 Master Control Room and no recording capabilities.

This PREA auditor concludes that Ponce 1000 is in compliance with PREA Standard 115.18.

Standard 115.21 Evidence protocol and forensic medical examinations

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

This PREA Auditor reviewed DCR-PR Ponce 1000 Correctional Institution's pre-audit documents submitted via electronic source, conducted on-site interviews, as well as on-site observations to determine compliance for PREA Standard 115.21. This PREA Auditor reviewed DCR-PR's electronically submitted "Policy to Prevent, Detect, Report, and Respond to Sexual Violence in Correctional Institutions" (Guidance and Education for Members of the Correctional Population-Page 17) which states, "*If the abuse occurs within a period of 72 hours, to collect the physical evidence, the alleged victim and aggressor to be separated and not to take action to destroy any evidence by: not brushing teeth, changing clothing, urinating, defecating, smoking, drinking or eating.*"

Additionally, while conducting the on-site audit, this Auditor was able interview DCR-PR's Medical Emergency Services contractor ("Physicians Correctional Group") Ponce Site Supervisor, who shared their Sexual Assault and Forensic Examinations Protocol. Additionally, this PREA Audit interviewed 16 security staff and supervisory-level security staff at Ponce 1000. Each staff a had the same or similar response, when asked about the institution's protocol on obtaining and preserving using evidence when a sexual abuse is alleged. Each knew to separate individuals involved, close off the space, contact supervisory staff, don't allow involved inmates to shower or toilet or change clothing, and write their 1st Responders Report.

This PREA auditor concludes that Ponce 1000 is in compliance with PREA Standard 115.21.

Standard 115.22 Policies to ensure referrals of allegations for investigations

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

relevant review period)

- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

This PREA Auditor reviewed DCR-PR Ponce 1000 Correctional Institution’s pre-audit documents submitted via electronic source, conducted on-site interviews, as well as on-site observations to determine compliance for PREA Standard 115.22. DCR-PR Ponce 1000 also submitted their DCR-PR “Policy to Prevent, Detect, Report, and Respond to Sexual Violence in Correctional Institutions (Section XIV-Page 27) as evidence of compliance with PREA Standard 115.22 which states, “*All sexual violence complaints and allegations, including those referred by third parties and anonymous, will be subject to administrative investigation. The same will be carried out in an objective, exhaustive manner and within a term of forty-five (45) calendar days. The Office of Investigation of the Correctional System (OISC), will carry out the investigations of the incidents of sexual violence that occurred in the correctional facilities. The investigation process that is detailed in this Regulation, will not be in conflict with the Guide of Norms and Procedure for the Investigations of the OISC, nor with the norm 13.1.2 of the Manual of Norms, Policies and Procedures of the Bureau of Youth Institutions.*”

Additionally, this PREA auditor verified through documentation and an interview the DCR-PR’s PREA Coordinator and PREA Investigation Team that all DCR-PR institutional sexual abuse investigations are assigned to O.I.S.C. (Office of Investigations of Systems Corrections). DCR-PR institution’s investigators team collaboratively works with OICS to gather and evidentiary information to determine conclusion of the sexual abuse allegation.

This PREA auditor concludes that Ponce 1000 is in compliance with PREA Standard 115.22.

Standard 115.31 Employee training

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

This PREA Auditor reviewed DCR-PR Ponce 1000 Correctional Institution’s pre-audit documents submitted via electronic source, conducted on-site interviews, as well as on-site observations to determine compliance for PREA Standard 115.31. DCR-PR Ponce 1000 Correctional Institution also submitted the DCR-PR “Policy to Prevent, Detect, Report, and Respond to Sexual Violence in Correctional Institutions (Page 16-18) as evidence of compliance with PREA Standard 115.31 which states, “*All officials who have direct contact with members of the correctional population will be trained on the policy of zero tolerance for sexual violence. Officials must comply with their responsibilities as established by PREA. Subsequently, the training will be offered every two (2) years. The training of the officials will consist of and will include the following:*

1. *Responsibilities and role of personnel in the prevention, detection, report and response procedure of the Agency.*
2. *The right of members of the correctional population to be free from sexual violence.*
3. *The right of members of the correctional population and officials to be free from retaliation for reporting allegations or incidents of sexual violence.*
4. *Dynamics of sexual violence in confinement and the most common reactions of victims of sexual violence.*
5. *Professional behavior and methods of effective communication with members of the correctional population, including individuals from the LGBTIN community, with some type of impairment by language or race.*
6. *How to avoid inappropriate relationships with members of the correctional population.*
7. *Comply with related laws to report incidents of sexual violence to outside authorities and appropriate ways to respond.*

Through educational material in the form of booklets, pamphlets, signs and videos, it will be published on the official website of the Department of Correction and Rehabilitation, for use as PREA reference. The training must be signed to be documented by officials, volunteers or contractors, which will show if there was comprehension of the information they received. The security personnel will receive training in how to perform the searches and records to the members of the correctional population and transgressors of the opposite gender. The registries to members of the correctional population, transgender and intersex transgressors, will be made in the least invasive way possible, respectful and professionally.”

Ponce 1000’s policy aligns with PREA Standard 115.31. Additionally, this PREA auditor verified through reviewing the submitted sign-in sheets of the random 16 security/security supervisory staff interviewed that “Refresher Training” has occurred within the last 12 months (Most recently May 2021). Ponce 1000 also submitted evidence of all their staff being trained within the past 2 years and a copy of their Power Point training slides to verify training material and content.

Though Ponce 1000 Correctional Institution had “Refresher Trainings” as recent as May 2021, less than 40% of the staff interviewed could fully share staff protocols and processes when an inmate reports a PREA-related incident, as well as avenues an inmate can report a PREA incident within the institution. After further exploring, through random staff interviews, this auditor received information that the “Refresher Training” was reading PREA-related information in a binder then sign off on an “acknowledgement form.” This training process disallowed staff to ask clarifying questions and receive feedback. This practice showed in the 16 staff interviews.

This auditor recommended that Ponce 1000 conduct an institution wide comprehensive PREA Training, where staff can ask questions to a facilitator and receive feedback. This auditor also recommended staff practice scenario-based spot and refresher trainings to keep PREA knowledge fresh for staff. Finally, this auditor recommended Ponce 1000 demonstrate a consistency in practice before compliance can be concluded.

During DCRPR Ponce 1000’s Corrective Action period, Ponce 1000 submitted verification of staff receiving comprehensive refresher training on PREA Standards, preventing, and responding to incidents of sexual abuse/harassment. Ponce 1000 submitted refresher orientation/trainings with sign-in sheets (1/20/22, 2/16/22, and 4/25/22) as evidence of conducting comprehensive staff training to their institutional staff. These training dates entailed trainings to their Civil Personnel, Corrections Officers, and Education staff.

This PREA auditor concludes that Ponce 1000 is in compliance with PREA Standard 115.31.

Standard 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

This PREA Auditor reviewed DCR-PR Ponce 1000 Correctional Institution’s pre-audit documents submitted via electronic source, conducted on-site interviews, as well as on-site observations to determine compliance for PREA Standard 115.32. DCR-PR Ponce 1000 Correctional Institution also submitted the DCR-PR “Policy to Prevent, Detect, Report, and Respond to Sexual Violence in Correctional Institutions (Page 27) as evidence of compliance with PREA Standard 115.32 which states, *“The agency shall ensure that all volunteers and contractors who come into contact with the confined have been trained as to their responsibility for the agency’s policies and procedures to be followed for the prevention, discovery, and response to sexual abuse and harassment.*

(b) The level and type of training provided to volunteers and contractors is to be governed by the services they provide and the contact they have with confined persons, but all those who come into contact with inmates will receive notice of the zero-tolerance policy regarding sexual abuse and harassment and guidance on how to report such incidents.

(c) The agency shall retain documentation confirming that volunteers and contractors understand the training received.

This auditor received PREA training verification (“PREA Situational Awareness” training certificate of training in October 20, 2020) from the 2 contracted kitchen staff who were randomly interviewed. Additionally, when this auditor interviewed the 2 Ponce 1000 volunteers, they demonstrated adequate knowledge of their role when an inmate reports a PREA-related incident to them.

This PREA auditor concludes that Ponce 1000 is in compliance with PREA Standard 115.32.

Standard 115.33 Inmate education

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

This PREA Auditor reviewed DCR-PR PREA 1000 Correctional Institution’s pre-audit documents submitted via electronic source, conducted on-site interviews, as well as on-site observations to determine compliance for PREA Standard 115.33. DCR-PR Ponce 1000 Correctional Institution also submitted the DCR-PR “Policy to Prevent, Detect, Report, and Respond to Sexual Violence in Correctional Institutions (Page 27) as evidence of compliance with PREA Standard 115.33 which states, “Upon entering, each confined will receive information explaining the agency’s zero-tolerance policy regarding sexual abuse and harassment and how to report incidents or suspicions that they occur.

(b) Within 30 days of admission, the agency shall provide confined persons with comprehensive in-person or video education regarding their rights not to be abused, sexually harassed or retaliated against for reporting such incidents and the policies and procedures in place to respond to such incidents.

(c) current inmates who have not received such an education will receive instruction within one year from the date the PREA standards came into effect and upon transfer to another institution, to the extent that the policies and procedures of the receiving institution are different from those of the previous one.

d) The agency will provide education to those confined in formats accessible to all, including those with limitations in the Spanish language, who are deaf, see poorly or have any other disability and also those who have limited reading skills.

(e) The agency shall keep documentation confirming that the confined participated in the educational sessions.

(f) In addition to providing such instruction, the agency shall ensure that the most important information is continuously visible and available to the confined using posters, manuals and other writings.

Ponce 1000 Correctional Institution’s policy is aligned with PREA Standard 115.33. However, while on site, this auditor could not conclude that Ponce 1000 Social Workers (who’s responsible for PREA Orientation at Intake) were providing uniformed PREA Orientation information to all entering inmates. Though there were sign off sheets in the inmates file, this auditor asked each social worker what PREA information is provided? Each of the 4 Social Workers interviewed shared different PREA Information. Additionally, 80% of the 21 randomly selected interviewed inmates reported that they did not receive the PREA Orientation Pamphlet that the Social Workers claimed they give to each inmate during PREA Orientation at intake.

Finally, there was no evidence that “Inmate Education was occurring within 30-days of each inmate’s intake. The 22 total interviewed staff, (PREA Compliance Manager, and Superintendent in the number of interviewed staff) verified that this was not occurring. This inconsistency in the PREA Orientation process and the PREA Comprehensive Inmate Education being non-existent, was confirmed during the interviews of 21 inmates. Zero inmates reported that they receive comprehensive PREA Education within 30 days of their arrival. Less the 40% could share to this auditor how PREA related to them, their rights to be free from sexual assault/harassment, and various reporting avenues.

This auditor recommended that Ponce 1000 Social Workers develop a uniformed PREA Orientation procedure and a uniformed PREA information for delivery to each inmate. Additionally, this auditor recommended that each inmate receives a DCR-PR “PREA Sexual Assault Awareness Brochure” upon exiting the PREA Orientation with the Social Worker at intake. This auditor also recommended that Ponce 1000 conduct an institution-wide Comprehensive Inmate PREA Education (received a PREA Comprehensive Inmate Education video from PREA Coordinator on 5/10/21), where inmates can participate, ask questions, and receive feedback from facilitators. Finally, this auditor recommended Ponce 1000 demonstrate a consistency in practice over a period before compliance can be concluded.

During DCRPR Ponce 1000's Corrective Action period, Ponce 1000 submitted sign in sheets as evidence of all inmates receiving "PREA Video Education." While on site, this video was just being circulated to all DCRPR adult facilities, and this auditor initially could not deem compliance, due to this PREA Video just being circulated. Now all Ponce 1000 inmates are required to view DCRPR's PREA video, as a part of their Comprehensive Inmate Education. Additionally, 7 randomly selected inmate intake files (Annex A) were received as evidence of consistently conducting uniformed PREA Orientation at intake. Finally, Ponce 1000 has shown evidence of giving each inmate the DCRPR "PREA Sexual Assault Awareness Brochure" and making them available where inmates can have access. Finally, Ponce 1000 has demonstrated a consistency in practice for this auditor to conclude compliance.

This PREA auditor concludes that Ponce 1000 is in compliance with PREA Standard 115.33.

Standard 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

This PREA Auditor reviewed DCR-PR Ponce 1000 Correctional Institution's pre-audit documents submitted via electronic source, conducted on-site interviews, as well as on-site observations to determine compliance for PREA Standard 115.34. DCR-PR Ponce 1000 Correctional Institution also submitted the DCR-PR "Policy to Prevent, Detect, Report, and Respond to Sexual Violence in Correctional Institutions (Pages 28-29) as evidence of compliance with PREA Standard 115.34 which states, "In addition to the general training provided to all employees pursuant to § 115.31, the agency shall ensure that to the extent that the agency itself investigates sexual abuse, that its investigators are trained in conducting such investigations in the prison setting.

(b) Specialized training will include techniques for interviewing victims of sexual abuse, the proper use of Miranda and Garrity warnings, the collection of evidence of sexual abuse in the prison setting, and the criteria and evidence required to prove cases leading to administrative action or referral for prosecution.

(c) The agency will retain documentation confirming that its investigators have completed specialized training to conduct sexual abuse investigations.

(d) Any state entity or component of the U.S. Department of Justice that investigates sexual abuse in the prison setting shall provide such training to its agents and investigators conducting such investigations.

This PREA auditor also verified through onsite interviews with DCR-PR's Office of Investigation for Systems Correctional (OISC) representative. OISC carries out the investigations of all incidents of sexual violence for DCR-PR facilities. While interviewing DCR-PR's OISC representative, this auditor was also able to view OISC training records, specialized training curriculum, review DCR-PR's Coordinated Response (which involves OISC) and verified that specialized trainings were current and aligned with DCR-PR's policy and PREA Standard 115.34.

This PREA auditor concludes that Ponce 1000 is in compliance with PREA Standard 115.34.

Standard 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

This PREA Auditor reviewed DCR-PR Ponce 1000 Correctional Institution’s pre-audit documents submitted via electronic source, conducted on-site interviews, as well as on-site observations to determine compliance for PREA Standard 115.35. DCR-PR Ponce 1000 Correctional Institution also submitted the DCR-PR “Policy to Prevent, Detect, Report, and Respond to Sexual Violence in Correctional Institutions (Pages 29-30) as evidence of compliance with PREA Standard 115.35 which states, “(a) *The agency shall ensure that all full-time and part-time medical and mental health personnel have received training:*

- (1) *that allows them to detect and evaluate signs of sexual abuse;*
- (2) *how to preserve physical evidence of sexual abuse;*
- (3) *how to respond effectively and professionally to victims of sexual abuse and harassment; and*
- (4) *How and to whom to report allegations or suspicions of sexual abuse and harassment.*

(b) *If the agency's medical personnel conduct forensic examinations, such employees will receive appropriate training to perform such examinations.*

(c) *The agency shall retain documentation confirming that medical and mental health professionals have received the training required by this standard, whether at the agency or otherwise.*

(d) *Medical and mental health professionals will also receive training required for employees under § 115.31 or for contractors and volunteers under § 115.32, depending on the professional's status with the agency.*

Additionally, this PREA auditor conducted onsite interviews with DCR-PR Ponce 1000 Correctional Institution’s contracted Emergency Medical Services Provider (Physicians Correctional Group) who verified documented medical staff trainings. Moreover, the Emergency Medical Services Director was able to clearly demonstrate the medical procedures taken when an allegation of sexual abuse occurs. Physicians Correctional Group Director shared that any inmate requiring medical care beyond the scope of *Physicians Correctional Group*, is transported to either Menonita Hospital, Guayama or Centro Medical in San Juan, Puerto Rico. Menonita Hospital and Centro Medico’s Certified SANE Nurses conducts any forensic sexual assault medical exams.

Finally, while interviewing DCR-PR’s Emergency Medical Services Director, this auditor was also able to view staff training records, specialized training curriculum used, review DCR-PR’s Coordinated Response (which heavily involves Medical Coordination) and verified that specialized trainings were current and aligned with DCR-PR’s policy and PREA Standard 115.35.

This PREA auditor concludes that Ponce 1000 is in compliance with PREA Standard 115.35.

Standard 115.41 Screening for risk of victimization and abusiveness

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

This PREA Auditor reviewed DCR-PR Ponce 1000 Correctional Institution’s pre-audit documents submitted via electronic source, conducted on-site interviews, as well as on-site observations to determine compliance for PREA Standard 115.41. DCR-PR Ponce 1000 Correctional Institution also submitted the DCR-PR “Policy to Prevent, Detect, Report, and Respond to Sexual Violence in Correctional Institutions (Section X1; Pages 18-19) as evidence of compliance with PREA Standard 115.41 which states, “*All members of the correctional population will be evaluated by a Correctional Social Worker to determine the risk of being a victim of sexual violence by other members of the correctional population, and / or to determine the risk of being a sexual aggressor of other members of the population. correctional. The process must be completed within a period of seventy-two (72) hours, from the entry into prison of the member of the correctional population. For this procedure, the instrument entitled: Form to Detect Risk of Sexual Violence will be used*

(Annex B). If necessary, the information obtained will be shared with the Medical Services Area. This ensures that members of the correctional population are properly evaluated and identified, for their safety and provide the necessary support services. The health provider will establish its own procedure protocol. Prior to placing members of the correctional population together in a detention cell, staff should consider whether, based on the information and findings, a member of the correctional population may be at high risk of being a victim of sexual violence and, if it were the case, adopt the necessary measures to mitigate any danger to the member of the correctional population. The PREA Compliance Manager must be informed in case of having to segregate it. The interview for the custody classification will include, but not be limited to, the following factors: physical characteristics (conditions and appearance), age, previous assignment in specialized facilities, crime, criminal record and concerns expressed by the member of the correctional population. No member of the correctional population will be sanctioned for refusing to provide information or answer questions.”

DCR-PR Ponce 1000’s policy is aligned with PREA Standard 115.41. Additionally, this PREA auditor verified through review of 12 random inmate social files and interviews with four DCR-PR Ponce 1000 Social Workers. This auditor found that Ponce 1000 consistently use an objective *Screening for Risk of Sexual Victimization and Abusiveness* tool (Annex B). This auditor also verified that the (Annex B) screening tool contained all the components as identified in PREA Standard 115.41. Additionally, during this PREA Auditor’s review of 12 random inmate social files, this auditor verified that each file had an (Annex B) risk assessment in it and completed in its entirety. Though Ponce 1000’s (Annex B) risk screening tools are being completed in its entirety by social workers, there was no documentation that showed inmates who were assessed to be either “potential victims” or “potential offenders” being referred to mental health for a follow-up within 14-days. Four out of the 12 randomly reviewed inmate files risk screening tools (Annex B) assessed the inmates as victim or offender. However, 0 had a recommendation to mental health follow-up of verification of a corresponding follow-up documented in the mental health/medical files.

This auditor recommended that Ponce 1000 Social Workers receive refresher training on the purpose of the Annex B, how to complete the Annex B, and the importance of inmates assessed as “victims” or “offenders” being recommended and receiving a follow-up with mental health/medical practitioner. Finally, this auditor recommended that Ponce 1000 social workers and mental health/medical team demonstrate a consistency in practice over a period before compliance can be concluded.

During DCRPR Ponce 1000’s Corrective Action period, Ponce 1000’s Social Worker Supervisor submitted a certified letter (dated 7/23/2021) to this auditor, as evidence of conducting re-training to all Ponce 1000 social workers on the purpose and how the properly complete the (Annex B) PREA risk assessment. Ponce 1000 also submitted a refresher training completion sign-in sheet for all Social Workers. The refresher training was facilitated by Ponce 1000’s PREA Compliance Manager on 3/18/22. Additionally, Ponce 1000 submitted 8 randomly selected inmate intake files (from dates ranging from 6/2021- 2/2022) as evidence of consistently completing (Annex B) PREA risk assessments in its entirety, specifically the recommendation section. Finally, Ponce 1000 has demonstrated a consistency in practice for this auditor to conclude compliance.

This PREA auditor concludes that Ponce 1000 is not in compliance with PREA Standard 115.41.

Standard 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

This PREA Auditor reviewed DCR-PR Ponce 1000 Correctional Institution’s pre-audit documents submitted via electronic source, conducted on-site interviews, as well as on-site observations to determine compliance for PREA Standard 115.42. DCR-PR Ponce 1000 Correctional Institution also submitted the DCR-PR “Policy to Prevent, Detect, Report, and Respond to Sexual Violence in Correctional Institutions (Section X1-A; Pages 20-21) as evidence of compliance with PREA Standard 115.42 which states, “*After having evaluated all housing alternatives and demonstrating that there are no other means of protection for the member of the victim correctional population, segregation will be used as location. The member of the correctional population must have every possibility of access to programs and services for which he is eligible. The Correctional Social Workers must document every twenty-four (24) hours the reasons why the member of the correctional population will continue in the area of protective custody and certify the services provided. This process must*

not exceed thirty (30) days.

If the member of the correctional population is part of the LGBTI community, it will be located and offered the programs according to the individual evaluation. These members of the correctional population will not be classified in the housing units, exclusively because of their gender identification, unless there is a unit of this type designed to protect this population.

The Correction Social Workers will evaluate each case, at least two (2) times a year to identify any threat to their safety that the member of the correctional population has or may have experienced. Members of the LGBTI correctional population will have the same opportunities and access to the programs as others. It will be provided with facilities that allow the inmate to provide the same level of security as the rest of the correctional population.”

Additionally, this PREA auditor verified through review of 12 random inmate social files and interviews with four DCR-PR Ponce 1000 Social Workers that Ponce 1000 consistently use an objective *Screening for Risk of Sexual Victimization and Abusiveness* tool (Annex B). This auditor also verified that the (Annex B) screening tool contained all the components as identified in PREA Standard 115.41. During this auditor’s review of 12 random inmate social files, this auditor verified that each file had an (Annex B) risk assessment in it and completed in its entirety. Each Annex B screening tool had its recommendation section completed and was being used by security to assist in determining housing and programmatic decisions.

This PREA auditor concludes that Ponce 1000 is in compliance with PREA Standard 115.42.

Standard 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

This PREA Auditor reviewed DCR-PR DCR-PR Ponce 1000 Correctional Institution’s pre-audit documents submitted via electronic source, conducted on-site interviews, as well as on-site observations to determine compliance for PREA Standard 115.43. DCR-PR Ponce 1000 Correctional Institution also submitted the DCR-PR “Policy to Prevent, Detect, Report, and Respond to Sexual Violence in Correctional Institutions (Section X1-A; Page 19-20) as evidence of compliance with PREA Standard 115.43 which states, “*After having evaluated all housing alternatives and demonstrating that there are no other means of protection for the member of the victim correctional population, segregation will be used as location. The member of the correctional population must have every possibility of access to programs and services for which he is eligible. The Correctional Social Workers must document every twenty-four (24) hours the reasons why the member of the correctional population will continue in the area of protective custody and certify the services provided. This process must not exceed thirty (30) days.*

If the member of the correctional population is part of the LGBTI community, it will be located and offered the programs according to the individual evaluation. These members of the correctional population will not be classified in the housing units, exclusively because of their gender identification, unless there is a unit of this type designed to protect this population.

The Correction Social Workers will evaluate each case, at least two (2) times a year to identify any threat to their safety that the member of the correctional population has or may have experienced. Members of the LGBTI correctional population will have the same opportunities and access to the programs as others. It will be provided with facilities that allow the inmate to provide the same level of security as the rest of the correctional population.”

This PREA Auditor also interviewed Ponce 1000’s Superintendent and Compliance Manager, and Lieutenant who stated that the use of protective custody is determined by multiple factors, limited, and decisions are made by a committee after exhausting other alternatives. This auditor also viewed the segregation location, which was single celled, single-showered, located on its own housing unit, observable from the Master Control room. This auditor verified the same through onsite interviews with DCR-PR Ponce 1000 Correctional Officers. Each shared that DCR-PR Ponce 1000 Correctional Institution’s limits the use of any segregation and make initial attempts to find alternative housing placement or request for facility relocation. This auditor also interviewed 21 inmates who also verified that they have not been placed in any segregation location because of reporting a PREA-related incident while at Ponce 1000.

This PREA auditor concludes that Ponce 1000 is in compliance with PREA Standard 115.43.

Standard 115.51 Inmate reporting

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

This PREA Auditor reviewed DCR-PR Ponce 1000 Correctional Institution's pre-audit documents submitted via electronic source, conducted on-site interviews, as well as on-site observations to determine compliance for PREA Standard 115.51. DCR-PR Ponce 1000 Correctional Institution also submitted the DCR-PR "Policy to Prevent, Detect, Report, and Respond to Sexual Violence in Correctional Institutions (*Pages 33-34*) as evidence of compliance with PREA Standard 115.51. PREA Standard 115.51 states, "*The agency will provide many internal ways to report sexual abuse and harassment, retaliation by other confined or employees for reporting sexual abuse and harassment, and neglect or dereliction of duty by staff who may have contributed to such incidents.*

(b) In addition, the agency will provide at least one way for confined individuals to report abuse and harassment to a public, private, or non-agency office, which may immediately receive and forward reports from confined individuals regarding sexual abuse and harassment to agency officials, allowing the confined person to remain anonymous upon request. Inmates detained solely for immigration reasons will receive contact information from relevant consular officials and also others from the Department of Homeland Security.

(c) Staff shall receive oral, written, anonymous and third-party reports and document oral reports promptly.

(d) The agency will provide a method for staff to report in private about sexual abuse and harassment to inmates.

DCR-PR Ponce 1000 Correctional Institution's policy does align with PREA Standard 115.51. However, during inmate interviews, 90% of inmates did not know more than 2 ways to report a PREA-related incident (if needed to do so). Most of the 21 interviewed inmate immediately deferred to notifying an officer. Though an officer is an expected viable reporting source, PREA Standard states that there should be "multiple" reporting avenues. 2 out of 21 inmates knew about third-party reporting avenues. Only 3 out of 21 knew that their housing unit phone can be used to call a toll-free PREA hotline.

Additionally, while onsite, this PREA Auditor observed and verified through inmates and through trial that inmates were limited in their ability to use the telephone on their housing units to report PREA-related incidents. When this auditor called the PREA Hotline, the operator informed this auditor that the hours of this hotline service is 8:00am-4:30pm Monday through Friday. Finally, this auditor identified/verified during inmate, security staff, and social worker interviews that "Inmate Comprehensive PREA Education" was not occurring within 30-days of inmate arrivals. This lack of inmate education was evident through inmates having very little knowledge of PREA reporting avenues to report sexual abuse/harassment incidents.

This PREA Auditor recommended that DCR-PR properly "orient" inmates at intake and "comprehensively educate" inmates within 30 days of their arrival, to ensure each inmate know their rights to be free from sexual abuse/harassment and how they can report a PREA-related incident. Additionally, this auditor recommended that DCR-PR Ponce 1000 Correctional Institution ensure that each phone on housing unit is in working order -OR- find another clearly defined avenue for inmates to privately to report a PREA incident to a public or private entity that is not a part of the agency (phone number is posted next to phone). Finally, this auditor recommended Ponce 1000 demonstrate a consistency in practice over a period before compliance can be concluded.

During DCRPR Ponce 1000's Corrective Action period, Ponce 1000 submitted sign in sheets as evidence of all inmates receiving "PREA Video Education." Ponce 1000 also sent various pictures of inmates viewing the video and Post Video Q & A sessions. While on site, this video was just being circulated to all DCRPR adult facilities, and this auditor initially could not deem compliance, due to this PREA Video just being circulated. Now all Ponce 1000 inmates are required to view DCRPR's PREA video, as a part of Comprehensive Inmate Education. Finally, Ponce 1000 has shown evidence of giving each inmate the DCRPR "PREA Sexual Assault Awareness Brochure" and making them available where inmates can have access. Ponce 1000 has now shown a photos and certification that at least 2-3 working phones on each housing unit to provide access to the PREA Hotline. Also, Ponce 1000 has "Administrative Remedy" boxes near each

housing unit to provide access to reporting PREA. There are instructions next to each available phone and administrative remedy box. Finally, Ponce 1000 has demonstrated a consistency in practice for this auditor to conclude compliance.

This PREA auditor concludes that DCR-PR Ponce 1000 Correctional Institution is in compliance with PREA Standard 115.51.

Standard 115.52 Exhaustion of administrative remedies

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

This PREA Auditor reviewed DCR-PR Ponce 1000 Correctional Institution's pre-audit documents submitted via electronic source, conducted on-site interviews, as well as on-site observations to determine compliance for PREA Standard 115.51. DCR-PR Guayama 1000 Correctional Institution also submitted the DCR-PR "Policy to Prevent, Detect, Report, and Respond to Sexual Violence in Correctional Institutions" and DCR-PR's "Regulation to Manage the Request for Administrative Remedies Filed by Inmates" as evidence of compliance with PREA Standard 115.52. Both contains language to be in compliant with PREA Standard 115.52.

Additionally, while onsite this auditor observed and was explained the administrative remedy (grievance) process. This PREA auditor also interviewed the Security Supervisory staff, PREA Compliance Manager, the Superintendent, and 21 inmates. There was a consensus that "Administrative Remedy" procedures are followed when inmates file grievances for sexual abuse. Each understood DCR-PR's administrative procedures to address inmate grievances regarding sexual abuse or sexual harassment. Additionally, each understood that there is no time limit on grievances regarding sexual abuse or sexual harassment. Finally, Ponce 1000 submitted their investigation initiation form (Annex C form), that if an investigated "Administrative Remedy" (grievance) turns out to be an actual PREA Incident.

This PREA Auditor also interviewed 21 inmates and asked about Ponce 1000's Administrative Remedy (grievance) procedure. Each inmate was able to clearly share their ability to submit administrative grievances, and social workers who reviews grievance are very responsive to "Administrative Remedies."

This PREA auditor concludes that Ponce 1000 is in compliance with PREA Standard 115.52.

Standard 115.53 Inmate access to outside confidential support services

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

This PREA Auditor reviewed DCR-PR Ponce 1000 Correctional Institution's pre-audit documents submitted via electronic source, conducted on-site interviews, as well as on-site observations to determine compliance for PREA Standard 115.51. DCR-PR Ponce 1000 Correctional Institution also submitted the DCR-PR "Policy to Prevent, Detect, Report, and Respond to Sexual Violence in Correctional

Institutions,” which states, “The institution shall provide confined and confined access to victims' advocates outside the institution to receive emotional support services related to sexual abuse by providing inmates with postal addresses and telephone numbers, including toll-free numbers and hotline numbers, if available, to call local, state or national organizations that work on defense of rape victims and serve people in crises caused by rape; also to people detained only for immigration purposes. The institution will facilitate communication, within reason, between confined and these organizations and agencies while safeguarding confidentiality in the best possible way.

(b) The institution shall inform the inmates, prior to providing them with access, that such communications will be monitored and the extent to which the reports of abuse will be forwarded to the authorities, in accordance with the laws that require them to report.

(c) The agency will hold or attempt to enter into memoranda of understanding or other agreements with community service providers that may offer inmates emotional support regarding sexual abuse. The agency shall keep copies of the agreements or other documentation demonstrating attempts to enter into such agreements.

Though DCR-PR Ponce 1000 Correctional Institution’s policy is aligned with PREA Standard 115.53, 21 of 21 interviewed inmates could not identify if Ponce 1000 provided access to outside support services for inmates who reported sexual abuse. Though all of the visual posters within each housing unit identifies the “Office of Women’s Procurement” and their telephone number, as the collaborative external support for inmates, 0 inmates knew of them. This auditor also interviewed various staff in multiple roles. None could identify this outside support service in which Ponce 1000 has a Memorandum of Understanding.

This auditor directly attributes this lack of inmate and staff knowledge to the lack of comprehensive staff training and lack of comprehensive inmate education (30 day maximum from an inmate’s arrival). This auditor recommends that Ponce1000 conduct an institution-wide comprehensive staff training, sharing PREA’s history, its purpose, inmate rights, appropriate/safe interactions, their roles as it relates to PREA, coordinated response, evidence preservations, PREA and LGBTI inmates, etc.

This auditor recommended that Ponce 1000 develop a process to ensure all inmates are receiving comprehensive PREA Education within 30-days of inmate arrival to the institution. This auditor also recommended that Ponce 1000 conduct an institution-wide inmate education to ensure that all inmates are receiving the same PREA education regarding PREA’s purpose, their rights to be free from sexual abuse/harassment, and inmate’s access to outside support services. Finally, this auditor recommended Ponce 1000 demonstrate a consistency in practice over a period before compliance can be concluded.

During DCRPR Ponce 1000’s Corrective Action period, Ponce 1000 submitted a certification letter from DCRPR Ponce 1000’s Compliance Manager and Superintendent (3/2/22) that all current inmates received Comprehensive PREA Education. Photos and sign in sheets were also submitted, showing that staff employed, and contract staff received Comprehensive PREA Re-Training by Ponce 1000’s PREA Compliance Manager (to fully understand PREA, its purpose, zero tolerance, inmate rights under PREA, prevention strategies, inmates reporting access, and Ponce 1000’s coordinate response duties). Ponce 1000 submitted their comprehensive staff training curriculum. Ponce 1000 also sent verification that all inmates residing have been required to view DCRPR’s PREA Education video, as a part of their “Comprehensive Inmate Education” (between 10/2021 and 3/2022). Ponce 1000 has demonstrated a consistency in practice for this auditor to conclude compliance.

This PREA auditor concludes that DCR-PR Ponce 1000 Correctional Institution is in compliance with PREA Standard 115.53.

Standard 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

This PREA Auditor reviewed DCR-PR Ponce 1000 Correctional Institution’s pre-audit documents submitted via electronic source, conducted on-site interviews, as well as on-site observations to determine compliance for PREA Standard 115.54. DCR-PR Ponce 1000 Correctional Institution also submitted the DCR-PR “Policy to Prevent, Detect, Report, and Respond to Sexual Violence in Correctional Institutions,” which states, “DCRPR has implemented a variety of incident reporting forms to ensure inmate accessibility.

1. Administrative Remedies,
2. Confidential line 787-332-7732,
3. Call from the same module by dialing * 7732
4. Complaints by third parties (example: a relative)
5. Call the confidential line of the Office of the Women's Procurator (OPM) at 787-722-2977
6. Call the Confidential Violation Victim Assistance Center (CAVV) line at 787-765-2285 or 1-800-981-5721
7. Through the Internet, accessing the DCRPR page by entering the PREA link; enabled on computers located in the library of the correctional facilities.
8. Available to the general public through the website of the Department of Correction and Rehabilitation.
9. By notification by officials
10. In written form, understand letter
11. Anonymously

Third parties, including other inmates, employees, family members, lawyers and out-of-prison defenders, are allowed to help inmates fill out administrative remedies for allegations of sexual abuse and file them on behalf of the inmates.

- a. If a third party submits such request in the name of an inmate, the institution may make it a condition to give way that the alleged victim agrees that it is presented in his name and also that the alleged victim personally follow up at any subsequent step in the process of seeking administrative remedy.
- b. If the inmate refuses the help of a third party to fill out the complaint form, The DCRPR will document such decision.”

Though DCRPR Ponce 1000’s policy aligns with PREA Standard 115.54, during inmate interviews, more than 60% of the inmates did not know that a third party could report sexual abuse or sexual harassment on their behalf. When this auditor asked the 21 interviewed inmates about reporting avenues, most inmates could only share 1 avenue (“tell an officer”). Due to inmates not receiving Comprehensive PREA Education within 30 days of their arrival, inmates are not attaining the knowledge or their third-party reporting rights and the procedures.

This auditor recommended that Ponce 1000 develop a process to ensure all inmates are receiving comprehensive PREA Education within 30-days of the inmate arrival to the institution. Ponce 1000 should also conduct an institution-wide inmate education to ensure that all inmates are receiving the same PREA education regarding PREA’s purpose, their rights to be free from sexual abuse/harassment, reporting avenues (including 3rd Party Reporting). Finally, this auditor recommended Ponce 1000 demonstrate a consistency in practice over a period before compliance can be concluded.

During DCRPR Ponce 1000’s Corrective Action period, Ponce 1000 submitted a certification letter from DCRPR Ponce 1000’s Compliance Manager and Superintendent (3/2/22) that all current inmates received Comprehensive PREA Education. Photos and sign in sheets were also submitted, showing that staff employed, and contract staff received Comprehensive PREA Re-Training by Ponce 1000’s PREA Compliance Manager (to fully understand PREA, its purpose, zero tolerance, inmate rights under PREA, prevention strategies, inmates reporting access, and Ponce 1000’s coordinate response duties). Ponce 1000 submitted their comprehensive staff training curriculum. Ponce 1000 also sent verification that all inmates residing have been required to view DCRPR’s PREA Education video, as a part of their “Comprehensive Inmate Education” (between 10/2021 and 3/2022). Ponce 1000 has demonstrated a consistency in practice for this auditor to conclude compliance.

This PREA auditor concludes that DCR-PR Ponce 1000 Correctional Institution is in compliance with PREA Standard 115.54.

Standard 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

This PREA Auditor reviewed DCR-PR’s Ponce 1000 Correctional Institution’s pre-audit documents submitted via electronic source, conducted on-site interviews, as well as on-site observations to determine compliance for PREA Standard 115.61. DCR-PR Ponce 1000 also submitted the DCR-PR “Policy to Prevent, Detect, Report, and Respond to Sexual Violence in Correctional Institutions (Section XIII; Pages 22-23) as evidence of compliance with PREA Standard 115.61 which states, “Any official or person who comes in knowledge of any allegation or incident of sexual violence will become the Primary Response Person. Once it comes to knowledge and following the chain of command, the following necessary actions will be taken: Report Protocol and Intervention in Incident of Sexual Violence. (See Annex G)

1. *Protect the victim and preserve the evidence. Keep the area restricted and under continuous observation. The incident of sexual violence must be reported immediately and secure the crime scene until adequate measures can be taken to obtain any evidence. In addition, the victim will be asked if he retains any evidence of sexual assault (dirty bedding, clothing, etc.). All evidence will remain in its original state.*
2. *Notify the Commander Guard of the shift, following the chain of command (Superintendent, Commander, Lieutenant 1, Lieutenant 2 and Sergeant).*
3. *Complete the PREA Incident Initial Notification she. (See Annex C)*
4. *The victim will be separated from the identified aggressor.*
5. *The company contracted by the Agency to provide health services in the Correctional Institutions will provide medical services to both the victim and the aggressor. All necessary measures will be taken so that qualified personnel in sexual assault (SAFE - Sexual Assault Forensic Examiners / SANE - Sexual Assault Nurse Examiners) provide these services.*
6. *If the abuse occurred within a period of 72 hours, which still allows the collection of physical evidence, ensure that the alleged victim and the aggressor, do not take any action that could destroy physical evidence, including: bathing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking or eating*
7. *The supervisor will notify the incident within twenty-four (24) hours by telephone to the Puerto Rico Police Department.*
8. *The Commander of the Guard will immediately notify the incident to the Superintendent. When the allegation of incident is reported in a juvenile institution, the supervisor will give immediate knowledge to the Institutional Head. In both cases, the PREA Compliance Officer will be notified.*
 - a. *If the incident arises in a protective security institution, it will be transferred to another institution of protective security.*
 - b. *If the transfer cannot be made, the Correctional Social Worker technician must submit a daily follow-up report, documenting and justifying the reasons why it could not be relocated, and the and the services provided. This process must not exceed thirty (30) calendar days.”*

Ponce 1000’s policy aligns with PREA Standard 115.61. However, when this auditor interviewed 22 randomly selected security and civil support staff, more than 90% did not fully know their responsibilities when a PREA-related incident is reported to them and coordinated response. Inmate interviews (21) showed that staff do immediately respond to PREA-related incident reporting. This auditor also reviewed DCR-PR’s Annex C and Annex G forms to determine compliance. Finally, DCR-PR also submitted a copy of their Power Point training slides to verify training material.

This auditor recommended that DCR-PR provide updated Comprehensive Staff refresher training to all staff. From interviews and observations, staff were receiving training packets as their PREA training. Staff were not retaining PREA information through this training/refresher training process. This auditor recommends that this comprehensive staff training should entail a physical staff trainer presenting PREA Training to staff, using their DCRPR Ponce 1000’s approved Powerpoint Presentation curriculum. Also, staff should be able to ask clarifying questions throughout the training. Additionally, this auditor recommended that some refresher trainings should be scenario-based. spot-trainings, and short Q & A refresher trainings during shift meetings. Finally, this auditor recommended Ponce 1000 demonstrate a consistency in practice over a period before compliance can be concluded.

During DCRPR Ponce 1000’s Corrective Action period, Ponce 1000 submitted a certification letter from DCRPR Ponce 1000’s Compliance Manager and Superintendent (3/2/22) that all current staff, volunteers, and contractors received Comprehensive PREA Refresher Training (submitted dates:1/20/22, 2/16/22, 3/15/22). Photos and sign in sheets were also submitted, showing that staff employed, volunteers, and contract staff received Comprehensive PREA Re-Training by Ponce 1000’s PREA Compliance Manager (to fully understand PREA, its purpose, zero tolerance, inmate rights under PREA, prevention strategies, inmates reporting access, and Ponce 1000’s coordinate response duties). Ponce 1000 submitted their comprehensive staff training Powerpoint curriculum. Ponce 1000 also submitted a pocket-sized “PREA Incident Protocol” procedural response card, in which staff carry on their uniform. The goal of this card is a reminder of each step required when an incident of sexual abuse/sexual harassment is reports. Ponce 1000 has demonstrated a consistency in practice for this auditor to conclude compliance.

This PREA auditor concludes that DCR-PR Ponce 1000 Correctional Institution is in compliance with PREA Standard 115.61.

Standard 115.62 Agency protection duties

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

This PREA Auditor reviewed DCR-PR’s Ponce 1000 Correctional Institution’s pre-audit documents submitted via electronic source, conducted on-site interviews, as well as on-site observations to determine compliance for PREA Standard 115.62. DCR-PR Ponce 1000 also submitted the DCR-PR “Policy to Prevent, Detect, Report, and Respond to Sexual Violence in Correctional Institutions (Section VIII; Page 13) as evidence of compliance with PREA Standard 115.62 which states, “*The Agency will take the following actions, aimed at preventing any incident of sexual violence in correctional institutions:*

1. *Once it becomes known that a member of the correctional population is at considerable risk, immediate physical, health and support measures will be established to protect the victim.*
2. *Use a human resource plan that provides the appropriate number of staff and supervision through video surveillance to protect members of the correctional population.*
3. *Keep members of the correctional population separated young adults and members of the adult correctional population.*
4. *Recognize vulnerable people, either because of their sexual gender/orientation, appearance or physical limitation or language. (Refer to Annex B, Form to Detect Risk of Sexual Violence).”*

Additionally, this PREA auditor verified through interviews with correctional staff, medical, volunteers and other support staff that staff PREA reporting duties were aligned with PREA Standard 115.62. Inmate interviews also showed staff’s immediate response to PREA-related incident reporting. This auditor also reviewed DCR-PR’s Annex C and Annex G forms to determine compliance. Finally, DCR-PR also submitted a copy of their Power Point training slides to verify training material.

This PREA auditor concludes that Ponce 1000 is in compliance with PREA Standard 115.62.

Standard 115.63 Reporting to other confinement facilities

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

This PREA Auditor reviewed DCR-PR’s Ponce 1000 Correctional Institution’s pre-audit documents submitted via electronic source, conducted on-site interviews, as well as on-site observations to determine compliance for PREA Standard 115.63. DCR-PR Ponce 1000

also submitted the DCR-PR *Policy to Prevent, Detect, Report, and Respond to Sexual Violence in Correctional Institutions* as evidence of compliance with PREA Standard 115.63 which states, “Upon receiving a report of alleged sexual abuse of an inmate or inmate, housed or housed in another institution, the director of the first shall notify the principal or the relevant office of the second.

1. Such notification shall be made as soon as possible, but no longer than seventy-two (72), after the allegation was received.
2. The DCRPR will document that the notification was submitted.
3. The head of the institution or the DCRPR office where the notification is received must ensure that the claim is investigated according to these standards.

This auditor concludes that DCR-PR’s policy is aligned with PREA Standard 115.63. This auditor also interviewed Ponce 1000’s Superintendent, who shared that any report/knowledge of a PREA-related incident occurring at another institution, the institution’s Superintendent is immediately notified. This was also verified by DCR-PR PREA Coordinator and Regional Compliance Director.

This PREA auditor concludes that DCR-PR Ponce 1000 Correctional Institution is in compliance with PREA Standard 115.63.

Standard 115.64 Staff first responder duties

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

This PREA Auditor reviewed DCR-PR’s Ponce 1000 Correctional Institution’s pre-audit documents submitted via electronic source, conducted on-site interviews, as well as on-site observations to determine compliance for PREA Standard 115.64. DCR-PR Ponce 1000 also submitted the DCR-PR “Policy to Prevent, Detect, Report, and Respond to Sexual Violence in Correctional Institutions (Section XIII; Pages 22-23) as evidence of compliance with PREA Standard 115.64 which states, “Any official or person who comes in knowledge of any allegation or incident of sexual violence will become the Primary Response Person. Once it comes to knowledge and following the chain of command, the following necessary actions will be taken: Report Protocol and Intervention in Incident of Sexual Violence. (See Annex G)

2. Protect the victim and preserve the evidence. Keep the area restricted and under continuous observation. The incident of sexual violence must be reported immediately and secure the crime scene until adequate measures can be taken to obtain any evidence. In addition, the victim will be asked if he retains any evidence of sexual assault (dirty bedding, clothing, etc.). All evidence will remain in its original state.
3. Notify the Commander Guard of the shift, following the chain of command (Superintendent, Commander, Lieutenant 1, Lieutenant 2 and Sergeant).
4. Complete the PREA Incident Initial Notification she. (See Annex C)
5. The victim will be separated from the identified aggressor.
6. The company contracted by the Agency to provide health services in the Correctional Institutions will provide medical services to both the victim and the aggressor. All necessary measures will be taken so that qualified personnel in sexual assault (SAFE - Sexual Assault Forensic Examiners / SANE - Sexual Assault Nurse Examiners) provide these services.
9. If the abuse occurred within a period of 72 hours, which still allows the collection of physical evidence, ensure that the alleged victim and the aggressor, do not take any action that could destroy physical evidence, including: bathing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking or eating
10. The supervisor will notify the incident within twenty-four (24) hours by telephone to the Puerto Rico Police Department.
11. The Commander of the Guard will immediately notify the incident to the Superintendent. When the allegation of incident is reported in a juvenile institution, the supervisor will give immediate knowledge to the Institutional Head. In both cases, the PREA Compliance Officer will be notified.
 - a. If the incident arises in a protective security institution, it will be transferred to another institution of protective security.
 - b. If the transfer cannot be made, the Correctional Social Worker technician must submit a daily follow-up report, documenting and justifying the reasons why it could not be relocated, and the and the services provided. This process must not exceed thirty (30) calendar days.”

Ponce 1000's policy aligns with PREA Standard 115.64. However, when this auditor interviewed 22 randomly selected security and civil support staff, more than 90% did not fully know their responsibilities when a PREA-related incident is reported to them and coordinated response. Inmate interviews (21) showed that staff do immediately respond to PREA-related incident reporting. This auditor also reviewed DCR-PR's Annex C and Annex G forms to determine compliance. Finally, DCR-PR also submitted a copy of their Power Point training slides to verify training material.

This auditor recommended that DCR-PR provide updated Comprehensive Staff refresher training to all staff. From interviews and observations, staff were receiving training packets as their PREA training. Staff were not retaining PREA information through this training/refresher training process. This auditor recommends that this comprehensive staff training should entail a physical staff trainer presenting PREA Training to staff, using their DCRPR Ponce 1000's approved Powerpoint Presentation curriculum. Also, staff should be able to ask clarifying questions throughout the training. Additionally, this auditor recommended that some refresher trainings should be scenario-based, spot-trainings, and short Q & A refresher trainings during shift meetings. Finally, this auditor recommended Ponce 1000 demonstrate a consistency in practice over a period before compliance can be concluded.

During DCRPR Ponce 1000's Corrective Action period, Ponce 1000 submitted a certification letter from DCRPR Ponce 1000's Compliance Manager and Superintendent (3/2/22) that all current staff, volunteers, and contractors received Comprehensive PREA Refresher Training (submitted dates: 1/20/22, 2/16/22, 3/15/22). Photos and sign in sheets were also submitted, showing that staff employed, volunteers, and contract staff received Comprehensive PREA Re-Training by Ponce 1000's PREA Compliance Manager (to fully understand PREA, its purpose, zero tolerance, inmate rights under PREA, prevention strategies, inmates reporting access, and Ponce 1000's coordinate response duties). Ponce 1000 submitted their comprehensive staff training Powerpoint curriculum. Ponce 1000 also submitted a pocket-sized "PREA Incident Protocol" procedural response card, in which staff carry on their uniform. The goal of this card is a reminder of each step required when an incident of sexual abuse/sexual harassment is reports. Ponce 1000 has demonstrated a consistency in practice for this auditor to conclude compliance.

This PREA auditor concludes that DCR-PR Ponce 1000 Correctional Institution is in compliance with PREA Standard 115.64.

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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

This PREA Auditor reviewed DCR-PR's Ponce 1000 Correctional Institution's pre-audit documents submitted via electronic source, conducted on-site interviews, as well as on-site observations to determine compliance for PREA Standard 115.65. DCR-PR Ponce 1000 also submitted the DCR-PR "Policy to Prevent, Detect, Report, and Respond to Sexual Violence in Correctional Institutions (Section XIII; Pages 22) as evidence of compliance with PREA Standard 115.65 which states, "Any official or person who comes in knowledge of any allegation or incident of sexual violence will become the Primary Response Person. Once it comes to knowledge and following the chain of command, the following necessary actions will be taken: "Report Protocol and Intervention in Incident of Sexual Violence" (See Annex G).

Additionally, this PREA auditor verified through interviews with the PREA Coordinator, PREA Compliance Manager, Superintendent, that each level of supervision and security at the institution understands their role and the overall Coordinated Response to a PREA-Related incident. Staff PREA reporting duties and protocol understanding was aligned with PREA Standard 115.65. This auditor also reviewed and received a copy of DCR-PR's Annex G form to determine compliance. The Annex G form is DCR-PR's "Sexual Violence Coordinated Response Protocol (visual roadmap)" for all DCR-PR Institutions. Finally, DCR-PR also submitted a copy of their Power Point training slides to verify training material.

This PREA auditor concludes that Ponce 1000 is in compliance with PREA Standard 115.65.

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

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

This PREA Auditor reviewed DCR-PR’s Ponce 1000 Correctional Institution’s pre-audit documents submitted via electronic source, conducted on-site interviews, as well as on-site observations to determine compliance for PREA Standard 115.64. This PREA auditor interviewed DCR-PR’s PREA Federal Contracts Manager, PREA Coordinator, PREA Compliance Manager, Superintendents, who all stated that their entering into “Collective Bargaining Agreements do not limit DCR-PR Institutions from “the ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted, as stated in PREA Standard 115.66.

According to DCR-PR Contracts Manager, all “Collective Bargaining Agreements” do not impede DCR-PR Institutions from complying with USDOJ PREA Standards. This auditor was able to review DCR-PR’s (2012-2015) “Collective Bargaining Agreements” submitted electronically, in combination with interview with key DCR-PR personnel to verify compliance.

This PREA auditor concludes that Ponce 1000 is in compliance with PREA Standard 115.66.

Standard 115.67 Agency protection against retaliation

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

This PREA Auditor reviewed DCR-PR Ponce 1000 Correctional Institution’s pre-audit documents submitted via electronic source, conducted on-site interviews, as well as on-site observations to determine compliance for PREA Standard 115.67. DCR-PR Ponce 1000 also submitted the DCR-PR “Policy to Prevent, Detect, Report, and Respond to Sexual Violence in Correctional Institutions (Pages 36-37) as evidence of compliance with PREA Standard 115.67 which states, “*The DCRPR will establish the policy to protect from reprisals, by other inmates and/or employees, to inmates and their personnel who report sexual abuse and harassment or collaborate with investigations of sexual abuse and harassment, and designate who of the employees or departments will be responsible for monitoring reprisals.*

2. *The DCRPR will use multiple measures to protect, such as moving housing or transfers of confined victims or abusers, removal of inmates and inmates and employees, alleged to be abusers — that they may come into contact with the victims — and will provide emotional support services for inmates or staff who fear retaliation for reporting abuse and sexual harassment, or for cooperating with investigations.*

3. *For a minimum of ninety (90) days from the report of sexual abuse, the DCRPR will monitor the conduct and treatment of inmates or personnel who have reported sexual abuse and inmates and inmates who reportedly suffered sexual abuse to verify if there have been changes in them that indicate that they have suffered reprisals by other inmates or staff. It will act promptly to remedy the act of reprisal. Factors to be monitored by the DCRPR include any disciplinary act report regarding an inmate, housing or program changes or negative evaluations of staff for their work performance and work reassignment. Surveillance will continue after ninety (90) days if there are indications that surveillance needs to continue. When it comes to confined and confined, surveillance will also include verification of their status.*
4. *If any other individual who has cooperated with an investigation expresses fear of retaliation, the DCRPR will take the necessary measures to protect him.*
5. *The obligation of the DCRPR to monitor will terminate when it determines that an allegation is unfounded.*

Additionally, Ponce 1000 did submit their agency's PREA Follow-Up Report Form (Annex F) as evidence of compliance. While onsite, this auditor also reviewed random files of inmates who's reported PREA-related incidents and who's complaint moved into investigation by DCR-PR's OISC. These forms were in place and used properly, which demonstrated consistency in practice. Finally, DCR-PR submitted their institution-wide staff training curriculum which included the agency's protection against retaliation, as well as staff attendance documentation.

This PREA auditor concludes that Ponce 1000 is in compliance with PREA Standard 115.67.

Standard 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

This PREA Auditor reviewed DCR-PR Ponce 1000 Correctional Institution's pre-audit documents submitted via electronic source, conducted on-site interviews, as well as on-site observations to determine compliance for PREA Standard 115.68. DCR-PR Ponce 1000 also submitted the DCR-PR "Policy to Prevent, Detect, Report, and Respond to Sexual Violence in Correctional Institutions (Section XIII-8A) as evidence of compliance with PREA Standard 115.68 which states, *"If the incident arises in a protective security institution, it will be transferred to another institution of protective security.*

- b. If the transfer cannot be made, the Correctional Social Worker technician must submit a daily follow-up report, documenting and justifying the reasons why it could not be relocated, and the services provided. This process must not exceed thirty (30) calendar days.*

This PREA auditor verified that DCR-PR's "Policy to Prevent, Detect, Report, and Respond to Sexual Violence in Correctional Institutions (Section XIII-8A) which addresses "Post-Allegation Protective Custody" is aligned with their policy (Section X1-A; Page 20-21) which addresses "Protective Custody Protocols for Inmates at high risk for sexual victimization." DCR-PR's policy which aligns with PREA Standard 115.43 (Section X1-A; Page 20-21) states, *"After having evaluated all housing alternatives and demonstrating that there are no other means of protection for the member of the victim correctional population, segregation will be used as location. The member of the correctional population must have every possibility of access to programs and services for which he is eligible. The Correctional Social Workers must document every twenty-four (24) hours the reasons why the member of the correctional population will continue in the area of protective custody and certify the services provided. This process must not exceed thirty (30) days.*

- a. If the member of the correctional population is part of the LGBTI community, it will be located and offered the programs*

according to the individual evaluation. These members of the correctional population will not be classified in the housing units, exclusively because of their gender identification, unless there is a unit of this type designed to protect this population.

- b. *The Correction Social Workers will evaluate each case, at least two (2) times a year to identify any threat to their safety that the member of the correctional population has or may have experienced. Members of the LGBTI correctional population will have the same opportunities and access to the programs as others. It will be provided with facilities that allow the inmate to provide the same level of security as the rest of the correctional population.”*

This PREA Auditor also verified through onsite interviews with DCR-PR Ponce 1000 Correctional Officers, Supervisors, and inmate interviews. Each shared that DCR-PR Correctional Institution limits the use of any segregation. Rather each explained that they find alternative housing placement or request for facility relocation. This auditor also interviewed inmates who stated that segregating inmates who reports a sexual abuse/harassment incident is not a common practice at Ponce 1000.

This PREA auditor concludes that Ponce 1000 is in compliance with PREA Standard 115.68.

Standard 115.71 Criminal and administrative agency investigations

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

This PREA Auditor reviewed DCR-PR Ponce 1000 Correctional Institution’s pre-audit documents submitted via electronic source, conducted on-site interviews, as well as on-site observations to determine compliance for PREA Standard 115.71. DCR-PR Ponce 1000 also submitted the DCR-PR “Policy to Prevent, Detect, Report, and Respond to Sexual Violence in Correctional Institutions (Section XIV) as evidence of compliance with PREA Standard 115.71 which states, “*All sexual violence complaints and allegations, including those referred by third parties and anonymous, will be subject to administrative investigation. The same will be carried out in an objective, exhaustive manner and within a term of forty-five (45) calendar days.*

The Office of Investigation of the Correctional System (OISC), will carry out the investigations of the incidents of sexual violence that occurred in the correctional facilities. The investigation process that is detailed in this Regulation, will not be in conflict with the Guide of Norms and Procedure for the Investigations of the OISC, nor with the norm 13.1.2 of the Manual of Norms, Policies and Procedures of the Bureau of Youth Institutions.

1. *All investigative agents working on these investigations must have completed specialized training in investigations of incidents of sexual violence in confinement.*
2. *Files of completed investigations will be kept digitally in the database of the OISC, while the presumed victimizer member of the correctional population is under the custody of the Agency, and five (5) additional years, after compliance with his sentence. In the case of minors identified as aggressors, the digital file will remain in the OISC until the latter or they have reached the twenty-six (26) years of age.
If the alleged victimizer is an employee of the Agency or its agencies, the digital file will remain in the database of the OISC while employed by the Agency, and five (5) additional years.*
3. *Secure the physical evidence, and that the electronic surveillance data have been delivered to the corresponding authorities that conduct the criminal investigations.*
4. *During the administrative investigation the criminal process will be consulted. It will be ensured that the administrative process does not interfere with criminal prosecution.*
5. *The credibility of the alleged victim, of the suspect or witness, will be assessed individually, and will not be determined by their position (official) or classification (member of the correctional population).*
6. *No member of the correctional population who alleges sexual violence shall undergo a polygraph examination or other device for the detection of lies as a condition to continue the investigation of the alleged incident.*
7. *As part of the administrative investigations, the possible commission of negligence or omission in the fulfillment of duty will be considered. This should be documented in the written reports and include a description of the physical, testimonial*

or circumstantial evidence, the reasoning behind the credibility assessments, fact determinations and conclusions of law. The investigative report should include, among its findings, if the collected evidence in the investigative process of a sexual violence was sustained, unsupported or unfounded.

8. *The departure or leave from the employment or the Agency, will not be grounds to close or conclude the investigation.*

After the investigation process, the member of the correctional population must be notified about the determination of his allegation. If it was sustained, not sustained or unfounded. In those cases, in which the determination of the complaint has been sustained or not sustained, and it identifies an official as an aggressor, the Agency must inform the victim the following:

1. *If the official was relocated from a position to another that does not have contact with the member of the injured correctional population.*
2. *If the Agency became aware that the official has been charged with a criminal charge related to the situation under investigation.*
3. *If the Agency is aware that the official has been convicted of related charges.*

When the complaint of the member of the correctional population identified as an aggressor to another member of the correctional population, the Agency will inform the alleged victim when:

1. *To become in knowledge of the filing of criminal charges against the alleged aggressor.*
2. *Become aware of the conviction of the alleged aggressor.*

All notifications described above must be documented. On the other hand, the obligation of the Agency ends when the member of the victim correctional population fulfills his sentence or dispositive measure or is released by order of the court.”

This PREA auditor verified that DCR-PR’s “Policy to Prevent, Detect, Report, and Respond to Sexual Violence in Correctional Institutions (Section XIV) is aligned with their policy (Section X-C; Page 18) which is compliant with PREA Standard 115.34 (“Specialized Training”). This PREA auditor also verified through onsite interviews with DCR-PR’s internal investigation team who are the institution’s liaison for OISC. This auditor also interviewed an Office of Investigation of the Correctional System (OISC) investigator, who carries out the investigations of incidents of sexual violence in all DCR-PR Correctional facilities. This auditor also verified through reviewing a random selection of OISC internal investigation records.

This PREA auditor concludes that Ponce 1000 is in compliance with PREA Standard 115.71.

Standard 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

PREA Auditor reviewed DCR-PR Ponce 1000 Correctional Facility’s pre-audit documents submitted via electronic source, conducted on-site interviews, as well as on-site observations to determine compliance for PREA Standard 115.72. DCR-PR Ponce 1000 also submitted the DCR-PR “Policy to Prevent, Detect, Report, and Respond to Sexual Violence in Correctional Institutions (Page 38) as evidence of compliance with PREA Standard 115.72 which states, “*The DCRPR will not impose any standard greater than the preponderance of the evidence in determining whether the allegations of sexual abuse or harassment are true.*”

Additionally, this auditor interviewed DCR-PR’s OISC Investigator, who confirmed that OISC PREA Investigators uses “*Preponderance of Evidence*” is their standard in determining substantiation in investigations.

This PREA auditor concludes that Ponce 1000 is in compliance with PREA Standard 115.72.

Standard 115.73 Reporting to inmates

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

This PREA Auditor reviewed DCR-PR Ponce 1000 Correctional Institution’s pre-audit documents submitted via electronic source, conducted on-site interviews, as well as on-site observations to determine compliance for PREA Standard 115.73. DCR-PR Ponce 1000 also submitted the DCR-PR “Policy to Prevent, Detect, Report, and Respond to Sexual Violence in Correctional Institutions (Section XIV-8) as evidence of compliance with PREA Standard 115.73 which states, “*After the investigation process, the member of the correctional population must be notified about the determination of his allegation. If it was sustained, not sustained or unfounded. In those cases, in which the determination of the complaint has been sustained or not sustained, and it identifies an official as an aggressor, the Agency must inform the victim the following:*

1. *If the official was relocated from a position to another that does not have contact with the member of the injured correctional population.*
2. *If the Agency became aware that the official has been charged with a criminal charge related to the situation under investigation.*
3. *If the Agency is aware that the official has been convicted of related charges.*

When the complaint of the member of the correctional population identified as an aggressor to another member of the correctional population, the Agency will inform the alleged victim when:

1. *To become in knowledge of the filing of criminal charges against the alleged aggressor.*
2. *Become aware of the conviction of the alleged aggressor.*

All notifications described above must be documented. On the other hand, the obligation of the Agency ends when the member of the victim correctional population fulfills his sentence or dispositive measure or is released by order of the court.”

This PREA auditor also verified through onsite interviews with DCR-PR’s OISC Investigator that at the conclusion of the Office of Investigation of the Correctional System (OISC) investigations of PREA incidents of sexual violence in all DCR-PR Correctional facilities, alleged victims are notified of their case, and it is documented. Furthermore, Ponce 1000’s PREA Compliance Manager shared with this auditor that, if substantiated, the victim receives further notification of the status of the perpetrator, and it is documented. While on site, this auditor verified 3 randomly selected post-investigation documentation to verify compliance. Finally, this auditor viewed the DCR-PR “Notification Form” used to inform victims of the conclusion/outcome of the investigation.

This PREA auditor concludes that Ponce 1000 is in compliance with PREA Standard 115.73.

Standard 115.76 Disciplinary sanctions for staff

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

This PREA Auditor reviewed DCR-PR Ponce 1000 Correctional Institution’s pre-audit documents submitted via electronic source, conducted on-site interviews, as well as on-site observations to determine compliance for PREA Standard 115.76. DCR-PR Ponce 1000 Corrections Institution Facility also submitted the DCR-PR *“Policy to Prevent, Detect, Report, and Respond to Sexual Violence in Correctional Institutions (Discipline-Pages 39-40)”* as evidence of compliance with PREA Standard 115.76 which states, *“An employee will be subject to disciplinary sanctions that include until dismissal for violating the DCRPR’s sexual abuse and harassment policy.”*

1. *The dismissal will be the alleged disciplinary sanction for personnel who commit sexual abuse.*
2. *Disciplinary sanctions for violating the DCRPR policies related to sexual abuse and harassment (unless it is part of sexual abuse) will be proportional to the nature and circumstance of the acts that are committed, the employee’s disciplinary history and sanctions imposed for offenses committed by other employees with similar records.*
3. *Any dismissal for violating the DCRPR policies regarding sexual abuse and harassment, or resignation because otherwise the layoff would have occurred, law enforcement agencies and licensing agencies will be informed, unless the activity don’t be clearly criminal.*

In reviewing this excerpt from DCR-PR’s *“Policy to Prevent, Detect, Report, and Respond to Sexual Violence in Correctional Institutions,”* this auditor concludes that DCR-PR’s policy language is aligned with PREA Standard 115.76. Additionally, while onsite, this PREA Auditor interviewed Ponce 1000’s Superintendent to gain insight into disciplinary sanctions for staff PREA violations. Ponce 1000’s Superintendent informed this auditor that he follows DCR-PR’s policy on disciplinary actions for staff PREA violations. He further stated that disciplinary actions can be reassignment, suspension, termination, and up to legal action taken.

This auditor also corresponded with DCR-PR’s Human Resource Manager, who confirmed Ponce 1000 Superintendent’s responses. DCR-PR’s Human Resources Manager also referred this auditor to DCR-PR’s *“Manual for the Application of Corrective or Disciplinary Measures to Employees of the Department of Correction and Rehabilitation sections 13.2.1 and 13.2.2 of the Policy Manual Standards and Procedures of the Bureau of Youth Institutions”* This manual gave a roadmap of corrective action steps for employee violations and disciplinary actions within *DCR-PR and Bureau of Youth Institutions.*

This auditor concludes that Ponce 1000 is in compliance with PREA Standard 115.76.

Standard 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

This PREA Auditor reviewed DCR-PR Ponce 1000 Correctional Institution’s pre-audit documents submitted via electronic source, conducted on-site interviews, as well as on-site observations to determine compliance for PREA Standard 115.77. DCR-PR Ponce 1000 Corrections Institution Facility also submitted the DCR-PR *“Policy to Prevent, Detect, Report, and Respond to Sexual Violence in Correctional Institutions (Discipline-Page 40)”* as evidence of compliance with PREA Standard 115.77 which states, *“Any contractor or volunteer who sustains sexual abuse will be reported to law enforcement authorities and licensing agencies, unless, clearly, the activity is not criminal in nature. The institution will take corrective action and will consider whether to prohibit contact with inmates, if any other violation of the sexual abuse and harassment policy by a contractor or a volunteer occurs.”*

In reviewing this excerpt from DCR-PR’s *“Policy to Prevent, Detect, Report, and Respond to Sexual Violence in Correctional Institutions,”*

this auditor concludes that DCR-PR's policy language is aligned with PREA Standard 115.77. Additionally, while onsite, this PREA Auditor interviewed Ponce 1000's Superintendent to gain insight into disciplinary sanctions for contractors and volunteers PREA violations. Additionally, while onsite, this PREA Auditor interviewed Ponce 1000's Superintendent to gain insight into disciplinary sanctions for Corrective Actions for DCR-PR contractors/volunteers for substantiated PREA violations. Ponce 1000's Superintendent informed this auditor that he follows DCR-PR's policy on corrective actions for contractor/volunteer PREA violations. He further stated that disciplinary actions can range from reporting contractor/volunteer to their licensing agency, up to criminal charges being filed.

This auditor also corresponded with DCR-PR's Human Resource Manager, who confirmed Guayama 1000 Superintendent's responses. DCR-PR's Human Resources Manager also referred this auditor to DCR-PR's "*Manual for the Application of Corrective or Disciplinary Measures to Employees of the Department of Correction and Rehabilitation sections 13.2.1 and 13.2.2 of the Policy Manual Standards and Procedures of the Bureau of Youth Institutions*" This manual gave a roadmap of corrective action steps for employees and contractor violations and disciplinary actions within *DCR-PR and Bureau of Youth Institutions*.

This auditor concludes that Ponce 1000 is in compliance with PREA Standard 115.77.

Standard 115.78 Disciplinary sanctions for inmates

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

This PREA Auditor reviewed DCR-PR Ponce 1000 Correctional Institution's pre-audit documents submitted via electronic source, conducted on-site interviews, as well as on-site observations to determine compliance for PREA Standard 115.78. DCR-PR Ponce 1000 Corrections Institution Facility also submitted the DCR-PR "*Policy to Prevent, Detect, Report, and Respond to Sexual Violence in Correctional Institutions* (Discipline-Page 40) as evidence of compliance with PREA Standard 115.78 which states, "*Inmates will be subject to disciplinary sanctions under a formal process, after the administrative finding that an inmate sexually abused another inmate or after a criminal finding of guilt for the sexual abuse of another inmate.*

2. *The penalties will be proportional to the nature and circumstances of the abuse committed, the disciplinary history of the inmate or the inmates, and must be imposed for offenses comparable to those committed by other inmates whose records are similar.*
3. *To determine the sanction to be imposed, during the disciplinary process it will be considered whether the disability or mental illness of an inmate contributed to their behavior.*
4. *If the institution offers therapy, counseling and other interventions whose purpose is to address and correct the underlying the reasons for the abuse, this should be considered if the inmate must be required to participate in such interventions as a condition for accessing programs and other benefits.*
5. *The DCRPR may discipline an inmate for sexual conduct with staff only when it is discovered that the employee did not consent to such contact.*
6. *For the purpose of disciplinary action, a report of sexual abuse that is made in good faith based on the reasonable belief that the alleged conduct occurred, will not constitute a false report of an incident, nor a lie, although when investigating it there is not enough evidence to prove the allegation.*
7. *The DCRPR has, at its discretion, prohibit any sexual activity between inmates, and discipline them for participating in it. However, it should not be considered that this constitutes sexual abuse if it determines that it has not been forced."*

This auditor concludes that DCR-PR's policy language is aligned with PREA Standard 115.78. Additionally, while onsite, this PREA Auditor interviewed Ponce 1000's Superintendent to gain insight into disciplinary sanctions for inmates substantiated for PREA violations. Ponce 1000's Superintendent informed this auditor that disciplinary sanctions for inmates are proportionate to the outcomes of the investigations. Ponce's Superintendent shared that he follows DCR-PR guidelines regarding disciplinary sanctions for inmate for substantiated PREA violations. He stated that sanctions could range from program adjustments or relocation to other housing assignments,

up to transferring inmate to another DCR-PR institution with an increased level of security.

This auditor concludes that Ponce 1000 is in compliance with PREA Standard 115.78.

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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The PREA Auditor reviewed DCR-PR Ponce 1000 Correctional Institution's pre-audit documents submitted via electronic source, conducted on-site interviews, as well as on-site observations to determine compliance for PREA Standard 115.81. This auditor reviewed DCR-PR "Policy to Prevent, Detect, Report, and Respond to Sexual Violence in Correctional Institutions" (Medical Treatment and Mental Health-Pages 41-42) as evidence of compliance with PREA Standard 115.81 which states, "If, when making a siege in accordance with §115.41, there are indications that an inmate or a prisoner has suffered prior sexual victimization and has occurred in an institution or in the community, the staff will offer a follow-up meeting with a medical professional or of mental health, within fourteen (14) days from the siege upon entering the institution.

2. *If, when making a siege in accordance with §115.41, there are indications that an inmate or a prisoner has previously committed sexual abuse and occurred in an institution or in the community, the staff will offer a follow-up meeting, with a mental health professional, within fourteen (14) days of the siege upon entering the institution.*
3. *If, when making a siege in accordance with §115.41, there are indications that an inmate or a prisoner has suffered prior sexual victimization and has occurred in an institution or in the community, the staff will offer a follow-up meeting with a mental health professional, within fourteen (14) days from the siege upon entering the institution.*
4. *All information about sexual victimization or abuse that happened in an institution will be strictly limited to medical and mental health professionals and other personnel, as necessary, for the preparation of treatment plans and to decide how to handle security, including accommodation, dormitory, work, education and assigning participation in programs or as required by federal, state and local laws.*
5. *The health and mental health professionals will obtain the informed consent of the inmates before informing about the previous victimization that did not happen in an institution, except if the inmate is under eighteen (18) years of age.*

Though DCR-PR's Ponce 1000's policy language is aligned with PREA Standard 115.81, DCR-PR's contracted medical/mental health staff (PMG) and Ponce 1000's Social Workers were not working together to bridge the gap on 14-day follow ups on inmates screened on the DCR-PR "Victimization and Abusiveness Screening Tool (Annex B) at intake. Of 4 randomly selected inmate files who screened as victim or perpetrator, 0 inmates had a 14-day follow up documented in their file.

This PREA auditor recommended that Ponce 1000 facilitate a refresher training of all medical and mental health staff on PREA standards 115.41, 115.42, and 115.81. This is to ensure and understand the importance and serious nature of conducting/completing "Victimization and Abusiveness Screenings" upon inmate intake, as well as referring inmates who are assessed as having history of victimization of perpetration, for medical/mental health follow-up. Finally, Ponce 1000 recommended that adjustments to conducting/completing "Victimization and Abusiveness Screenings" on ALL inmates at intake and 14-day follow ups should be monitored for consistency of practice over a period, before compliance can be concluded.

During DCRPR Ponce 1000's Corrective Action period, Ponce 1000's Social Worker Supervisor submitted a certified letter (dated 7/23/2021) to this auditor, as evidence of conducting re-training to all Ponce 1000 social workers on the purpose and how the properly complete the (Annex B) PREA risk assessment. Ponce 1000 also submitted a refresher training completion sign-in sheet for all Social Workers. The refresher training was facilitated by Ponce 1000's PREA Compliance Manager on 3/18/22. Additionally, Ponce 1000 submitted 8 randomly selected inmate intake files (from dates ranging from 6/2021- 2/2022) as evidence of consistently completing

(Annex B) PREA risk assessments in its entirety, specifically the recommendation and the follow-up sections. Finally, Ponce 1000 has demonstrated a consistency in practice for this auditor to conclude compliance.

This auditor concludes that Ponce 1000 is in compliance with PREA Standard 115.81.

Standard 115.82 Access to emergency medical and mental health services

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

This PREA Auditor reviewed DCR-PR Ponce 1000 Correctional Institution’s pre-audit documents submitted via electronic source, conducted on-site interviews, as well as on-site observations to determine compliance for PREA Standard 115.82. DCR-PR Ponce 1000 also submitted the DCR-PR “Policy to Prevent, Detect, Report, and Respond to Sexual Violence in Correctional Institutions (Medical Treatment and Mental Health-Page 42) as evidence of compliance with PREA Standard 115.82 which states, “*Inmates who have been victims of sexual abuse will receive access to emergency treatment and crisis intervention services on time and without obstacles. The nature and scope of these will be determined according to the judgment of the professionals.*”

2. *If it is non-medical personnel on call who responds to an incident, the security personnel making the first intervention will take preliminary measures to protect the victim, according to §115.62 and immediately notify the corresponding medical and mental health professionals.*
3. *Inmates who are victims of sexual abuse while in prison are offered timely information about access to emergency contraceptives and treatment of infections transmitted by sexual contact, according to medical care standards, when these are medically appropriate.*
4. *Every victim will receive treatment at no cost and regardless of whether the victim denounces the aggressor or the aggressors, or collaborates or not with any investigation that arises from the incident.”*

This PREA auditor also verified through onsite interviews with DCR-PR’s contracted (Physician Correctional Group) Chief Medical Officer and Medical Triage Supervisor. All verified that all alleged inmate victims of sexual abuse receive immediate/unimpeded access to medical treatment, psychological treatment, and contraception education at no cost to the inmate. This auditor also reviewed the “Physician Correctional Group’s” operations and random electronic patient files (barring confidentiality regulations). Moreover, all inmates interviewed by this auditor verified that medical care/services at DCR-PR Ponce 1000 are highly responsive.

This PREA auditor concludes that Ponce 1000 is in compliance with PREA Standard 115.82.

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

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These

recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

This PREA Auditor reviewed DCR-PR Ponce 1000 Correctional Institution’s pre-audit documents submitted via electronic source, conducted on-site interviews, as well as on-site observations to determine compliance for PREA Standard 115.83. DCR-PR Ponce 1000 also submitted the DCR-PR “Policy to Prevent, Detect, Report, and Respond to Sexual Violence in Correctional Institutions (Medical Treatment and Mental Health-Pages 42-43) as evidence of compliance with PREA Standard 115.83 which states, “*The institution will offer medical and mental health evaluations and, if appropriate, treatment of any inmate or inmate who has been the victim of sexual abuse in any prison, jail, confinement, or institution for the detention of minors.*

2. *The evaluation and treatment of such victims must include, if appropriate, follow-up, treatment plans and, if necessary, referrals to continue care after they are transferred or placed in other institutions or They will be released.*
3. *Victims of forced vaginal penetration in prison are offered pregnancy tests.*
4. *If the conduct results in pregnancy, the victims will receive comprehensive and timely information on access to legal medical services related to the pregnancy.*
5. *Inmates and confined victims of sexual abuse are offered tests to detect sexually transmitted infections, as medically appropriate.*
6. *The services for the treatment must be provided to the victim free of charge regardless of whether this complaint to the aggressor or the aggressor, or collaborates or not with any investigation that arises from the incident.*

Every prison must attempt to assess the mental health of all abusers of other known inmates within sixty (60) days of knowing the history of abuse and treatment with mental health professionals if it is judged to be the proper case.”

This PREA auditor also verified through onsite interviews with DCR-PR’s contracted (Physician Correctional Group) Chief Medical Officer and Medical Triage Supervisor. All verified that all alleged inmate victims of sexual abuse receive ongoing medical follow up, additional medical treatment (as needed), ongoing psychological treatment, and STD education/contraception education.to the inmate. This auditor also reviewed the “Physician Correctional Group’s” operations and random electronic patient files (barring confidentiality regulations). Moreover, all inmates interviewed by this auditor verified that medical services at DCR-PR Ponce 1000 provides continuous medical care and nurses come around for daily sick calls from inmates.

This PREA auditor concludes that Ponce 1000 is in compliance with PREA Standard 115.83.

Standard 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

This PREA Auditor reviewed DCR-PR Ponce 1000 Correctional Institution’s pre-audit documents submitted via electronic source, conducted on-site interviews, as well as on-site observations to determine compliance for PREA Standard 115.86. DCR-PR Ponce 1000 also submitted the DCR-PR “Policy to Prevent, Detect, Report, and Respond to Sexual Violence in Correctional Institutions (Data Collection and Revisions Pages 43-44) as evidence of compliance with PREA Standard 115.86 which states, “*The institution will conduct a review of each incident of sexual abuse each time an investigation is concluded even when the allegation has not been proven, unless it is found that it was unfounded.*

2. *The review will be done on or before thirty (30) days from the conclusion of the investigation.*
3. *The review team will include senior officers with input from first-line supervisors, researchers and medical and mental health professionals.*
4. *The review team:*

- a. *must consider whether the allegations or investigation indicates the need to make policy changes or better exercise prevention, discovery and response to sexual abuse;*
- b. *must consider whether the incident or allegation arises for reasons of racial, ethnic, gender identity (such as lesbianism, homosexuality, bisexuality, transgender, intersexuality), perceived status or status, gang affiliation, or due to group dynamics in the institution;*
- c. *examine the institutional area where the incident is alleged to have occurred and assess whether the physical barriers found there facilitate the abuse;*
- d. *assess whether personnel levels are adequate in that area and in different shifts;*
- e. *assess whether surveillance technology should be installed or increased to be supplementary to the supervision provided by personnel; and*
- f. *prepare a report of the findings obtained that include, but are not limited to the determinations made in accordance with paragraphs (4) (1) to (4) (e) of this section with the recommendations for improvement and submit it to the head of the institution and the compliance manager with PREA.*

The institution will implement the recommendations to improve or document the reasons for not doing so.”

This auditor concludes that DCR-PR’s policy language is aligned with PREA Standard 115.86. This PREA auditor also verified through onsite interviews with Ponce 1000’s Superintendent, PREA Coordinator, PREA Compliance Manager, and PREA Regional Compliance Manager that Ponce 1000 Compliance Manager conducts a bi-weekly PREA Institution Checklist and has monthly “Incident Review” meetings with DCR-PR’s PREA Regional Compliance Supervisor. PREA-related prevention/interventions are discussed and documented during this monthly meeting. This auditor reviewed meeting agendas, data collection reports, as well as institution-specific incident tracking documentation to confirm consistent incident review meetings are occurring.

This PREA auditor concludes Ponce1000 is in compliance with PREA Standard 115.86.

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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

This PREA Auditor reviewed DCR-PR Ponce 1000 Correctional Institution’s Facility pre-audit documents submitted via electronic source, conducted on-site interviews, as well as on-site observations to determine compliance for PREA Standard 115.87. DCR-PR Ponce 1000 also submitted their DCR-PR “Policy to Prevent, Detect, Report, and Respond to Sexual Violence in Correctional Institutions (Section XVII-Information Gathering) as evidence of compliance with PREA Standard 115.87 which states, “*The DCRPR will collect accurate, uniform data for each allegation of sexual abuse in institutions that it directly controls with a standardized instrument and definitions.*

- 2. *The DCRPR will aggregate the sexual abuse data based on the incidents, at least once (1) a year.*
- 3. *The data obtained from incidents will include at least the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence (SSV) conducted by the United States Department of Justice.*
- 4. *The DCRPR will retain, review and collect data, as necessary, from all incident-based documents; It must include reports, investigation files and incident reviews.*
- 5. *In addition, it must obtain aggregate and incident data from any private institution with which it has contracts to confine prisoners.*
- 6. *Upon request, The DCRPR must provide the United States Department of Justice with all data from the previous calendar year no later than June 30.”*

This auditor verified that the language in DCR-PR’s policy aligns with PREA Standard 115.87. However, this auditor was unable to verify through onsite interviews with DCR-PR’s PREA Coordinator Ponce 1000’s Superintendent, DCR-PR’s PREA Coordinator and Ponce 1000’s PREA Compliance Manager that DCR-PR made public annual reports (including data) of incidents of sexual violence within its institutions. Ponce 1000 did not submit any recent annual reports for this auditor to consider as evidence.

This auditor recommended that DCR-PR submit their 2018, 2019, and 2020 Annual PREA-Institutional Program reports, monthly institution data reporting of PREA incidents (by institution, incident-type, and by gender), and corrective actions taken to address any known concerns.

During DCRPR Ponce 1000’s Corrective Action period, Ponce 1000 submitted their 2018, 2019, and 2020 “Annual PREA Program Reports,” “Monthly Data Reporting” (by incident-type, by each institution and by gender). Additionally, DCRPR submitted Corrective Actions taken to address PREA-Related incidents identified in the “Annual PREA Program Reports.”

This PREA auditor concludes that Ponce 1000 is in compliance with PREA Standard 115.87.

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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

This PREA Auditor reviewed DCR-PR Ponce 1000 Correctional Institution’s Facility pre-audit documents submitted via electronic source, conducted on-site interviews, as well as on-site observations to determine compliance for PREA Standard 115.88. DCR-PR Ponce 1000 also submitted their DCR-PR “Policy to Prevent, Detect, Report, and Respond to Sexual Violence in Correctional Institutions (Data Collection and Revisions- Pages 44-45) as evidence of compliance with PREA Standard 115.88 which states, “*The DCRPR will review the data collected and aggregated according to §115.87, in order to evaluate and improve the effectiveness of prevention, detection and response policies, practices and training regarding sexual abuse and include:*

- a. identification of problem areas;*
- b. act to correct continuously; and*
- c. preparation of an annual report with the findings and corrective actions that were used in each institution and throughout the DCRPR.*
- 2. The report will compare the data and corrective actions of the current year with those of previous years and must provide an evaluation of the progress of the DCRPR in addressing sexual abuse.*
- 3. The Secretary of the DCRPR will approve the report, which will be easily accessible to the public from its website. It will also be disclosed by other means of dissemination*
- 4. The DCRPR may edit material in a report when its publication presents a clear and specific threat to the institution's security, but it must indicate the nature of the excluded.*

This auditor verified that the language in DCR-PR’s policy aligns with PREA Standard 115.88. However, this auditor was unable to verify through onsite interviews with DCR-PR’s PREA Coordinator Ponce 1000’s Superintendent, DCR-PR’s PREA Coordinator and Ponce 1000’s PREA Compliance Manager that DCR-PR made public annual reports (including data) of incidents of sexual violence within its institutions. Ponce 1000 did not submit any recent annual reports for this auditor to consider as evidence.

This auditor recommended that DCR-PR submit their 2018, 2019, and 2020 Annual PREA-Institutional Program reports, monthly institution data reporting of PREA incidents (by institution, incident-type, and by gender), and corrective actions taken to address any known concerns.

During DCRPR Ponce 1000’s Corrective Action period, Ponce 1000’s submitted their 2018, 2019, and 2020 “Annual PREA Program Reports,” “Monthly Data Reporting” (by incident-type, by each institution, and by gender). Additionally, DCRPR submitted Corrective

Actions taken to address the PREA-Related incidents identified in the “Annual PREA Program Reports.”

This PREA auditor concludes that Ponce 1000 is in compliance with PREA Standard 115.88.

Standard 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

This PREA Auditor reviewed DCR-PR Ponce 1000 Correctional Institution’s Facility pre-audit documents submitted via electronic source, conducted on-site interviews, as well as on-site observations to determine compliance for PREA Standard 115.89. DCR-PR Ponce 1000 also submitted their DCR-PR “Policy to Prevent, Detect, Report, and Respond to Sexual Violence in Correctional Institutions (Data Collection and Revisions- Page 45) as evidence of compliance with PREA Standard 115.89 which states, “The DCRPR must ensure that the data obtained according to §115.87 is kept in a safe place.

2. *The DCRPR will make available and easily accessible aggregate data on sexual abuse obtained from institutions under its direct control and from the private entities with which it has contracts, to the public through its website, at least once a year. It will also be disseminated by other means.*
3. *Before disclosing aggregate sexual abuse data, the DCRPR will remove all personal identifiers.*
4. *The DCRPR will retain sexual abuse data in accordance with §115.87, for a minimum of ten (10) years from the initial date of collection, unless federal, state or local laws require otherwise.*

This auditor concluded that the language in DCR-PR’s policy aligns with PREA Standard 115.89. However, this auditor was unable to verify through onsite interviews with DCR-PR’s PREA Coordinator Ponce 1000’s Superintendents, DCR-PR’s PREA Coordinator and Ponce 1000’s PREA Compliance Manager that DCR-PR made public annual reports (including data) of incidents of sexual violence within its institutions. Ponce 1000 did not submit any recent annual reports for this auditor to consider as evidence.

This auditor recommended that DCR-PR submit their 2018, 2019, and 2020 Annual PREA-Institutional Program reports, monthly institution data reporting of PREA incidents (by institution, incident-type, and by gender), and corrective actions taken to address any known concerns.

During DCRPR Ponce 1000’s Corrective Action period, Ponce 1000’s submitted their 2018, 2019, and 2020 “Annual PREA Program Reports,” “Monthly Data Reporting” (by incident-type, by each institution, and by gender). Additionally, DCRPR submitted Corrective Actions taken to address the PREA-Related incidents identified in the “Annual PREA Program Reports.”

This PREA auditor concludes that Ponce 1000 is in compliance with PREA Standard 115.89.

AUDITOR CERTIFICATION

I certify that:

- The contents of this report are accurate to the best of my knowledge.
- No conflict of interest exists with respect to my ability to conduct an audit of the agency under review, and
- I have not included in the final report any personally identifiable information (PII) about any inmate or staff member, except where the names of administrative personnel are specifically

requested in the report template.

DeShane Reed, USDOJ Certified PREA Auditor (#P2190)

Auditor Signature

June 12, 2022

Date