

**PREA AUDIT REPORT     Interim    Final**  
**ADULT PRISONS & JAILS**

**Date of report:** 08/11/2022

<b>Auditor Information</b>			
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<b>Telephone number:</b> (501) 777-3102			
<b>Date of facility visit:</b> May 23, 2021 through May 25, 2021			
<b>Facility Information</b>			
<b>Facility name:</b> Ponce Principal Minimum/Medium Security Institution			
<b>Facility physical address:</b> Bo. El Tuque - Cucharas Sector; Ponce, P.R.			
<b>Facility mailing address:</b> <i>(if different from above)</i> 3699 Ponce BYP Ponce, P.R. 00728-1500			
<b>Facility telephone number:</b> 1 (787) 864-8886			
<b>The facility is:</b>	<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		
<b>Facility type:</b>	<input checked="" type="checkbox"/> X Prison	<input type="checkbox"/> Jail	
<b>Name of facility's Chief Executive Officer:</b> Griselle Morales/Glidden M. Maldonado			
<b>Number of staff assigned to the facility in the last 12 months:</b> 9			
<b>Designed facility capacity:</b> 479			
<b>Current population of facility:</b> 410			
<b>Facility security levels/inmate custody levels:</b> Medium-Maximum Security Prison			
<b>Age range of the population:</b> 18 and above			
<b>Name of PREA Compliance Manager:</b> Charles Rodriguez Constantino		<b>Title:</b> PREA Institution Manager/Correctional Officer	
<b>Email address:</b> crconstantino@dcr.pr.gov		<b>Telephone number:</b> (787) 492-8181 ext.1203/1204	
<b>Agency Information</b>			
<b>Name of agency:</b> Department of Correction and Rehabilitation-Puerto Rico/Website: <a href="http://dcr.pr.gov/">http://dcr.pr.gov/</a>			
<b>Governing authority or parent agency:</b> <i>(if applicable)</i> Estado Libre Asociado de PR (Free Associated State of Puerto Rico)			
<b>Physical address:</b> Juan Calaf Avenue, Urb. 3 Nuns, Hato Rey P.R. 00917 (Avenida Juan Calaf, Tres Monjitas, Hato Rey P.R. 00917)			
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<b>Telephone number:</b> (787) 273-6464			
<b>Agency Chief Executive Officer</b>			
<b>Name:</b> Ana I. Ecobar Pabon		<b>Title:</b> Secretary	
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<b>Agency-Wide PREA Coordinator</b>			
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## AUDIT FINDINGS

### NARRATIVE

On May 23, 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 Principal* Institution. The audit commenced with Pre-Audit Briefing meeting (9:00am) consisting of DCR-PR *Ponce Principal* Institution administration and supervisory security staff. In attendance was the following from DCR-PR *Ponce Principal* Institution: PREA Auditor, PREA Auditor-Translator, Ponce Principal PREA Compliance Officer, *Ponce Principal* Superintendent, DCR-PR South Region PREA Manager, and Shift Commander. 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 Principal* Institution.

This PREA audit (May 23, 2021 - May 25, 2021) commenced with a full tour of DCR-PR *Ponce Principal* 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 Principal* 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 26 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 17 interviews of a random selection of *Ponce Principal* Institution staff including: *Ponce Principal* 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 Principal* 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 Principal* Institution was compliant with PREA facility standards and/or confirm any areas of non-compliance.

On May 25, 2021, the PREA Audit of *Ponce Principal* 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 Principal* Institution. The staff was welcoming and pleasant to the PREA Auditor. Staff seemed to have global knowledge of PREA and eager to share their current knowledge of their responsibilities under PREA. The double-cell housing dormitory was clean and organized. As a result of *Ponce Principal* Institution being an institution for Medium-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 Principal* 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 Principal* Institution has a total of 13 buildings. Three buildings contains 23 double-cell housing units. There are 10 buildings, which contains Administration, Admissions, Medical, Workshops, Kitchen, Church/Chapel, Gym/Library, Education, Mental Health, and Visitation Area. Additionally, due to the lower inmate population, all inmates are housed in their own cell. *Ponce Principal* Institution does not have camera access throughout the entire institution. *Ponce Principal* is highly dependent on vigilant staff supervision of all inmates. The 23 housing locations are double-celled, facing the day space and the control room. This 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 its own shower cell. Each shower cell had its own shower with a full-size shower curtain and where inmates showered individually (out of the sight of other inmates). 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 were all working, however the toll-free for inmate to call to report a PREA Incident is only available from 8:30am-4:30pm Monday through Friday (no weekend access). This limits one of *Ponce Principal's* major avenues for inmates to report a PREA Incident.

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

## DESCRIPTION OF FACILITY CHARACTERISTICS

*Ponce Principal* Institution is a 496-inmate designed capacity Medium Custody Correctional Institution. At the time of Ponce Principal's PREA audit, there were 410 actual inmates housed (336 medium custody and 74 minimum custody). *Ponce Principal* 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 13 buildings. There are 3 buildings containing 23 double-cell housing units. There are 10 buildings, which contains Administration, Admissions, Medical, Workshops, Kitchen, Church/Chapel, Gym/Library, Education, Mental Health, and Visiting.

*Ponce Principal* Institution is a Medium Custody institution for moderate-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 at least once weekly." Services and programs are provided within the *Ponce Principal* Institution.

Due to not having camera technology for video monitoring assistance and investigations, *Ponce Principal* 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 Principal* Institution relies heavily on consistent, vigilant, and unpredictable staff sight and sound supervision. At the time of the PREA Facility Audit, *Ponce Principal* Institution had approximately 55 Correctional Officers and Non-Officer Status Staff, who have contact with inmates in the job roles. Additionally, approximately 17 volunteers and contracted individuals who may have contact with inmates within their daily roles are at *Ponce Principal* Institution. Finally, *Ponce Principal* Institution works in cooperation with the Office of Investigations of the Correctional System (OISC) regarding institution related PREA Investigations. *Ponce Principal'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 Principal* Institution's emergency medical services are largely provided by their onsite Medical Center. *Ponce Principal* 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 Principal* Corrections Institution consisted of a comprehensive assessment (May 22, 2021-May 25, 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 Principal* 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 Principal's* PREA Compliance Manager, and DCR-PR *Ponce Principal's* Superintendents.

Based on the audit findings of 43 total PREA Standards, there were 26 PREA Standards in Compliance, 0 PREA Standard which were Non-Applicable, and 17 PREA Standards which were non-compliant and requiring Corrective Action. DCR-PR *Ponce Principal* Corrections Institution PREA Standards requiring Corrective Action are as follows: **115.12, 115.15, 115.21, 115.31, 115.33, 115.41, 115.42, 115.51, 115.52, 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 Principal* coordinated a plan of action steps to mitigate each *Non-Compliant* Standard area and bring each into *Compliance*. DCR-PR *Ponce Principal* 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 DCR-PR Ponce Principal's 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 115.11. DCR-PR Ponce Principal 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 NJ) 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 Principal 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.**

According to DCR-PR Ponce Principal Corrections Institution's Pre-Audit Questionnaire, the institution does not contract with any entities for confinement of its inmates. Nor has it contracted for confinement in the past 12-months. However, this PREA auditor did not see any documentation in Ponce Principal's submitted electronic folder to verify compliance with the above-mentioned standard. This auditor recommended that an official signed letter to this PREA Auditor be submitted by DCR-PR's PREA Coordinator stating, "Ponce Principal Corrections Institution does not contract with any entities for the confinement of its inmates."

This PREA auditor concluded that Ponce Principal was not in compliance PREA Standard 115.12. A CORRECTIVE ACTION was recommended.

During this Corrective Action Period, this auditor received a certified letter from DCRPR's PREA Coordinator stating that DCRPR's

Ponce Principal has no contract with any entity for the confinement of members of their correctional population.

This PREA auditor concludes that Ponce Principal 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 Principal 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 time 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" while onsite and submitted through the Pre-Audit Questionnaire's electronic documentation. While conducting the on-site audit, this auditor requested a random selection of dates to verify 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 Principal Correctional Institution's staffing plan with Ponce Principal's Superintendent and PREA Compliance Manager. Each shared, "*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 staff from other DCR institutions to address any staffing shortage at any DCR-PR Correctional Institution.

This PREA auditor concludes that Ponce Principal 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 Principal 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

Principal 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 Principal, 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 Principal Corrections Facility.

This PREA auditor concludes that Ponce Principal 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 Principal 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 Principal 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.*”

During interviews with 26 inmates, more than 50% of the interviewed inmates reported that staff of opposite gender (female) did not consistently announce when entering a housing location. There were also inconsistencies in 17 interviewed staff responses regarding procedures and training in cross-gender pat-searches.

This auditor recommended a refresher training of all institutional security staff. One of the focuses of the training should cover opposite gender staff announcing when entering male housing units and Cross-Gender Searches/Transgender Searches. This PREA auditor concluded that Ponce Principal was not in compliance with PREA Standard 115.15. A CORRECTIVE ACTION was recommended. During DCRPR Ponce Principal’s Corrective Action period, Ponce Principal 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 Principal submitted refresher orientation/trainings with sign-in sheets and training certificates for personnel files (dated 4/12/22) as evidence of conducting comprehensive staff training to their institutional staff. This training date entailed trainings to Ponce Principal their Civil Personnel, Corrections Officers, and Education staff. Ponce Principal also submitted pictures of signs outside each housing unit door stating that opposite gender personnel must announce prior to entering. Finally, Ponce Principal has demonstrated a consistency in practice for this auditor to conclude compliance.

This PREA auditor concludes that Ponce Principal 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 Principal 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 17 staff and 26 inmates, all staff and inmates identified that there is an interpretation service hotline provided for limited-Spanish speaking inmates. Ponce Principal 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 Principal 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)

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This PREA Auditor reviewed DCR-PR Ponce Principal 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 reviewed DCR-PR's "Civil, Personnel Promotions Rule," which identified review of files and rechecking background (civil and criminal). This auditor 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 Principal 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)

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

This PREA auditor concludes that Ponce Principal 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)

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This PREA Auditor reviewed DCR-PR Ponce Principal 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. This PREA Auditor also interviewed a total of 17 staff at Ponce Principal’s. Of the 17 total interviewed staff, 10 interviewed were security level staff. Only 8 of the 17 interviewed knew the institution’s protocol on obtaining and preserving using evidence when a sexual abuse is alleged. There were inconsistencies in staff knowing 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 1<sup>st</sup> Responders Report.

This auditor recommended a refresher training of all institutional security staff. One of the focuses of the training should be cover opposite gender staff announcing when entering male housing units, Cross-Gender/Transgender Searches, and preserving usable forensic evidence and the scene where a sexual abuse allegation is reported. This PREA auditor concluded that Ponce Principal was not in compliance with PREA Standard 115.21. A CORRECTIVE ACTION was recommended.

During DCRPR Ponce Principal’s Corrective Action period, Ponce Principal 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/transgender searches, and crime scene preservation where an alleged sexual abuse allegation is reported. Ponce Principal submitted refresher orientation/trainings classroom pictures, sign-in sheets, and training certificates for personnel files (dated 4/12/22) as evidence of conducting comprehensive staff training to their institutional staff. This training date entailed trainings to Ponce Principal their Civil Personnel, Corrections Officers, and Education staff. Ponce Principal also submitted pictures of signs (in English and Spanish) outside each housing unit door stating that opposite gender personnel must announce prior to entering. Finally, Ponce Principal has demonstrated a consistency in practice for this auditor to conclude compliance.

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

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

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

**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 Principal 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 Principal 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 Principal is in compliance with PREA Standard 115.22.

### **Standard 115.31 Employee training**

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

**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 Principal 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 Principal 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.”

Additionally, this PREA auditor verified through reviewing the submitted sign-in sheets of the random 17 staff interviewed that a “Refresher Training” has occurred within the last 12-24 months. Ponce Principal 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.

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 ways an inmate can report a PREA incident within the institution. After further exploring, through staff interviews, this auditor received information that the “Refresher Trainings” entailed 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 especially in the 10 staff interviews.

This auditor recommended Ponce Principal conduct an institution wide Comprehensive PREA Training, where staff can ask questions to a facilitator and receive feedback. This auditor also recommended that the PREA Compliance Manager conduct scenario-based spot refresher trainings to keep PREA knowledge fresh for staff. Finally, this auditor recommended Ponce Principal demonstrate a consistency in practice before compliance can be concluded. This PREA auditor concluded that Ponce Principal was not in compliance with PREA Standard 115.31. A CORECTIVE ACTION was required.

During DCRPR Ponce Principal’s Corrective Action period, Ponce Principal submitted verification of staff comprehensive refresher training on PREA Standards. This training topics covered preventing, first responder roles, and reporting incidents of sexual abuse/harassment, opposite gender announcements when entering male housing units (all male facility), cross-gender/transgender searches, and crime scene preservation where an alleged sexual abuse allegation is reported. Ponce Principal submitted refresher orientation/trainings classroom pictures, sign-in sheets, and training certificates for personnel files (dated 4/12/22) as evidence of conducting comprehensive staff training to their institutional staff. This training date entailed trainings to Ponce Principal their Civil Personnel, Corrections Officers, and Education staff. Ponce Principal also submitted pictures of signs (in English and Spanish) outside each housing unit door stating that opposite gender personnel must announce prior to entering. Finally, Ponce Principal has demonstrated a consistency in practice for this auditor to conclude compliance.

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

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**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 Principal 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 Principal 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 randomly interviewed 2 contracted staff (education department and kitchen). Both contracted staff shared and demonstrated adequate knowledge of their role when an inmate reports a PREA-related incident to them. This auditor also reviewed their training documentation that they were PREA trained less than 12 months ago.

This PREA auditor concludes that Ponce Principal 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 Principal 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 Principal 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.*

Though Ponce Principal Correctional Institution policy aligns with PREA Standard 115.33, while on site, this auditor could not conclude that Ponce Principal's Social Workers (who's responsible for PREA Orientation at Intake) are providing uniformed PREA Orientation information to all entering inmates. Though there were sign off sheets in the inmate files, this auditor asked each social worker what PREA information is provided? Each of the 2 Social Workers interviewed shared different PREA Information. Additionally, 5 out of the 26 interviewed inmates reported that they did receive the Ponce Principal's "End the Silence" PREA Orientation Pamphlet that the Social Workers claimed they give to each inmate during PREA Orientation at intake.

Additionally, there was no evidence that "Inmate Education" was occurring within 30-days of each inmate's intake. The 17 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 at Intake" process coupled with "PREA Comprehensive Inmate Education being non-existent, was confirmed during the interviews of 26 inmates. Zero inmates reported that they receive comprehensive PREA Education within 30 days of their arrival. Less the 30% could share to this auditor how PREA related to them, their rights to be free from sexual assault/harassment, and various reporting avenues. Finally, not all phones on the housing units were operable to call the posted PREA hotline on the housing units, nor were there any "Administrative Remedy" boxes to report sexual abuse/assault/harassment, or grievances on site at Ponce Principal. Not having these two sources of reporting made available to inmates, drastically impedes the inmate's ability to privately report and trust in the institution's ability to keep inmates safe from sexual abuse/sexual harassment.

This auditor recommended that Ponce Principal 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 "End the Silence" PREA Sexual Assault Awareness Brochure upon exiting the PREA Orientation with the Social Worker at intake. This auditor also recommended that Ponce Principal immediately conduct an institution-wide Comprehensive Inmate PREA Education, where inmates can participate, ask questions, and receive feedback from facilitators. Finally, this auditor recommended Ponce Principal demonstrate a consistency in practice over a period before compliance can be concluded. This PREA auditor concluded that Ponce Principal was not in compliance with PREA Standard 115.33. A CORECTIVE ACTION was recommended.

During DCRPR Ponce Principal's Corrective Action period, Ponce Principal 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 Principal inmates are required to view DCRPR's PREA video, as a part of their Comprehensive Inmate Education. Additionally, 28 randomly selected inmate intake PREA Orientation forms (Annex A) were received as evidence of consistently conducting uniformed PREA Orientation at intake (dates between 10/2021 through 4/2022). Ponce Principal has also revised their PREA Sexual Assault Awareness Brochures," and has shown signature evidence (on the Annex A form) of giving each inmate the DCRPR "PREA Sexual Assault Awareness Brochure" and making them available where inmates can have access. Ponce Principal also submitted photos of staff trainings and "No Tolerance of Sexual Abuse" information posters posted throughout the housing units (English and Spanish). Finally, Ponce Principal has demonstrated a consistency in practice for this auditor to conclude compliance.

This PREA auditor concludes that Ponce Principal 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 Principal 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 Principal 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 electronic submission of OISC Investigators who were specialized trained on 5/9/2018. This auditor also reviewed OISC's 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 Principal 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 Principal 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 Principal 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 Principal 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, 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 Principal 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)
- 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 Principal 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 Principal 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."*

This PREA auditor reviewed 11 random inmate social files and interviewed with two DCR-PR Ponce Principal Social Workers. This auditor verified that Ponce Principal consistently use an objective *Screening for Risk of Sexual Victimization and Abusiveness* tool (Annex B), and the screening tool contained all the components as identified in PREA Standard 115.41. Additionally, during this PREA Auditor's review of 11 random inmate social files, this auditor verified that each file had an (Annex B) risk assessment in it. However, the (Annex B) risk screening tools are not being completed in its entirety by social workers. This auditor reviewed the 11 random files and found that only 60% were completed in its entirety. 40% were either incomplete or partially completed. The incomplete or partially completed files had inmates who were assessed to be either victims or offenders, but not referred to mental health for a 14-day follow-up. Also, the recommendation section was not completed, which assists the housing security staff in properly placing inmates in the appropriate housing/programming assignments.

This auditor recommended that Ponce Principal 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" receiving a follow-up with mental health/medical practitioner (to assist in determining an inmate's housing and programming within the institution). Finally, this auditor recommended Ponce Principal social workers and mental health/medical team demonstrate a consistency in practice over a period before compliance can be concluded. This PREA auditor concluded that Ponce Principal was not in compliance with PREA Standard 115.41. A CORECTIVE ACTION was required.

During DCRPR Ponce Principal's Corrective Action period, Ponce Principal submitted photos and sign-in sheets of comprehensive staff refresher trainings, which included specific focus on Social Workers properly completing "PREA Victim/Offender Screening Forms" (Annex B) at intake and 14-day medical/mental health follow-up meetings. The refresher training was facilitated by Ponce Principal's

PREA Compliance Manager on 4/12/22. Ponce Principal also submitted 28 randomly selected inmate “PREA Victim/Offender Screening Forms” (Annex B) as evidence of consistently completing all sections, specifically recommendations section (random file selection dates were between 10/2021 through 4/2022). This auditor found that all “PREA Victim/Offender Screening Forms” (Annex B) were completed in their entirety, with proper referrals for those who screened to be “potential victims” or “potential offenders.” Finally, Ponce Principal submitted their training curriculum as evidence of content. Ponce Principal has demonstrated a consistency in practice for this auditor to conclude compliance.

This PREA auditor concludes that Ponce Principal is 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 Principal 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 Principal 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.”*

This PREA auditor reviewed 11 random inmate social files and interviewed with two DCR-PR Ponce Principal Social Workers. This auditor verified that Ponce Principal consistently use an objective *Screening for Risk of Sexual Victimization and Abusiveness* tool (Annex B), and the screening tool contained all the components as identified in PREA Standard 115.41. Additionally, during this PREA Auditor’s review of 11 random inmate social files, this auditor verified that each file had an (Annex B) risk assessment in it. However, the (Annex B) risk screening tools are not being completed in its entirety by social workers. This auditor reviewed the 11 random files and found that only 60% were completed in its entirety. Forty percent (40%) were either incomplete or partially completed. The incomplete or partially completed files had inmates who were assessed to be either victims or offenders, but not referred to mental health for a 14-day follow-up. Also, the recommendation section was not completed, which assists the housing security staff in properly placing inmates in the appropriate housing/programming assignments.

This auditor recommended that Ponce Principal 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” receiving a follow-up with mental health/medical practitioner (to assist in determining an inmate’s housing and programming within the institution). Finally, this auditor recommended Ponce Principal social workers and mental health/medical team demonstrate a consistency in practice over a period before compliance can be concluded. This PREA auditor concluded that Ponce Principal was not in compliance with PREA Standard 115.42. A CORECTIVE ACTION was required.



During DCRPR Ponce Principal’s Corrective Action period, Ponce Principal submitted photos and sign-in sheets of comprehensive staff refresher trainings, which included specific focus on Social Workers properly completing “PREA Victim/Offender Screening Forms” (Annex B) at intake. The refresher training was facilitated by Ponce Principal’s PREA Compliance Manager on 4/12/22. Ponce Principal also submitted 28 randomly selected inmate “PREA Victim/Offender Screening Forms” (Annex B) were received as evidence of consistently completing all sections, specifically recommendations section (random file selection dates were between 10/2021 through 4/2022). This auditor found that all “PREA Victim/Offender Screening Forms” (Annex B) were completed in their entirety, with proper referrals for mental health/medical follow up with those who screened to be “potential victims” or “potential offenders.” Finally, Ponce Principal has demonstrated a consistency in practice for this auditor to conclude compliance.

This PREA auditor concludes that Ponce Principal 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 Ponce Principal 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 Principal 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 Principal’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 a housing unit like the general housing units, which was single occupancy cells, single-showered, located on its own housing unit, and observable from the Master Control room. This auditor verified the same through onsite interviews with 10 randomly selected DCR-PR Ponce Principal Correctional Officers. Each shared that DCR-PR Ponce Principal 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 26 inmates who also verified that they have not been placed in any segregation location because of reporting a PREA-related incident while at Ponce Principal.

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

### **Standard 115.51 Inmate reporting**

- Exceeds Standard (substantially exceeds requirement of standard)

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

**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 Principal 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 Principal 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 Principal Correctional Institution’s policy does align with PREA Standard 115.51, however during inmate interviews, more than 80% of inmates did not know more than 1 way to report a PREA-related incident (if needed to do so). Most of the 26 interviewed inmates 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. 4 out of 26 inmates knew about other avenues to report. Only 3 out of 26 knew that their housing unit phone can be used to call a toll-free PREA hotline.

After further investigating, not all phones on the housing units are operable to call the posted PREA hotline on the housing units, nor are there any “Administrative Remedy” boxes to report sexual abuse/assault/harassment, or grievances on site at Ponce Principal. Additionally, visits have been paused (due to COVID-19 Pandemic), which cuts off another reporting avenue. Not having these three sources of reporting made available to inmates, drastically impedes the inmate’s ability to report, privately report and trust in the institution’s ability to keep inmates safe from sexual violence.

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 was able to attain a working phone, he called the PREA Hotline. The operator informed this auditor that the hours of this hotline service is only 8:00am-4:30pm Monday through Friday. The telephone access to report a PREA-related incident is not in service over the weekends. Finally, this auditor identified/verified during inmate, security staff, and social worker interviews that “Inmate Comprehensive PREA Education” is not occurring within 30-days of inmate arrivals. This lack of inmate education is evident through inmates having very little knowledge of PREA reporting avenues to report sexual abuse/harassment incidents.

This PREA Auditor recommended that DCR-PR Ponce Principal provide PREA Orientation to inmates at intake and “Comprehensively PREA Education” 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, DCR-PR Ponce Principal Correctional Institution was recommended to ensure that each phone on housing units 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 Principal install “Administrative Remedy” boxes throughout the institution, where all inmates can have frequent access. Ponce Principal should demonstrate a consistency in practice over a period before compliance can be concluded. This PREA auditor concluded that DCR-PR Ponce Principal Correctional Institution was not in compliance with PREA Standard 115.51. A CORRECTIVE ACTION was required.

During DCRPR Ponce Principal’s Corrective Action period, Ponce Principal submitted a random group of inmate sign in sheets as evidence of inmates receiving “PREA Education Video.” While conducting the onsite audit, this video was just being circulated to all DCRPR adult facilities. This auditor initially could not deem compliance, due to this PREA video just being circulated and not a consistent part of Ponce Principal’s practice. Now, all Ponce Principal inmates are required to DCRPR’s Institution-wide “PREA Education Video,” as a part of aligning with PREA Standard 115.33. Finally, Ponce Principal has shown evidence of giving each inmate the DCRPR “PREA Sexual Assault Awareness Brochure” at intake and making them available where inmates can have access. Ponce Principal is still waiting on

contract approvals and funding to get every phone working on inmate housing units. However, at least there's 2 of 4 working phones on each housing unit (some have 3 working), to provide access to the PREA Hotline. Also, Ponce Principal has added additional "Administrative Remedy" boxes throughout the institution (near each housing unit) to provide inmate access to reporting PREA. Finally, Ponce Principal has demonstrated a consistency in practice for this auditor to conclude compliance.

This PREA auditor concludes that DCR-PR Ponce Principal 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 Principal 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 115.52. DCR-PR Ponce Principal 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.

Though DCR-PR's Regulations and PREA Policy aligns with PREA Standard, after further investigating, not all phones on the housing units were operable to call the posted PREA hotline on the housing units, nor are there any "Administrative Remedy" boxes to report sexual abuse/assault/harassment, or grievances on site at Ponce Principal. Additionally, visits have been paused (due to COVID-19 Pandemic), which cuts off another reporting avenue. Not having these three sources of reporting made available to inmates, drastically impedes the inmate's ability to report, privately report and trust in the institution's ability to keep inmates safe from sexual violence.

This PREA auditor also interviewed 10 Security Supervisory staff, PREA Compliance Manager, the Superintendent, and 26 inmates. There was a consensus that "Administrative Remedy" (grievance) procedures are not being followed. Due to the non-existence of "Administrative Remedy" boxes, comprehensive inmate education, and lack of staff training, inmate did not understand this avenue of reporting and staff didn't understand procedures when inmates file grievances for sexual abuse.

This PREA Auditor recommended that DCR-PR immediately provide "Comprehensive Inmate Education" to all current inmates and future inmates within 30 days of their arrival. This would ensure each inmate know their rights to be free from sexual abuse/harassment, reporting avenues, and how they can report a PREA-related incident. Additionally, this auditor recommended Ponce Principal install "Administrative Remedy" boxes throughout the institution, where all inmates can have frequent access. Ponce Principal needed to demonstrate a consistency in practice over a period before compliance can be concluded. This PREA auditor concluded that DCR-PR Ponce Principal Correctional Institution was not in compliance with PREA Standard 115.52. A CORRECTIVE ACTION was required.

During DCRPR Ponce Principal's Corrective Action period, Ponce Principal submitted a random group of inmate sign in sheets as evidence of inmates receiving "PREA Education Video." This "PREA Education Video" provides inmates with information on reporting avenues of sexual abuse incidents, how to report, and "Administrative Remedy" purpose at DCRPR institutions. While conducting the onsite audit, this video was just being circulated to all DCRPR adult facilities. This auditor initially could not deem compliance, due to this PREA video just being circulated and not a consistent part of Ponce Principal's practice. Now, all Ponce Principal inmates are required to view DCRPR's "PREA Education Video," within 30-days after their intake. Finally, Ponce Principal has added additional "Administrative Remedy" boxes throughout the institution (near each housing unit) to provide inmate access to reporting PREA. Finally, Ponce Principal has demonstrated a consistency in practice for this auditor to conclude compliance.

This PREA auditor concludes that DCR-PR Ponce Principal Correctional Institution 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 Principal 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 115.53. DCR-PR Ponce Principal 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 Principal Correctional Institution's policy is aligned with PREA Standard 115.53, zero of 26 interviewed inmates could identify if Ponce Principal provided access to outside support services for inmates who reported sexual abuse. Though all 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 Principal 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 Ponce Principal 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 PREA Auditor recommended that DCR-PR immediately provide "comprehensive inmate education" to all current inmates and future inmates within 30 days of their arrival. This will ensure each inmate know their rights to be free from sexual abuse/harassment, reporting avenues, how they can report a PREA-related incident, and inmate access to outside support services. Finally, this auditor recommended Ponce Principal demonstrate a consistency in practice over a period before compliance can be concluded. This PREA auditor concluded that DCR-PR Ponce Principal Correctional Institution was not in compliance with PREA Standard 115.53. A CORRECTIVE ACTION was required.

During DCRPR Ponce Principal's Corrective Action period, Ponce Principal submitted a random group of inmate sign in sheets as evidence of inmates receiving DCRPR's "Comprehensive PREA Education Video." This DCRPR's "Comprehensive PREA Education Video" provides inmates at DCRPR institutions with education on reporting avenues of sexual abuse incidents, how to report, administrative remedies, and inmate access to outside confidential support services. Ponce Principal also submitted photos of inmates viewing DCRPR's "Comprehensive PREA Education Video," as well as posters posted around the facility, which identifies "Office of Women's Procurement" (and their telephone number) as their outside confidential emotional support services. Ponce Principal also submitted sign in sheets showing that staff personnel, contracted staff, and volunteers received Comprehensive PREA Refresher by Ponce Principal's PREA Compliance Manager (to fully understand PREA, its purpose, zero tolerance, inmate rights under PREA, prevention strategies, inmates reporting access, and Ponce Principal's coordinate response duties). Finally, Ponce Principal submitted email correspondence between Ponce Principal and DCRPR's finance department for telephones repair coordination and approval to add "Administrative Remedy" boxes throughout Ponce Principal. Ponce Principal has demonstrated a consistency in practice for this auditor to conclude compliance.

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

## Standard 115.54 Third-party 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 Principal 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 This auditor cannot conclude that Ponce Principal Correctional Institution is compliant with this PREA Standard, due to the language in their submitted "DCR Policy to Prevent, Detect, Report, and Respond to Sexual Violence in Correctional Institutions" being too general and give no specifics about how a person or inmate can provide a third-party report.

During the onsite Audit, this auditor did see an "End the Silence" PREA-related pamphlet in which all inmates receive upon their arrival to the institution. Inside this pamphlet's HOW TO REPORT section it stated, "DCR offers multiple ways to report sexual abuse and sexual harassment:

- Telephone (787) 332-7732
- Email: [prea@dcr.pr.gov](mailto:prea@dcr.pr.gov)
- Report to any staff, volunteer, contractor, or medical or mental health staff.
- Submit a grievance or sick call slip
- Tell a family member, friend, legal counsel, or anyone else outside the facility. They can report on your behalf by calling (787) 332-7732
- You can also submit a report on someone's behalf, or someone at the facility can report for you using the ways listed here."

Also, during inmate interviews, more than 80% 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 26 interviewed inmates about reporting avenues, most inmates could only know share 1 avenue ("tell an officer"). Due to inmates not having operable telephones to call the posted PREA Hotline, zero "Administrative Remedy" boxes, currently no visitations, and inmates not receiving Comprehensive PREA education within 30 days of their arrival, inmates are not attaining the knowledge of their third-party reporting rights and the procedures.

This PREA Auditor recommended that DCR-PR immediately provide "Comprehensive Inmate PREA Education" to all current inmates and future inmates within 30 days of their arrival. This ensures each inmate know their rights to be free from sexual abuse/harassment, reporting avenues (including 3<sup>rd</sup> Party Reporting), how to report a PREA-related incident, and inmate access to outside support services. Finally, this auditor recommended Ponce Principal demonstrate a consistency in practice over a period before compliance can be concluded.

This PREA auditor concluded that DCR-PR Ponce Principal Correctional Institution was not in compliance with PREA Standard 115.54. A CORRECTIVE ACTION was required.

During DCRPR Ponce Principal's Corrective Action period, Ponce Principal submitted a random group of inmate sign in sheets as evidence of inmates receiving DCRPR's "Comprehensive PREA Education Video." This DCRPR's "Comprehensive PREA Education Video" provides inmates at DCRPR institutions with education on reporting avenues of sexual abuse incidents, reporting avenues (including 3<sup>rd</sup> party reporting), how to report, administrative remedies, and inmate access to outside confidential support services. Ponce Principal also submitted sign in sheets showing that staff personnel, contracted staff, and volunteers received Comprehensive PREA Refresher by Ponce Principal's PREA Compliance Manager (to fully understand PREA, its purpose, zero tolerance, inmate rights under PREA, prevention strategies, inmates reporting access, and Ponce Principal's coordinate response duties). Finally, Ponce Principal submitted email correspondence between Ponce Principal and DCRPR's finance department for telephones repair coordination and approval. Ponce Principal has demonstrated a consistency in practice for this auditor to conclude compliance.

This PREA auditor concludes that DCR-PR Ponce Principal 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)
- 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 Principal 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 Principal 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 Principal’s policy seems to align with PREA Standard 115.61. However, when this auditor interviewed 18 staff, more than 90% did not fully know their responsibilities when a PREA-related incident is reported to them, and the coordinated response. Inmate interviews (26) 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 training and refresher training to all staff. From interviews and observations, staff were receiving training packets as their PREA training. Staff were not retaining this information, through this training/refresher training process. This recommended comprehensive staff training should entail a physical staff trainer presenting PREA Training to staff, using their approved Powerpoint Presentation. Also, this forum should allow staff to ask questions throughout the training. For refresher training, Ponce Principal’s staff trainer should conduct scenario-based trainings, spot-trainings, and short Q & A refresher trainings during shift meetings. This would allow the information to be better retained by staff. Finally, this auditor recommended Ponce Principal demonstrate a consistency in practice over a period before compliance can be concluded. This PREA auditor concluded that DCR-PR Ponce Principal Correctional Institution was not in compliance with PREA Standard 115.61. A CORRECTIVE ACTION was required.

During DCRPR Ponce Principal’s Corrective Action period, Ponce Principal submitted verification of staff comprehensive refresher training on PREA Standards. This training topics covered preventing, first responder roles, and reporting incidents of sexual abuse/harassment, opposite gender announcements when entering male housing units (all male facility), cross-gender/transgender searches, crime scene preservation where an alleged sexual abuse allegation is reported. Ponce Principal submitted refresher orientation/trainings classroom pictures, sign-in sheets, and training certificates for personnel files (dated 4/12/22) as evidence of conducting comprehensive staff training to their institutional staff. This training date entailed trainings to Ponce Principal their Civil Personnel, Corrections Officers, and Education staff. Ponce Principal also submitted pictures of signs (in English and Spanish) outside each housing unit door stating that opposite gender personnel must announce prior to entering. Finally, Ponce Principal has demonstrated a consistency in practice for this auditor to conclude compliance.

This PREA auditor concludes that DCR-PR Ponce Principal 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 Principal 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 Principal 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. Twenty-six (26) inmate interviews also verified that staff immediately responds 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 Principal 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 Principal 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 Principal 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 Principal’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 Ponce Principal Correctional Institution is in compliance with PREA Standard 115.63.

#### **Standard 115.64 Staff first responder duties**

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

**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 Principal 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 Principal 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 Principal’s policy seems to align with PREA Standard 115.64. However, when this auditor interviewed 17 staff, more than 90% did not fully know their responsibilities when a PREA-related incident is reported to them, and the coordinated response. Inmate interviews (26) 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 training and refresher training to all staff. From interviews and observations, staff were receiving training packets as their PREA training. Staff were not retaining this information, through this training/refresher training process. This recommended comprehensive staff training should entail a physical staff trainer presenting PREA Training to staff, using their approved Powerpoint Presentation. This training should allow staff to ask questions throughout the training. For refresher training, Ponce Principal’s staff trainer should conduct scenario-based trainings, spot-trainings, and short Q & A refresher trainings during shift meetings. This would allow the information to be better retained by staff. Finally, this auditor recommended Ponce Principal demonstrate a consistency in practice over a period before compliance can be concluded. This PREA auditor concluded that DCR-PR Ponce Principal Correctional Institution was not in compliance with PREA Standard 115.64. A CORRECTIVE ACTION was required.

During DCR-PR Ponce Principal’s Corrective Action period, Ponce Principal submitted verification of staff comprehensive refresher training on PREA Standards. This training topics covered preventing, first responder roles, and reporting incidents of sexual abuse/harassment, opposite gender announcements when entering male housing units (all male facility), cross-gender/transgender searches, crime scene preservation where an alleged sexual abuse allegation is reported. Ponce Principal submitted refresher orientation/trainings classroom pictures, sign-in sheets, and training certificates for personnel files (dated 4/12/22) as evidence of conducting comprehensive staff training to their institutional staff. This training date entailed trainings to Ponce Principal their Civil Personnel, Corrections Officers, and Education staff. Ponce Principal also submitted pictures of signs (in English and Spanish) outside each housing unit door stating that opposite gender personnel must announce prior to entering. Finally, Ponce Principal has demonstrated a consistency in practice for this auditor to conclude compliance.

This PREA auditor concludes that Ponce Principal 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 Principal 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 Principal 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, Superintendents, 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 Principal 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 Principal 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 with 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 Principal 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 Principal 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 Principal 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.*
4. *When it comes to confined and confined, surveillance will also include verification of their status.*
5. *If any other individual who has cooperated with an investigation expresses fear of retaliation, the DCRPR will take the necessary measures to protect him.*
6. *The obligation of the DCRPR to monitor will terminate when it determines that an allegation is unfounded.*

Additionally, DCR-PR Ponce Principal 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 Principal 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 Principal 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 Principal 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, “*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 services provided. This process must not exceed thirty (30) calendar days.*

This PREA also 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-  
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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 10 DCR-PR Ponce Principal Correctional Officers, Supervisors, and 26 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 Principal.

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

### **Standard 115.71 Criminal and administrative agency investigations**

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

**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 Principal 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 Principal 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 Principal 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 Principal 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 Principal 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*”  
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Evidence” is their standard in determining substantiation in investigations.

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

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### 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 Principal 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 Principal 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 Institutions, alleged victims are notified of their case, and it is documented. Further facility 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 Principal is in compliance with PREA Standard 115.73.

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### 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 Principal 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 Principal 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 Principal’s Superintendent to gain insight into disciplinary sanctions for staff PREA violations. Ponce Principal’s Superintendent informed this auditor that disciplinary actions for staff PREA violations range from reassignment, suspension, termination, and up to legal action taken. This auditor also corresponded with DCR-PR’s Human Resource Manager, who confirmed Ponce Principal 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 Principal 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 Principal 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 Principal 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 Principal’s Superintendent to gain insight into disciplinary sanctions for contractors and volunteers PREA violations. Ponce Principal’s Superintendent informed this auditor that disciplinary actions for volunteers and contractors PREA violations 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 Ponce Principal 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 Principal is in compliance with PREA Standard 115.77.

### **Standard 115.78 Disciplinary sanctions for inmates**

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

**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 Principal 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 Principal 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 Principal's Superintendent to gain insight into disciplinary sanctions for contractors and volunteers PREA violations. Ponce Principal's Superintendent informed this auditor that disciplinary actions for inmates are proportionate to the outcomes of the investigations. Ponce Principal's Superintendent shared the PREA violation disciplinary actions could range from program adjustments or relocation to other housing, up to transferring inmate to another DCR-PR institution with an increased level of security.

This auditor concludes that Ponce Principal 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)
- 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.**

The PREA Auditor reviewed DCR-PR Ponce Principal 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 policy language is aligned with PREA Standard 115.81, DCR-PR’s contracted medical staff (PMG) and Ponce Principal’s Social Workers are not working together to bridge the gap on 14-day follow up with inmates screened on the DCR-PR “Victimization and Abusiveness Screening tool (Annex B) at intake. Of 11 randomly selected inmate files, 45% of the Annex B were incomplete. Additionally, 5 inmates screened as victim or perpetrator and only one inmate received a 14-day follow up by mental health/medical documented in their file. If medical/social worker staff do not comprehend/take seriously the importance of conducting/completing victimization and abusiveness screenings upon inmate intake, as well as recommending the appropriate program/housing assignment, vulnerable inmates may be improperly place in programs/housing units with perpetrating inmates. This PREA auditor recommended that Ponce Principal facilitate a refresher training of all medical and mental health staff on PREA standards 115.41, 115.42, and 115.81. Additionally, Ponce Principal adjustments to conducting/completing victimization and abusiveness screening to ALL inmates at intake and 14-day follow ups should be monitored for consistency of practice over a period, before compliance can be concluded. This auditor concluded that Ponce Principal was not in compliance with PREA Standard 115.81. A CORRECTIVE ACTION was required.

During DCRPR Ponce Principal’s Corrective Action period, Ponce Principal submitted photos and sign-in sheets of comprehensive staff refresher trainings, which included specific focus on Social Workers properly completing “PREA Victim/Offender Screening Forms” (Annex B) at intake and 14-day medical/mental health follow-up meetings. The refresher training was facilitated by Ponce Principal’s PREA Compliance Manager on 4/12/22. Ponce Principal also submitted 28 randomly selected inmate “PREA Victim/Offender Screening Forms” (Annex B) as evidence of consistently completing all sections, specifically recommendations section (random file selection dates were between 10/2021 through 4/2022). This auditor found that all “PREA Victim/Offender Screening Forms” (Annex B) were completed in their entirety, with proper referrals for those who screened to be “potential victims” or “potential offenders.” Finally, Ponce Principal submitted their training curriculum as evidence of content. Ponce Principal has demonstrated a consistency in practice for this auditor to conclude compliance.

This PREA auditor concludes that Ponce Principal 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 Principal 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 Principal 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 Principal are highly responsive.

This PREA auditor concludes that Ponce Principal 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 Principal 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 Principal 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, Psychologist 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 26 inmates interviewed by this auditor verified that medical services at DCR-PR Ponce Principal provides continuous medical care and nurses come around for daily sick calls from inmates.

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

#### **Standard 115.86 Sexual abuse incident reviews**

- 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 Principal 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 Principal 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 Principal’s Superintendent, PREA Coordinator, PREA Compliance Manager, and PREA Regional Compliance Manager that Ponce Principal Compliance Manager conducts a bi-weekly PREA Institution Checklist and has monthly “Incident Review” meetings with the 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 Ponce Principal 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 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 Principal also submitted their DCR-PR “Policy to Prevent, Detect, Report, and Respond to Sexual Violence in Correctional Institutions (Data Collection and Revisions- Page 44) 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- Ponce Principal’s policy aligns with PREA Standard 115.87. However, this auditor was unable to verify through onsite interviews with DCR-PR- Ponce Principal’s PREA Coordinator Ponce Principal’s Superintendents, DCR-PR’s PREA Coordinator and Ponce Principal’s PREA Compliance Manager that DCR-PR made public annual reports (including data) of incidents of sexual violence within its institutions. Ponce Principal did not submit any recent annual reports for this auditor to consider as evidence.

This auditor recommended that DCR-PR- Ponce Principal submit their 2018, 2019, and 2020 Annual PREA-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. This PREA auditor concluded that Ponce Principal was not in compliance with PREA Standard 115.87. A CORRECTIVE ACTION was required.

During DCR-PR Ponce Principal's Corrective Action period, Ponce Principal submitted their DCR-PR 2018, 2019, and 2020 "Annual PREA Program Reports," "Monthly Data Reporting" (by incident-type, by each institution and by gender). Additionally, Ponce Principal submitted Corrective Actions taken to address PREA-Related incidents identified in their "Annual PREA Program Reports."

This PREA auditor concludes that Ponce Principal 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 Principal 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 Principal 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 Principal's Superintendents, DCR-PR's PREA Coordinator and Ponce Principal's PREA Compliance Manager that DCR-PR made public annual reports (including data) of incidents of sexual violence within its institutions. Ponce Principal 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-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. This PREA auditor concluded that Ponce Principal was not in compliance with PREA Standard 115.88. A CORRECTIVE ACTION was required.

During DCR-PR Ponce Principal's Corrective Action period, Ponce Principal submitted their DCR-PR 2018, 2019, and 2020 "Annual PREA Program Reports," "Monthly Data Reporting" (by incident-type, by each institution and by gender). Additionally, Ponce Principal submitted Corrective Actions taken to address PREA-Related incidents identified in their "Annual PREA Program Reports."

This PREA auditor concludes that Ponce Principal 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 Principal 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 Principal 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 verified 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 Principal’s Superintendents, DCR-PR’s PREA Coordinator and Ponce Principal’s PREA Compliance Manager that DCR-PR made public annual reports (including data) of incidents of sexual violence within its institutions. Ponce Principal’s Superintendents and DCR-PR’s PREA Coordinator also shared that data is retained and stored for a minimum of 10 years. However, at the time of this onsite audit, Ponce Principal 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-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. This PREA auditor concluded that Ponce Principal was not in compliance with PREA Standard 115.89. A CORRECTIVE ACTION was required.

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

This PREA auditor concludes that Ponce Principal 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.

Auditor Signature

Date