


ALSTON WILKES SOCIETY Policy and Procedures	Policy Number H809	Pages 4
	Related PREA Standards: 115.221, 115.261, 115.263, 115.265, 115.282, 115.283, 115.253, 115.264, 115.251, 115.254	
Chapter: Safety	Subject: Response to Sexual Abuse/Harassment/Misconduct	
Approved By:  S. Anne Walker, Executive Director	Effective Date: September 1, 2013 Revised Date: September 3, 2014	

I. **POLICY:** If a client makes a report of sexual abuse, harassment, and/or misconduct, it will be investigated thoroughly and with respect to the client's safety, dignity, and privacy.

II. **PROCEDURES:**

A. Any allegation, violation, or attempted violation of the agency's Sexual Abuse, Harassment, and Misconduct Policy towards a client:

1. During normal business hours, the Program Director, PREA Coordinator, and the facility's PREA Compliance Manager (the Facility Director) shall be contacted immediately. After hours, the staff on duty shall contact the on-call personnel for their facility for additional instructions and support (may need additional staff to report to facility, reporting resident accusations to contracting agencies, contacting management, etc.).
2. The PREA Compliance Manager for the facility will immediately contact the Contracting Officer Technical Representative (COTR) and inform them of the situation. Subsequently, within (1) business day after becoming aware of the incident, the PREA Compliance Manager for the facility will submit a written report to the COTR.
3. If the accused is another client and is not immediately taken into custody by local law enforcement (if applicable), the contracting agency along with the facility's PREA Compliance Manager will evaluate and determine if the accused will be removed/terminated from the facility. If the accused is an AWS staff member, following the investigation, and if all allegations are sustained, AWS' Director of HR will indicate, in writing, to the COTR the proposed plan of corrective action for the COTR's approval. The COTR has the right to determine if the AWS employee may continue to work with federal offenders. A summary of the investigative findings may be disclosed to AWS' HR Director.

4. As with any violation of AWS' Employee Standards of Conduct, AWS will not conduct an investigation without the COTR's approval and Investigative Authorities include, but are not limited to, investigations conducted by the Department of Justice, (e.g., the Federal Bureau of Investigation, U.S. Marshals Service, Office of the Inspector General, Office of Professional Responsibility, BOP Office of Internal Affairs, BOP Special Investigative Agent, BOP Special Investigative Supervisor, Equal Employment Opportunity Investigator) and others (e.g., Department of Labor, Office of Personnel Management, U.S. General Accounting Office), or any other agent or agency the COTR authorizes or directs to conduct an investigation.

B. Immediately following a sexual assault of a client:

1. If the victim has not showered, the resident shall remain in the accompaniment of staff (separated from the accused) and be instructed not to shower or change clothes, brush their teeth, use the restroom, wash hands, eat, or drink.
2. The staff shall immediately contact local law enforcement to respond, and if the resident is in need of medical attention, an ambulance should also be requested to respond to the facility.
3. Staff is to secure the area where the assault took place, restricting it from resident and staff access until the area is released by law enforcement responding to the incident.
4. The resident shall be referred to the local Victim Advocacy Center in order to receive confidential emotional support services related to sexual abuse. Their contact information shall be posted in your facility near the payphones for confidential reporting and in the Visiting Area for third party reporting. This referral shall be documented. The resident shall be informed of the local victim advocacy's Reporting Protocol as follows:

Victims are offered a sexual assault/forensic evidence collection examination regardless of their decision to participate with the criminal justice system. This is performed by a Sexual Assault Nurse Examiner (SANE) or other qualified medical provider at a Hospital Emergency Department. As far as law enforcement is concerned, no crime has occurred and there is no investigation until the victim chooses to make a full report and initiates law enforcement investigation. If the victim elects not to report the crime to law enforcement, following the completion of the medico-legal exam, the SANE nurse will turn over the sealed forensic evidence collection kit and all physical evidence to the law enforcement agency with jurisdiction without providing any personal identifying information on the victim. The local rape crisis program, serving the county in which the sexual assault occurred, will receive a sealed envelope (with no identifying information on the outside containing the anonymous reporting protocol victim contact information) for purposes of contacting the

victim to advise of the one year storage expiration date if no report/investigation has been initiated after 11 months of storage.

5. Forensic medical examinations will be provided free of charge to the victim. The victim will be provided with unimpeded access to emergency and crisis intervention services, including, if necessary, a referral for a mental health evaluation or treatment.
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- C. Staff shall accept reports of sexual abuse, sexual harassment, sexual misconduct, and retaliation by other residents or staff for reporting sexual abuse/harassment/misconduct and staff neglect or violation of responsibilities that may have contributed to such incidents. Reports can be made by a resident verbally, in writing, anonymously, and from third parties and shall promptly document any verbal reports. Report can also be made by writing the PREA Coordinator, reporting on the agency website, and by reporting directly to the local victim advocacy center with which we have a memorandum of understanding with or the Bureau of Prisons. How to make a third party and anonymous report of sexual abuse and sexual harassment is posted on the agency website. The same attention and services will be offered to a resident who reports a sexual assault days or weeks after the alleged assault.
 - D. If a resident reports that a sexual assault/abuse took place at another facility or institution, the Facility Director shall notify the head of the facility or appropriate office of the agency where the alleged abuse occurred. Notification should happen as soon as possible, but no later than 72 hours after it was reported. Such notification shall be documented.
 - E. All allegations of sexual abuse/harassment/misconduct shall be taken seriously by staff, recognized as traumatic to the victim and staff shall be sensitive at all times to the needs and emotions of the victim.
 - F. Confidentiality and resident privacy shall be maintained at all times, with only those who have a direct "need to know" having access to the personal information and details of the victim and alleged perpetrator.
 - G. The facility's PREA Compliance Manager must provide an incident report in response to any alleged consensual activity involving clients to the COTR.

H. Protection against retaliation:

1. For at least 90 days following a report of sexual abuse, the facility's PREA Compliance Manager will be responsible for monitoring the conduct and treatment of the resident(s) or staff that made the report, and the resident(s) who suffered the sexual abuse. This is to determine any possible retaliation by residents or staff towards these individuals.
2. Things to monitor (as applicable) include resident incident reports, attendance/participation in required programming, periodic status check of resident, and treatment of staff member by co-workers.
3. The monitoring shall cease if the allegations is determined to be unfounded. The monitoring shall continue for longer than 90 days if the initial monitoring indicates a continuing need.
4. If any possible retaliation is determined by the PREA Compliance Manager, this must be reported immediately to the Director of RRC Services and the PREA Coordinator.