# Kehoe Correctional Consulting, LLC P.O. Box 1265 Midlothian, VA 23113 (804) 873-4949

e-mail: <u>charlesjkehoe@msn.com</u> December 18, 2014

Mr. J. Jermaine Greene, Sr. Associate Court Administrator Northampton County Court of Common Pleas Courthouse 669 Washington Street Easton, PA 18042

RE: Final PREA Report for the Northampton County Juvenile Justice Center

Dear Mr. Greene:

Attached to the email, with this letter, you will find the Final PREA Report for the Northampton County Juvenile Justice Center. I am pleased to inform you that the Northampton County Juvenile Justice Center now meets all the requirements of the Prison Rape Elimination Act and is now a PREA Certified Juvenile Facility.

You can be very proud of the work you and your staff have done to come into compliance with the national PREA Juvenile Facility Standards. I especially want to thank Stephen Tone, Meredith Kresch, and Koury Cook for their tireless commitment to making this certification a reality. You and the Judges have demonstrated that Northampton County is playing a leadership role in advancing the field of juvenile justice by making juvenile detention facilities in the Commonwealth of Pennsylvania safer environments for juvenile offenders and employees.

I wish you all the best in the coming year.

Sincerely,

Charles J. Kehoe, ACSW, CCE

Charle John

Certified PREA Auditor

# PREA AUDIT: AUDITOR'S SUMMARY REPORT JUVENILE FACILITIES

NATIONAL PREA RESOURCE CENTER

	andread and the shall be the term of the term of the state of the stat		AND THE PROPERTY OF THE PROPER		
Name of Facility: Northampton County Juvenile Justice Center				and the second	
Physical Addre	ss: 650 Ferry St., E	eston, PA 18042		ANDREWA GENERALINA DENNI DENALE AND DANGE DENDI DEN DE	
Date report su	bmitted: December	18, 2014			эргичносонног
<b>Auditor inform</b>	ation: Charles J. K	ehoe			3
Address: P.	O. Box 1265, Midlo	thian, Virginia 231	L13	oonaanaanaanaanaanaanaanaanaanaanaanaana	**************************************
Email: <u>char</u>	<u>lesjkehoe@msn.co</u> r	<u>n</u>			
	number: (804) 873	-,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		BRANCISMI (1880-1880) ENGLAS PROGRAMA (1880-1881) ENGLAS P	
Date of facility	visit: April 22 – 25	5, 2014			-
Facility Inform					š
Facility Mailing (if different from					Que
	nber: (610) 258-28	80			
The Facility is:	om o en esperante propriata de la proposition de la final de la fi	□ <b>XX</b> County	□Federal	БАЛБАНАН ИНТЕНТИТЕТИТЕТИТЕТИТЕТИТЕТИТЕТИТЕТИТЕТИТ	
The racincy is.	☐Private for profit	□Municipal	□State	pergrangungstreptungssylvelikaden median Jamelus dammedakaden etistentu dammedamiden kenten dammedamiden best	
	☐Private not for pro	fit			
Facility Type:	xx Detention	Correction	□Other:	SI KARIK PERMATA SEBUTA PARAMENAN TERPATA PARAMENAN PERMATA PANTEROPA PARBERAN SEBURAH SEPATA TAN PERMATA SEPAT	
COLUMN TO THE PROPERTY OF THE	Compliance Manag	er: Koury Cook	A PORTO DE LA POPEZA A POPEZA A REGISTA DE REGISTA DE LA PORTO DE LA PORTO DE LA PORTO DE PORTO DE PORTO DE P	Title:	Training and Compliance Manager
Email Address	kcook@northamp	toncounty.org	enal franklikken hervelen kritiskeliske i Rebeste i Leiker (a. 1960 in 1970). •	Telephone Number:	610-559-
Agency Inform	ation				
·	cy: Northampton Co		***************************************	*****	
Governing Aut	hority or Parent Ag	ency: (if applicable)	) Northamptor	n County Court of Co	ommon
Physical Addre	ss: Courthouse, 66	9 Washington St.,	Easton, PA 18	3042	
Mailing Addres					
(if different from Telephone Nur			VARIANT - 18-10-18-18-18-18-18-18-18-18-18-18-18-18-18-	isaladada kalabaha da kaliga a kalisida di Helifa da dai ya da adali da dake ka La 1987a i la ba isake ka ke a	and a rest of the second and the second seco
-	ixecutive Officer				
y en grant normalista de como		nichte der Schale der S Historie der Schale		Associate Court Ad	ministrator
Name: J. Jermaine Greene, Sr. Title:					
Email Address:jgreene@northamptoncounty.org Telephone: 610-559-6701					
Agency Wide PREA Coordinator					
Name: Meredith Kresch Title: Administrative Assistant			stant		
Email Address: mkresch@northamptoncounty.org					
LIIIGII AUUI C33	Ki Cacilwiloi didi	p.co.icoaiicy.org			

# **AUDIT FINDINGS**

#### **NARRATIVE:**

The PREA Audit of the Northampton County Juvenile Justice Center (NCJJC) was conducted on April 22, 23, 24, and 25, 2014. The Designated Auditor was Charles J. Kehoe of Midlothian, Virginia.

The auditor wishes to extend his deepest appreciation to Associate Court Administrator J. Jermaine Greene, Sr., NCCJC Operations Director (i.e. Superintendent) Stephen L. Tone, PREA Coordinator and Administrative Assistant, Meredith Kresch, Compliance, Training, and PREA Manager, Koury Cook, and all the employees of this facility for their professionalism, hospitality, and kindness.

Originally, the audit was scheduled to be done in March of 2014, but the facility requested a change in dates on February 13, 2014. The dates of April 22 - 25 were agreed upon and an amended notice was posted throughout the facility.

Meredith Kresch, PREA Coordinator, emailed the facility's Mission and Vision Statements, policies and procedures related to PREA, table of organization, the complete training packages for employees and residents, including PowerPoints, acknowledgement forms, and exams, facility floor plans, shift schedules, and a statistical report that describe the admissions and releases and a demographic profile of the residents to the Auditor on April 16, 2014.

The Auditor contacted Just Detention International on April 19, 2014 to inquire if that agency had received any information regarding the NCJJC. A check of their records showed no complaints on file regarding the NCJJC.

On April 22, 2014, Mr. Kehoe conducted a telephone interview with Dr. Robert W. Gill, Co-Director of Pennsylvania Forensic Associates (PFA). This agency is the designated victim advocacy agency that will provide emotional support and mental health services to a resident in the event he or she is sexually abused. Dr. Gill explained the scope of their services and stated he was not aware of any resident being sexually abused or harassed in the NCJJC. He said PFA has provided services to residents who have reported being sexually abused while in the community.

The tour of the NCJJC was conducted on April 22, 2014 from 4:35 p.m. to 6:20 p.m. Accompanying the Auditor on the tour was the Meredith Kresch, Administrative Assistant and PREA Coordinator, and Koury Cook, Compliance, Training and PREA Manager. All areas where residents may be found were seen, including the courtroom. Ms. Kresch gave the auditor a list of all current employees and a list of all residents. Residents who were identified as being in specialized categories were also identified. The Auditor randomly selected a list of residents, by living unit, and staff, by shift, to be interviewed, in addition to those who are in specific groups.

The PREA Audit Entrance Meeting was held in the Conference Room in the Administrative Suite at 8:40 a.m. on Wednesday, April 23, 2014. Mr. Greene, Mr. Tone, Ms. Kresch, and Mr. Cook were joined by Jennifer Lynn, PFA Therapist, and Chris Naugl, Northampton County Prison PREA Coordinator. The Auditor thanked the facility leadership for being involved in the PREA process and for being one of the early juvenile detention facilities in the country to request an audit. The Auditor explained the audit process and reviewed the Audit Schedule with the administrative team. The Auditor then provided the random list of residents and staff to be interviewed.

It should be noted that this facility was in the middle of a leadership transition. Jermaine Greene, Sr. was the Director of Operations (Superintendent). He was recently promoted to his position of Associate Court Administrator. Stephen L. Tone, formerly an adult probation officer, was appointed Operations Director. The Chief Judge of the Common Pleas Court is considered the "agency director" and has the final authority on matters related to the NCJJC. Mr. Greene is his designee. Mr. Tone reports to Mr. Greene.

Mr. Greene was interviewed as the Agency Director's Designee and also participated in the interview with the Operations Director (Superintendent), Mr. Tone, since Mr. Greene had the most current history of the agency activities toward full compliance with PREA Standards.

This facility has not had any allegations of sexual abuse or sexual harassment so there were no investigative reports to review.

Eleven interviews were conducted of randomly selected residents. In addition, seven other interviews were conducted with residents who were identified because they had reported a prior victimization, were disabled or had limited English ability, or who identified themselves as being Gay. There were no transgender residents. All the residents reported that they felt safe in this facility and that they are treated well by the staff.

Ten youth care workers who were randomly selected by the auditor from all shifts, were interviewed. Eighteen interviews were conducted with staff or contractors in specialized areas and included the Agency Director (Designee), Superintendent, PREA Manager, investigator, first responders, therapists (mental health professionals), case manager, counselors (intake and screening), an Incident Review Team member, mid-level managers, the supervisor who monitors for retaliation, non-security first responder, the Human Resource Manager, Deputy Director for Treatment, Deputy Director for Operations, the physician, a volunteer, and a contractor. It should be noted that since this is a relatively small facility, several of the staff have multiple responsibilities so a few individuals were interviewed twice if their duties covered more than one specialized area. In all, the auditor conducted 46 interviews.

The auditor now finds that all corrective actions have been completed. The Northampton County Juvenile Justice Center is now in full compliance with the national PREA Juvenile Facility Standards.

Interviews with residents clearly indicated that they are well informed about PREA, their rights, and how to report an abuse. New admissions are informed about PREA within minutes of admission. All staff who are authorized to do admissions are well trained on how to conduct the PREA interview and education section of the admission process. The academic program at the facility is provided under an agreement with the Colonial Intermediate Unit #20. As part of the academic program, teachers provide a PREA class to students using illustrated materials the residents refer to as "the comic books." Students are tested at the completion of the PREA training.

Staff training is very comprehensive. Refresher training is provided at least once a year, usually more often. During interviews with the Youth Care Workers, it was obvious they had all received the training and that the training has become part of the culture of this facility. Youth care workers described procedures for the preservation of evidence, protecting residents from harm or threats of retaliation, and the mandatory reporting requirements. The training curriculum was reviewed and found to be very complete. Scenarios and tests are included in the instruction. Training records were reviewed and provided documentation that the training was provided. Employees were tested at the completion of each section of the PREA training. Training materials included information from the National Institute of Corrections, American University Washington College of Law, and subject matter that was developed by the facility.

The auditor was impressed with the 74 cameras that are positioned throughout the facility. The Master Control Room has several large screens that are showing what the cameras are viewing throughout the facility. The resolution of the cameras and wide-screens are excellent. Individuals can be easily identified with these cameras. The system has an automatic 90 days of storage.

Medical and mental health services are provided to the residents of the NCJJC. Comprehensive mental health services are provided by Pennsylvania Forensic Associates (PFA). Medical services are provided by Dr. Albert B. DeFranco, M.D. Both the staff from PRA and Dr. DeFranco have been PREA trained and have received the required background checks.

The NCJJC and the Easton Police Department have now entered into an Agreement of Cooperation which clearly states that the Easton Police Department will investigate all allegations of sexual assault, abuse or misconduct. NCJJC supervisors have taken the National Institute of Corrections Online Three-Hour, PREA Investigator Training and have certificates that documents they completed the course. This enables them to conduct administrative investigations, but they cannot conduct criminal investigations since they are not law enforcement officers.

The facility's staffing plan has been rewritten and is in now in compliance with the standard.

During the audit, it was learned that the hospital where residents would normally be taken could not provide SAFE/SANE Forensic Services. Another hospital in the immediate area was identified as being able to provide these services and the auditor confirmed that the hospital would provide SAFE/SANE forensic services to any victim of a sexual assault or abuse from the NCJJC.

While the facility has a means of collecting data regarding sexual assaults, the NCJJC did not publish an annual report as required by Standard 115.388 that reports data regarding sexual assaults and sexual harassment and the facility's continuous effort to comply with all the PREA standards. This has been corrected with the publication of an annual report that is available to the public.

When the on-site audit was completed, the auditor conducted an exit meeting at approximately 3:00 p.m. While the auditor could not give the facility a final finding, as there were issues needing further attention, the Auditor did give an overview of the audit and thanked the Associate Court Administrator, the Operations Director, and the staff of the Northampton County Juvenile Justice Center for their hard work and commitment to the full implementation of the Prison Rape Elimination Act.

#### **DESCRIPTION OF FACILITY CHARACTERISTICS:**

#### **Mission Statement**

The Mission of the Northampton County Juvenile Justice Center is to provide leadership and instill positive change for youth, family units, and communities. Accountability is a vital component and each child will be provided with legitimate alternative pathways to adulthood with equal access. Public safety is a principle concern in all of our practices and policies as well as the safety and welfare of each juvenile in our care. We operate with professionalism, competence, and honesty in the performance of our duties as juvenile care professionals while reducing recidivism.

### **Vision Statement**

The Northampton County Juvenile Justice Center's professional care workers value each child's potential to lead successful and productive lives. Our vision is to teach children to value family and community through coordinated efforts. We will assist each child in experiencing success in life by making the appropriate choices. We assume this responsibility through an understanding that our actions affect children today and will determine the quality of our tomorrow.

## **Facility Description**

The NCJJC was opened in January 2001 at 650 Ferry Street in Easton, PA. The need to upgrade and expand the existing juvenile detention center drove the decision for a new facility. The facility was designed to provide juvenile detention services and a residential treatment program under one roof, but enable the two programs to operate virtually independently. The facility provides a comfortable, safe, and secure environment while the programs hold youth accountable for their behaviors. In 2011, four additional housing units were added to bring the current design capacity to 84 residents. Sixty beds are in single occupancy rooms and 24 beds are in multiple occupancy rooms. There are no open bay dorms. Most of the sleeping rooms are referred to as "dry rooms" because they do not have a toilet or sink

facilities in the room. There are video cameras in every housing pod and in halls and in all areas where residents may be found. The facility has been well maintained and was clean and orderly on the days of the audit.

The intake area, a dining hall, gym, and outdoor recreation area serve both the detention and treatment programs. The facility is licensed by the Pennsylvania Department of Public Welfare.

### **Population Demographics**

While the two programs can serve youth between 10 and 21 years of age, the youngest youth admitted were 12. There were no admissions older than 20. The two oldest age groups were 17 and 18. Eighty-one percent of the admissions were males and 19% were female. Approximately 45% of the admissions were Out-of-County Juveniles which reflects the facility's role as a regional provider of detention and treatment services.

## **Detention Program**

The detention program has three housing pods with 12 beds each for a total of 36 detention beds. The purpose of the detention unit is to detain youth who require secure care pending their adjudication and dispositional hearings. Youth who are awaiting placement or release are also held in detention. The detention facility is considered maximum security and all the residents are locked in their rooms at night. The detention program is a highly structured program that focuses primarily on behavior and education. Because this is a temporary holding program, counseling services are primarily focused on residents who need short term counseling or those who are already in a program. The education program is administered by the Colonial Intermediate Unit #20. The average length of stay in detention is approximately 15 days.

# **Treatment Programs**

The treatment program has four housing pods with 12 beds each for a total capacity of 48 beds. There are three different treatment programs operated much like a staff operated group home. Residents are not locked in the rooms for any reason. The Short Term Offenders (STOP) is a graduated sanction program that functions much like an eight-bed group home. The average length of stay is 29 days.

The Specialized Treatment Unit is a 12-bed unit designed for the treatment of youth adjudicated for more serious charges such as sexual offenses, arson, and domestic violence. This program provides individual and family therapy and a behavior modification program. The average length of stay is 12 to 18-months.

The Treatment Program is an 12-bed group home type program for males. The focus in this program is to hold youth accountable for their behavior, protect the public and teach residents skills which will enhance their successful return to the community. Family involvement is essential in this program. The average length of stay is six to nine months.

The Female Residential Treatment Program is a 12-bed group home type program designed specifically for female juveniles. This gender specific program is individualized to meet the specific treatment needs of the female resident. Thus, the length of stay will vary.

The purpose of all the treatment programs is to keep residents close to home where families can more easily participate in therapy and counseling sessions and to provide a high level of professional counseling services to offenders.

# **Overall Impressions**

The NCJJC is an excellent program that is built on principles of collaboration and professionalism.

Agreements and contracts with other agencies and service providers have enabled a strong collaborative culture to develop in an environment where teamwork is seen as a pathway to helping residents. For example:

Pennsylvania Forensic Associates (PFA) is a community-based program that provides treatment, training and consultation services to staff and selected specialized residents of the NCJJC. Specialized residents include sex offenders, fire setters, violent youth, as well as youth previously unsuccessful in other treatment programs. Consultation is also provided to detention center staff as needed and regularly scheduled training is provided on a variety of subjects concerning treatment and management of the juvenile offenders. PFA has four full-time staff assigned to the NCJJC. PFA is also the designated agency for providing emotional support to victims of sexual assault in this facility.

The Colonial Intermediate Unit #20 operates and manages the education program. In addition to providing for the educational needs of residents, this school unit also provides a 2 and a half hour PREA class for all residents on the facility. This is an impressive program that combines a curriculum that has been developed by American University Washington Law School with a curriculum that was developed by staff at the facility.

The Pennsylvania Department of Public Welfare also collaborates with the NCJJC and oversees state regulations and standards to ensure the quality of care at this facility remains a model for the Commonwealth of Pennsylvania.

Overall, the Auditor was impressed with this very comprehensive program and its staff and residents.

#### **SUMMARY OF AUDIT FINDINGS:**

Number of standards exceeded: 3

Number of standards met: 37

Number of standards not met: 0

Number of standards not applicable 1

Standard Prevention Planning § 115.311 Zero tolerance of sexual abuse and sexual harassment; PREA coordinator.		
The state of the s	☐ Exceeds Standard (substantially exceeds requirement of standard)	
	$\square$ XX Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)	
	□ Does Not Meet Standard (requires corrective action)	

While the staff, residents, volunteers, and contractors are aware the NCJJC has a zero tolerance of sexual abuse and harassment and this zero tolerance is addressed in training and resident education programs, the wording of the NCJJC's policy was not a strong affirmative statement. Standard 115.311 explicitly states, "An agency shall have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment and outlining the agency's approach to preventing, detecting, and responding to such conduct." The NCJJC policy did not address sexual harassment in the policy or in the agency's approaches to preventing, detecting, and responding to such conduct. The agency revised its policy which is now stated as follows: "The NCJJC has established this zero tolerance policy in congruence with the Prison Rape Elimination Act of 2003 which establishes a zero tolerance standard for the incidence of inmate sexual assault and rape along with staff to inmate sexual assault and rape and sexual harassment. All sexual activities and sexual harassment between juveniles and juveniles, staff and juveniles, volunteers or contract personnel and juveniles, regardless of consensual status, are prohibited and subject to administrative and criminal disciplinary sanctions outlined in the PREA standards as well as Pennsylvania state law." The Juvenile Center also will:

- Enforce a zero -tolerance environment for sexual abuse and harassment in the Northampton County Juvenile Detention Center (NCJJC),
- Make the prevention of sexual abuse a top priority in the (NCJJC),
- Develop and implement practices which comply with the National Standards to Prevent, Detect and Respond to Prison Rape published by the USDOJ on June 20, 2012,
- Make available any data and information on the incidence of sexual abuse in the (NCJJC),
- Include the standardized definitions in (NCJJC) policies,
- Clearly identify and express the accountability of all (NCJJC) staff, including the Director, when dealing with incidents of sexual abuse,
- Protect the Eighth Amendment rights of juveniles in the custody of the (NCJJC),
- Increase the efficiency and effectiveness of programs within the (NCJJC) by providing a safe environment for juveniles to be free from sexual abuse within the facility."

The agency's specific steps to prevent, detect, and respond to sexual abuse and harassment are identified in other agency policies.

This standard also states that the agency "shall employ or designate an upper-level agency-wide PREA coordinator with sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities." Meredith Kresch is the PREA Coordinator. The PREA Coordinator states she has the time to manage her PREA responsibilities along with her other duties. Koury Cook assists Mr. Kresch as the PREA Manager and is responsible for all PREA training and policy development. He is also responsible for all general staff training and maintaining compliance with DPW regulations.

The agency's revised policy meets the standard.

§ 115.312 Contracting with other entities for the confinement of residents.
☐ 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)
☐ XX Not Applicable
NCJJC is a juvenile detention facility with a residential treatment program in the same facility. This facility does not have the authority to contract with other agencies for the confinement of residents. If a resident requires placement in another facility, the Juvenile Probation Department will make such as recommendation to the Court of Common Pleas and the Judge will determine if another placement is appropriate and so order.
Standard
§ 115.313 Supervision and monitoring
☐ Exceeds Standard (substantially exceeds requirement of standard)
☐XX Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

The NCJJC operates under the regulations and standards of the Pennsylvania Department of Public Welfare for juvenile detention facilities. These regulations require a staff-to-youth ratio of 1:6 for juvenile detention facilities, 1:8 for treatment programs, and 1:12 ratio for sleeping hours in both programs. Other than this, the NCJJC did not have a staffing plan that met the requirements of the standard, at the time of the audit. During the corrective action period, the agency developed a very comprehensive staffing plan that now takes into consideration generally accepted detention and residential practices, any findings inadequacy from internal or external oversight bodies, all components of the facility's physical plant, the composition of the resident population, the number and placement of supervisory staff, institutional programs occurring on particular shifts, the prevalence of substantiated and unsubstantiated incidents of sexual abuse, or other relevant factors. The staffing plan requires that the plan be reviewed at one of the first administrative meetings at the start of the year. The plan also expressly states that the PREA Coordinator will be a participant in the meeting.

The NCJJC has an outstanding video monitoring system. Seventy-four cameras are located throughout the facility. The qualities of the images on the wide-screens in the Control Room are of the highest quality.

Two of the three intermediate/supervisory level staff who reported they did unannounced rounds stated they did not document those rounds. One administrator reported that she did not announce when she came onto the pod. Since the audit, the facility amended Policy 6.09 regarding unannounced rounds and announcing when a member of the opposite gender enters a living unit. Training was provided to the staff regarding the revised policy. All unannounced rounds are now documented in the Rounds Tracking Log Book. This log book is reviewed by the PREA Manager at least monthly. Documentation was provided to the auditor.

NCJJC now meets this standard.

Ctandard

Standard § 115.315 Limits to cross-gender viewing and searches.
☐ Exceeds Standard (substantially exceeds requirement of standard)
$\square$ XX Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)
The NCJJC's policies and procedures meet the requirements of the standard and residents and staff confirmed that youth care workers do not perform cross-gender pat-down or strip searches. The training curriculum does address all youth care workers in how to conduct cross-gender searches and how those are to be documented. However, all staff indicated cross-gender searches are not permitted in the facility. Residents reported that their privacy is respected and that staff of the opposite gender would not view them in the shower, performing bodily functions, or changing clothes except in exigent circumstances or when it might be incidental to routine room checks.
Standard § 115.316 Residents with disabilities and residents who are limited English proficient.
☐ Exceeds Standard (substantially exceeds requirement of standard)
☐ XX Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)
The facility's handbooks for residents in detention and treatment programs, the "Blue Brochure," and the educational materials used in the school for resident education were only printed in English. These documents have now been printed in Spanish.
Standard § 115.317 Hiring and promotion decisions.
☐ Exceeds Standard (substantially exceeds requirement of standard)
☐ XX Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Not Meet Standard (requires corrective action)
The NCJJC met all the requirements of this standard except subsection (h). During the corrective action period, the Court of Common Pleas informed the NCJJC that it could provide information on substantiated allegations of

The NCJJC met all the requirements of this standard except subsection (h). During the corrective action period, the Court of Common Pleas informed the NCJJC that it could provide information on substantiated allegations of sexual abuse or harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work.

At the time of the audit, five-year background on the teachers had not been done, but before the Interim Report was submitted this was corrected and all background checks are current.

During the Audit, there was discussion about an alternate pediatrician that the regular pediatrician would use if he is not available to the NCJJC. The facility has provided documentation that the alternate pediatrician has had all the required training and a background check.

Standard § 115.318 Upgrades to facilities and technologies.
☐ XX Exceeds Standard (substantially exceeds requirement of standard)
☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (requires corrective action)
The NCJJC considered all Prison Rape Elimination Act when the new addition was added in 2011 and the 74 cameras were installed.
Standard Responsive Planning § 115.321 Evidence protocol and forensic medical examinations.
☐ Exceeds Standard (substantially exceeds requirement of standard)
☐ XX Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (requires corrective action)
During the audit, there was some confusion regarding where the facility would take a resident who had been sexually assaulted if a forensic exam was needed. On October 21, 2014, the Auditor spoke with the Patient Care Manager at St. Luke's Hospital, Anderson Campus in Easton, PA. The Patient Care Manger confirmed that St. Luke's Hospital Anderson Campus does have pediatric SAFE and SANE nurses available and that the hospital would provide forensic medical examinations for the NCJJC. This was later confirmed in writing to the auditor.
It was also unclear as to which law enforcement agency would investigate an allegation of sexual assault and sexual abuse. On November 6, 2014, the auditor received written confirmation from the Easton Police Department that it would conduct all sexual assault investigations that occur at the NCJJC and that the Easton Police Department will be using the PREA training protocols.
Supervisors at the NCJJC have completed the National Institute of Corrections online training program for PREA Investigators and are qualified to conduct administrative investigations that would not be criminal investigations.
Pennsylvania Forensic Associates is the designated agency to assist as a victim advocate in the event of a sexual assault.
Standard § 115.322 Policies to ensure referrals of allegations for investigations.
☐ Exceeds Standard (substantially exceeds requirement of standard)
☐ XX Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (requires corrective action)

In addition to what has already been stated in the response to standard 115.321, this standard requires that the agency have a policy that allegations of sexual abuse are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior and that the policy be made available publically either on the agency's Web site or in some other form. At the time of the audit, it was not clear as to which agency would be conducting the investigations.

As reported in 115.221, on November 6, 2014, the auditor received written confirmation from the Easton Police Department that it would conduct all sexual assault investigations that occur at the NCJJC and that the Easton Police Department will be using the PREA training protocols. The Easton Police Department has the legal authority

to conduct such investigations. In addition, NCJJC supervisors have completed the National Institute of Corrections online training program for PREA Investigators and are qualified to conduct administrative investigations that would not be criminal investigations.

Standard – TRAINING AND EDUCATION § 115.331 Employee training.
☐ XX Exceeds Standard (substantially exceeds requirement of standard)
☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)
The NCJJC has an outstanding training program for employees that is very comprehensive in scope and includes scenarios and PowerPoint presentations. All employees are tested following major sections of the training. Training records document an employee's participation in the training and understanding of the material. All nevel employees receive the required training and refresher training is provided at least once per year. The training materials are drawn from a number of sources including the PREA Resource Center and the National Institute of Corrections.
Standard § 115.332 Volunteer and contractor training.
☐ Exceeds Standard (substantially exceeds requirement of standard)
☐ XX Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)
Volunteer and contractor training meets the requirements of the standard. Interviews with contractors and volunteers documented they received the training and understand the facility's policies and procedures regardin PREA. The NCJJC also documents that the contractors and volunteers have received the training and understand the material
Standard § 115.333 Resident education.
☐ XX Exceeds Standard (substantially exceeds requirement of standard)
☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (requires corrective action)
The resident education program begins at Intake when the youth care worked does the initial screening for risk and explains the juvenile his/her rights and reviews the PREA brochure (known by the residents as the "Blue

The resident education program begins at Intake when the youth care worked does the initial screening for risk and explains the juvenile his/her rights and reviews the PREA brochure (known by the residents as the "Blue Brochure"). Within the first 40 hours the juvenile is in the facility, a member of the Education Department staff will provide a class on PREA to the new residents. This includes a presentation using a publication titled "PREA Educational Information for New Residents" and a PowerPoint. In addition, the resident is given "End Silence...Youth Speaking Up About Abuse in Custody" which was created by The Project on Addressing Prison Rape at the American University, Washington College of Law. There are different versions of this publication to address specific needs of residents. The residents refer to these documents as the "comic books." It should be said that this expression is used respectfully by the residents. Following the class, residents take a written exam and confirm in writing they have received the educational information. This two-tiered approach to resident

education exceeds requirements. A resident who may have a disability would be provided individual instruction, based on their specific condition and circumstance. It must be noted that the educational materials that were available at the time of the audit were only available in English, but Auditor found that NCJJC did not meet Standard 115.316 and that a finding of Does Not Meet Standard for Standard 115.333 would not be fair to the facility that has developed such an outstanding and comprehensive educational program for residents.

Ctandard

§ 115.334 Specialized training: Investigations.
☐ Exceeds Standard (substantially exceeds requirement of standard)
$\hfill XX$ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (requires corrective action)
Three supervisors at the NCJJC have taken the National Institute of Corrections (NIC) Online course for PREA Investigators titled "Investigation Sexual Assaults in a Confined Setting" and have certificates that document they completed the course.
The Easton Police Department did confirm on November 6, 2014 that they would be using the PREA training protocol,
Standard § 115.335 Specialized training: Medical and mental health care.
☐ Exceeds Standard (substantially exceeds requirement of standard)
☐ XX Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)
Medical and Mental Health Care staff have received the required training and confirmed such in writing.
Standard Screening for Risk of Sexual Victimization and Abusiveness § 115.341 Obtaining information from residents.
☐ Exceeds Standard (substantially exceeds requirement of standard)
☐ XX Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)
NCJJC policy and procedures, staff and resident interviews, and a review of intake documents confirm that a very comprehensive screening for risk of sexual victimization and abusiveness is conducted at the point of intake.

Standard § 115.342 Placement of residents in housing, bed, program, education, and work assignments.	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
☐ Exceeds Standard (substantially exceeds requirement of standard)	
$\hfill\square$ XX Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)	
□ Does Not Meet Standard (requires corrective action)	
NCJJC policy and procedures, staff and resident interviews, and a review of intake documents confirm the facility meets this standard. The facility does not use isolation pursuant to paragraph (b) of this standard	
Standard Reporting § 115.351 Resident reporting.	
☐ Exceeds Standard (substantially exceeds requirement of standard)	
$\hfill XX$ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)	
□ Does Not Meet Standard (requires corrective action)	
NCJJC policy and procedures and the PREA Educational Information for New Residents were reviewed an confirm the facility meets this standard.	nd
Standard § 115.352 Exhaustion of administrative remedies	
☐ Exceeds Standard (substantially exceeds requirement of standard)	
☐ XX Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)	
□ Does Not Meet Standard (requires corrective action)	
NCJJC policy and procedures regarding grievances did not address the specific requirements of this stand Subsections (b) (1), (3); (d) (1), (2), (3), (4); (e) (2), (3), (4); and (f) (1), and (2); and (g) were not add in the facility's policy and procedures. A revision of the grievance policy and procedures was made to ins all subsections of the standard were included. The auditor reviewed and approved the policy.	dressed
Standard § 115.353 Resident access to outside support services and legal representation.	THE COURSE OF PERSONS AND ADDRESS OF THE PERSONS AND
☐ Exceeds Standard (substantially exceeds requirement of standard)	Advisor of the second of the second outside second
☐ XX Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)	
☐ Does Not Meet Standard (requires corrective action)	

The "Blue Brochure" provides information to residents on how to report abuse to the Child Line and how to contact PFA for victim advocacy. There is also a memorandum from PFA that confirms that the company will provide confidential crisis mental health services for residents of NCJJC dealing with the aftermath of sexual

assault.	
Residents cor	nfirmed they have reasonable and confidential access to their attorneys.
Standard § 115.3	54 Third-party reporting.
	Exceeds Standard (substantially exceeds requirement of standard)
	XX Meets Standard (substantial compliance; complies in all material ways with the ndard for the relevant review period)
	Does Not Meet Standard (requires corrective action)
probation offi	informed during the PREA Education class that they may report abuse to any staff member, a licer, their attorney, or a trusted adult or they can file a grievance. These adults are legally obligated exual abuse. The facility's policy and procedures also describe how parents can file a grievance.
	Official Response Following a Resident Report 61 Staff and agency reporting duties.
	Exceeds Standard (substantially exceeds requirement of standard)
	XX Meets Standard (substantial compliance; complies in all material ways with the indard for the relevant review period)
	Does Not Meet Standard (requires corrective action)
sexual abuse the standard. has been ider caseworker, o	olicy and procedures did not require that the facility head or his/her designee promptly report a allegation to the resident's parents, guardian, child welfare caseworker, or attorney as required by The policy was amended and includes the following statement: "The Deputy Director of Treatment ntified as the facility's designated reporter and will notify the resident's parents, guardian, or attorney following an incident of sexual assault or harassment. This response will be conducted and ard 115.361."
Standard § 115.3	62 Agency protection duties.
	Exceeds Standard (substantially exceeds requirement of standard)
<del></del>	XX Meets Standard (substantial compliance; complies in all material ways with the indard for the relevant review period)
	Does Not Meet Standard (requires corrective action)
Facility policie	es and procedures and staff training confirm the NCJJC meets this standard.
Standard § 115.3	63 Reporting to other confinement facilities.
	Exceeds Standard (substantially exceeds requirement of standard)
	XX Meets Standard (substantial compliance; complies in all material ways with the indard for the relevant review period)
	Does Not Meet Standard (requires corrective action)

The NCJJC policy and procedures address the spirit of the standard, but not the specifics. The standard states "the head of the facility that received the allegation shall notify the head of the facility or appropriate office of the

agency where the alleged abuse occurred..." The NCJJC policy states "the facility director of operations will notify the appropriate office or agency where the abuse occurred..." Policy 6.01 was amended and now conforms to the standard. Standard § 115.364 Staff first responder duties. ☐ Exceeds Standard (substantially exceeds requirement of standard) ☐ XX Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (requires corrective action) The NCCJC policy and procedures, staff training, interviews with youth care workers confirm that staff are aware of their duties and responsibilities as first responders. Standard § 115.365 Coordinated response. ☐ Exceeds Standard (substantially exceeds requirement of standard) ☐ XX Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (requires corrective action) The NCJJC policies and procedures state the responsibilities of first responders, medical and mental health practitioners, investigators, and facility administration. Standard § 115.366 Preservation of ability to protect residents from contact with abusers. ☐ Exceeds Standard (substantially exceeds requirement of standard) ☐ XX Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (requires corrective action) Employees in the NCJJC are in a labor union, but the contract only covers wages and benefits. All employees are employees of the Court of Common Pleas and serve at the will and pleasure of the Judges. Standard § 115.367 Agency protection against retaliation.

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

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

□ Does Not Meet Standard (requires corrective action)

The standard requires that the agency establish a policy to protect all residents and staff from retaliation and

shall designate which staff members or departments are charged with monitoring retaliation. It also requires that multiple protection measures be employed.

The NCJJC has a policy that prohibits retaliation and the auditor interviewed the PREA Coordinator who was identified as the person responsible for monitoring retaliation. However, the policy and procedure did not identify the PREA Coordinator as the designated person to monitor retaliation nor did it identify multiple protection measures that will be employed if retaliation occurs. The policies and procedures on retaliation were amended and now state that the PREA Coordinator monitors for retaliation against residents and the Operations Director monitors for retaliation against staff. The revised policy also states that the following measures can be taken to protect victims and staff from retaliation: "The (NCJJC) shall employ multiple protection measures, including, but not limited to:

- such as housing changes or transfers for resident victims or abusers,
- removal of alleged staff or resident abusers from contact with victims, and
- emotional support services for residents or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations."

Staff members who are fearful of retaliation can also have a reassignment or a schedule change in addition to emotional support services.

Standard § 115.368 Post-allegation protective custody.		
	☐ Exceeds Standard (substantially exceeds requirement of standard)	
	☐ XX Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)	
	☐ Does Not Meet Standard (requires corrective action)	
	d housing, as such, is not used in this facility. There are sufficient pods available to permit residents to to ensure their safety.	
Standare § 11!	d Investigations 5.371 Criminal and administrative agency investigations.	
	☐ Exceeds Standard (substantially exceeds requirement of standard)	
	☐ XX Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)	
	☐ Does Not Meet Standard (requires corrective action)	
As previou	usly noted three supervisors have participated in the Online NIC training for PREA Investigators and are	

As previously noted three supervisors have participated in the Online NIC training for PREA Investigators and are qualified, on the basis of that training, to conduct administrative investigations.

As noted in Standards 115.321 and 115.323, the NCJJC policies did not identified the agency that is responsible for criminal investigations.

During the corrective action phase, the NCJJC administration and administrators from the Easton Police Department met to discuss a cooperative working relationship, specifically with regard to PREA.

An Agreement of Cooperation between the Easton Police Department and the Northampton County Juvenile Justice Center was entered into on October 16, 2014 and states, among other things, "The scope of the activities under this agreement shall be determined by the PREA standards regarding the investigation of a criminal act of sexual assault, sexual abuse or any form of sexual misconduct which violates state law.

In addition the Chief of Police issued a memo on November 6, 2014 that confirmed that "The City of Easton

Police Department will be conducting all sexual assault investigations that occur at the Northampton County Juvenile Justice Center. The memo goes on, "We will be using the PREA training protocol."

The NCJJC policies have been amended to further clarify the roles and responsibilities of the NCJJC staff, the Easton Police Department and the Northampton County Office of the District Attorney.

The facility meets the requirements of the standard.

Standard § 115.372 Evidentiary standard for administrative investigations.
☐ Exceeds Standard (substantially exceeds requirement of standard)
☐ XX Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (requires corrective action)
NCJJC policies regarding administrative investigations did not define or address the "preponderance of evidence standard. The auditor recommended that the NCJJC ask the Office of the District Attorney for technical assistance in developing the appropriate policy and procedures.
The policy has been revised as follows: "For administrative investigations, the (NCJJC) and/or the Northampton County Prosecuting Attorney's Office shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated."
Standard § 115.373 Reporting to residents.
☐ Exceeds Standard (substantially exceeds requirement of standard)
$\hfill\square$ XX Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (requires corrective action)
The NCJJC policies and procedures did not address the following requirement of this standard, (a); (b); (c),(1), (2), (3), (4); (d), (1), (2); (e); and (f).
NCJJC Policy Section VI, Section 6.02 Subsection J. Determination (page 7 of 11) simply states, "The Director of Operations will inform the complainant of the out come (sic) and course of action. As well as notifying of any charges or convictions (115.72) (d)."
The auditor reviewed the policy and confirmed that the policy has been revised and is now consistent with all the requirements of the standard.
Standard Discipline § 115.376 Disciplinary sanctions for staff.
☐ Exceeds Standard (substantially exceeds requirement of standard)
☐ XX Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (requires corrective action)

NCJJC stated that disciplinary action for sexual abuse can include termination, but it did not state that termination is the presumptive disciplinary sanction for staff who have engaged in sexual abuse. It also did not state that

disciplinary actions shall be commensurate with the nature and circumstances of the acts committed, the employee's disciplinary history and the sanctions imposed for comparable offense by other staff with similar histories.

This standard also requires that terminations for violations of agency sexual abuse or sexual harassment policies or resignations by staff who would have been terminated if not for their resignation be reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies.

During the corrective action period, this policy was revised and now reads as follows:

"Any (NCJJC) staff member who is found to have committed any act of sexual abuse, including, but not limited to those outlined in section II, B ( Definitions) of this policy, shall be terminated.

- a. Any act of sexual abuse of a resident by staff is also a violation of Pennsylvania State Law and shall be referred to the appropriate authorities for criminal prosecution.
- b. Any (NCJJC) staff member who is found to have committed any act of sexual harassment of residents, other staff members, visitors or contractors, shall be subject to disciplinary sanctions which shall be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history and any sanctions that have been imposed for comparable offenses by other staff with similar histories.
- c. All terminations including those for violations of the (NCJJC) sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, are required to be, and shall be reported, along with the reason and supporting documentation, to the Easton Police Department, the Department of Public Welfare as well as any relevant licensing agencies."

Standard § 115.377 Corrective action for contractors and volunteers.		
	Exceeds Standard (substantially exceeds requirement of standard)	
	XX Meets Standard (substantial compliance; complies in all material ways with the tandard for the relevant review period)	
	Does Not Meet Standard (requires corrective action)	
NCJJC policy	y and procedures clearly state the requirements of this standard.	
Standard § 115.	378 Interventions and disciplinary sanctions for residents.	
	Exceeds Standard (substantially exceeds requirement of standard)	
	XX Meets Standard (substantial compliance; complies in all material ways with the tandard for the relevant review period)	
	Does Not Meet Standard (requires corrective action)	
At the time	of the audit, the NCJJC Policy stated, "If it is determined that a youth violated this policy, the Director	

The NCJJC policy was revised and now meets all the elements of the standard. In addition, the auditor also learned that the Commonwealth of Pennsylvania, Department of Public Welfare, regulations regarding isolation prohibit the use of isolation/seclusion and are stated as follows:

of Operations or his or her designee shall include action that may include but is not limited to: counseling, awareness education, warning, drop in level or other sanctions determined to be acceptable. The NCIJC policy

did not address sections, (a), (b), (c), (d), (e), (f) and (g).

"3800.206 Seclusion. Seclusion, defined as placing a child in a locked room, is prohibited. A locked room includes a room with any type of door-locking device, such as a key lock, spring lock, bolt lock, foot pressure lock, or physically holding the door shut." Standard Medical and Mental Care § 115.381 Medical and mental health screenings; history of sexual abuse. ☐ Exceeds Standard (substantially exceeds requirement of standard) ☐ XX Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (requires corrective action) The facility's policies and procedures and interviews with medical and mental health practitioners confirm that the facility meets this standard. Standard § 115.382 Access to emergency medical and mental health services. ☐ Exceeds Standard (substantially exceeds requirement of standard) ☐ XX Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) □ Does Not Meet Standard (requires corrective action) Interviews with Dr. DeFranco, staff from PFA, youth care workers, and administrators, and a review of policies and procedures document that the facility is prepared to respond and provide access to emergency medical and mental health services. Standard § 115.383 Ongoing medical and mental health care for sexual abuse victims and abusers. ☐ Exceeds Standard (substantially exceeds requirement of standard) ☐ XX Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (requires corrective action) Interviews with Dr. DeFranco, staff from PFA, and NCJJC administrators, and a review of policies and procedures document that the facility can provide ongoing medical and mental health services for sexual abuse victims and abusers. Standard Data Collection and Review § 115.386 Sexual abuse incident reviews. ☐ Exceeds Standard (substantially exceeds requirement of standard) ☐ XX Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Although the facility has not had any sexual abuse or sexual harassment incidents, the policies and procedures regarding a sexual abuse incident review meet the requirements of the standard. An interview with one staff

☐ Does Not Meet Standard (requires corrective action)

member who would serve on the review team indicated an understanding of their level of responsibility.

It is recommended that a scenario be developed and incorporated into a training session for the review team and that a designated member of the team prepare a report as required in Standard 115.386 (d)(6).

Standard § 13	d 15.387 Data collection.
	☐ Exceeds Standard (substantially exceeds requirement of standard)
	☐ XX Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (requires corrective action)

NCJJC did not have a policy or procedures that address the specific requirements of this standard. While there are forms that would be used to manually collect data there is no documentation that it would answer all the questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice.

During the corrective action period, the NCJJC developed a comprehensive policy that incorporated all the elements and requirements of the standard.

Stan	dard § 115.388 Data review for corrective action.
	☐ Exceeds Standard (substantially exceeds requirement of standard)
	☐ XX Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
	☐ Does Not Meet Standard (requires corrective action)

Although NCJJC had not reported incidents of sexual abuse or sexual harassment, it is still required to prepare an annual report of its activities related to PREA. Such information would include information regarding hours of staff and resident training and education and compliance with PREA standards. Subsequent reports will compare data from the current year with that of previous years. The report should be approved by the Chief Judge of the Court of Common Pleas.

The Operations Director has prepared a report which is now available to the public. In addition, the NCJJC has developed a comprehensive policy that incorporated all the elements and requirements of the standard.

Standard § 115.389 Data storage, publication, and destruction.		
	☐ Exceeds Standard (substantially exceeds requirement of standard)	
	☐ XX Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)	
	□ Does Not Meet Standard (requires corrective action)	

The NCJJC did not have a policy regarding the storage, publication, and destruction of data. During the corrective action period, the NCJJC developed a comprehensive policy that incorporated all the elements and requirements of the standard. All data required under this standard is maintained in a secure file cabinet in the administrative area of the facility.

# **AUDITOR CERTIFICATION:**

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

Charles Char	
	December 18, 2014
Auditor Signature	Date