MORRIS COUNTY JUVENILE DETENTION CENTER POLICY & PROCEDURE

CHAPTER TITLE: Prison Rape Elimination Act	POLICY NUMBER: 8.0		mplementation	PAGES: 5
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POLICY:

The Prison Rape Elimination Act of 2003 establishes a zero tolerance standard for the incidence of resident sexual assault and rape; makes prevention of resident sexual assault and rape a top priority in each detention facility; develops/implements national standards for the detection, prevention, and punishment of prison rape; increases available data and information of the incidence of resident sexual assault and rape; standardizes the definitions used for data collection; increases accountability of detention officials who fail to detect, prevent, reduce and punish prison rape; and protects the Eighth Amendment rights of federal, state and local residents.

It is the policy of the Morris County Juvenile Detention Center to ensure that sexual activity between staff and residents, volunteers or contract personnel and residents, regardless of consensual status, is prohibited and subject to administrative and criminal disciplinary sanctions.

Resident to resident sexual activity, sexual assault, rape, sexual conduct and sexual contact as defined in PREA Standards and within the New Jersey Criminal Code is prohibited. Information shall be provided to residents about sexual abuse/assault including: prevention/intervention, self-protection, reporting sexual abuse/assault, medical treatment and mental health counseling. This information shall be included in the Resident Handbook which is signed for by the resident acknowledging its receipt. Any employee who is a witness to or has knowledge of any sexual activity, assault and/or rape shall be responsible to immediately report it to the director or their designee. An employee who knowingly fails to report sexual activity, assault and/or rape of a resident shall be subject to disciplinary actions. All employees, volunteers and independent contractors of the detention center are prohibited from retaliating against other employees, volunteers, independent contractors or residents for reporting allegations of sexual activity/assault. All employees, volunteers, independent contractors or resident who are found to have violated this prohibition shall be subject to disciplinary action.

REGULATING STANDARD:

Prison Rape Elimination Act of 2003, 42 U.S.C. § 15601 U.S. Department Of Justice Standards for Juvenile Facilities. 28 C.F.R. §§ 115.311 – 115.393 N.J. Criminal Code in 2C:14-1 et seq.

Definitions:

Rape – Any sexual conduct with another when the offender purposely compels the other person to submit by force or threat of force.

Sexual Abuse and Assault – Any contact between the sex organ of one person and the sex organ, mouth or anus of another person, or any intrusion of any part of the body of one person, or of any object into the sex organ, mouth or anus of another person, by the use of force or threat of force.

Sexual Contact – Any touching of an erogenous zone of another, including without limitation the thigh, genitals, buttock, pubic region, or if the person is a female, a breast, for the purpose of sexually arousing or gratifying either person.

PROCEDURE:

- 1. Screening for Sexual Assault and/or Sexual Victimization at Intake.
 - a. During the intake process, assigned staff will complete the intake screening taking notice to physical as well as emotional signs of sexual abuse or contact. Any physical signs of sexual abuse or contact should be documented on the body chart and entered in the medical log book for follow up by the medical staff within 24 hours. Intakes exhibiting emotional signs of sexual abuse or contact, potential vulnerabilities or tendencies of acting out with sexually aggressive behavior will notify the social services coordinator immediately.
 - b. The social services coordinator will make a determination if the resident can be housed or if psychiatric clearance is required. Upon acceptance by the social services coordinator, the resident should be housed with special consideration to their mental or physical condition.
 - c. The social services coordinator will communicate their concerns to administration as well as appropriate staff. Social Services will conduct follow up interviews with the resident and staff to determine if additional services are required.
- 2. Social Services Review.
 - a. During juvenile orientation, all youth must be instructed to report all instances of aggressive or inappropriate behavior. Confidentiality concerns should be addressed and include the manner by which a resident can report such abuses anonymously. Anonymous reports, the resident should be instructed, must have sufficient detail to allow staff to respond as needed.

3. Notice and Training.

- a. Juvenile Detention staff, contracted services providers and volunteers shall receive comprehensive training regarding PREA as well as the zero-tolerance sexual harassment policy. Annual refresher training shall include information regarding appropriate relationships and boundaries with juveniles, prevention of sexual misconduct, reporting alleged incidents of sexual misconduct, and investigative techniques for allegations of sexual misconduct.
- b. All new staff, contracted services providers and volunteers shall receive pre-service orientation training. This training will consist of the National Institute of Corrections web based course titled "Your Role: Responding to Sexual Abuse". Successful completion of this course is required before direct contact with residents is permitted.

4. Victim/Witness Reporting.

- a. Juveniles who are victims of sexual assault or misconduct may report the incident to any member of staff, contract provider, or volunteer. Juveniles may also report incidents concerning any other juvenile to any staff, provider, or volunteer.
- b. Juveniles may report any incident of sexual assault or misconduct anonymously, via a written report (such as a grievance), via a third party contact or any other means that will reach staff, whether that incident involves them self or another resident(s).
- c. Supervisors shall ensure the completion of detailed reports by staff having knowledge of the alleged sexual assault or misconduct.
- d. Supervisors, or their designee, shall notify medical personnel (if they are not already aware) so assessment, treatment and recommendations can be facilitated.
- 5. Investigating Initial Reports of Sexual Abuse/Assault.
 - a. When an allegation of a sexual offense is reported, the following procedures apply:
 - 1. Notify the Shift Supervisor and appropriate Administrative staff
 - 2. Ensure the resident/victim is safe and kept separated from the alleged aggressor.
 - b. If the incident occurred within the last 5 days, the following additional procedures shall be implemented:
 - 1. Ensure that the resident/victim does not shower, eat, or drink until evidence collection; and
 - 2. Secure the incident area and treat it as a crime scene until further notice, c.

The Shift Supervisor will conduct an initial investigation.

- 1. Determine from the victim/witness the, who, what, when and where surrounding the allegation and if there are any other witnesses, victims or staff members involved.
- 2 Document in written note form any information provided by the victim/witness for reporting purposes and retain all notes for investigative review.

- 3. Administrative staff, upon review of a preliminary allegation and report, shall be responsible for ensuring the most appropriate placement of the alleged victim, perpetrators and witnesses.

 Placement will insure a safe and secure environment free of harassment or intimidation.
- d. The Director, or his designee, shall ensure that all allegations of sexual assault of residents shall be immediately reported to the Morris Township Police Dept., Morris County Prosecutors Office, Department of Children and Families' Office of Institutional Abuse, Juvenile Justice Commission and County Administration.
- e. In the event that a resident is reporting sexual abuse or harassment that occurred in another facility or jurisdiction, the information should be obtained as in section 5 c. above and immediately forwarded to the Director or Deputy Director for proper notification of that facility director or authority of jurisdiction.

6. Investigating Authority.

- a. Upon notification, the Morris County Prosecutor's Office will respond as the lead agency investigating the allegation. The MCPO Sexual Assault Response Team (SART) will determine if/when the victim should be transported to Morristown Memorial Hospital, provide specially trained Investigators, Sexual Assault Nurse Examiner (SANE), and Victims Advocate. Mental health advocacy will be provided through Morris Cares located at Morristown Memorial Hospital as part of the team.
 - 1. Full access to the facility and its resources will be provided.
- 2. Interview rooms and accommodations will be provided as needed.
- 3. Audio, video and communication equipment will be allowed in the secure area for investigative and processing purposes.
- 4. Complete cooperation with the Prosecutor's Office Investigative team including interviews of all employees, volunteers and independent contractors is required.
- 5. Copies of reports, medical records and resident files will be provided as needed.
- b. The Division of Children and Families, Office of Institutional Abuse will be notified via the Institutional Abuse hotline. Response will be determined by their protocol.
- c. The Juvenile Justice Commission, Office of Compliance Monitoring will be notified by administration and reports will be forwarded as requested.
- d. Social services will contact the resident/victims family and probation officer to inform them of the allegation and ongoing investigation.

7. Post Investigative Responsibilities.

a. Administration

1. Administration will address placement of victims, accused if any and staff assignments. Victims will only be placed in isolation for their immediate safety until such time as the administration determines it is safe to reintegrate them into the general population. This should be determined by a consensus of Administrative, Medical, Social Service, Education and the victim(s) themselves.

2. Data collection and recording of all incidents will be maintained by the PREA Coordinator. This includes post incident monitoring for retaliation for a period of 90 days or resident release whichever is greater.

b. Medical Services

- 1. Nursing assessment for possible medical issues shall occur with a referral made to the physician for needed follow-up care.
- Ensure the follow-up of any medical orders, including the testing for HIV and sexually transmitted diseases by consent or court order.
 Prior to release, follow up care should be explained to the victim and their parent/guardian to insure proper medical health is maintained.

c. Social Services

- 1. Ensure that all referrals are made to mental health services for assessment and intervention.
- 2. Conduct periodic post incident interviews with residents who have reported or been victimized while in custody until discharge or within ninety days of the report.
- 3. Prior to release, follow up care should be explained to the victim and their parent/guardian to insure proper mental health is maintained.