

PREA AUDIT: AUDITOR'S SUMMARY REPORT

LOCKUPS



Name of facility:		Lafayette Street Lockup	
Physical address:		101 Lafayette Street, Hartford, CT 06506	
Date report submitted:		June 22, 2015	
Auditor Information		Darlene M. Baugh	
Address:		281 N. Mason St. Box 1612, Harrisonburg, VA 22803	
Email:		piltsbaugh@gmail.co	
Telephone number:		(515) 260-3646	
Date of facility visit:		June 15 – 16, 2015	
Facility Information			
Facility mailing address: (if different from above)		Same	
Telephone number:		(860) 566-4932	
The facility is:	<input type="checkbox"/> Military	<input type="checkbox"/> County	<input type="checkbox"/> Federal
	<input type="checkbox"/> Private for profit	<input type="checkbox"/> Municipal	<input checked="" type="checkbox"/> State
	<input type="checkbox"/> Private not for profit		
Facility Type:	<input type="checkbox"/> Police	<input type="checkbox"/> Sheriff	<input type="checkbox"/> Court Holding <input checked="" type="checkbox"/> Other
Name of PREA Facility Coordinator (Where Applicable):		Richard Loffredo / Denise Poncini	Title: Dep. Director / Counsel
Email address:		richard.loffredo@jud.ct.gov (860)706-5297 denise.poncini@jud.ct.gov (806)706-5128	Telephone number:
Agency Information			
Name of agency:		Superior Court Operations / Judicial Marshal Services Unit	
Governing authority or parent agency: (if applicable)		Connecticut Judicial Branch	
Physical address:		90 Washington St, Hartford, CT 06106	
Mailing address: (if different from above)			
Telephone number:		860-706-5310	
Agency Chief Executive Officer Chief Court Administrator and Executive Director of Superior Court Operations			
Name:		Hon. Patrick Carroll, III	Title: Chief Court Administrator
Email address:			Telephone number: 860-757-2102
Agency-Wide PREA Coordinator			
Name:		See Above	Title: See Above

Email address:	See Above	Telephone number:	See Above
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AUDIT FINDINGS

NARRATIVE:

The PREA Audit of the 101 Lafayette Street Lockup was conducted from June 15, 2015 through June 16, 2015. The designated auditor was Darlene M. Baugh, with no auditing assistants or auditors present.

An Entrance Meeting was held at 9:00 am on Monday, June 15, 2015. Those present from the Judicial Marshal Services included: Mr. O’Donovan Murphy, Director of Judicial Marshal Services; Mr. Kevin Grosse, Deputy Director of Judicial Marshal Services and JMS PREA Coordinator (backup); Mr. Jim Rushkowski, Program Manager of Judicial Marshal Services and JMS PREA Coordinator; Ms. Jamie Lettieri, Chief Judicial Marshal of 24 Hour Lockup New Haven, Hartford and CTU and Mr. Luis Sola, Deputy Chief Judicial Marshal of 24 Hour Lockup New Haven and Hartford. Those present from the Judicial Branch Administration included: Mr. Rich Loffredo, Deputy Director and Judicial Branch PREA Coordinator; Ms. Denise Poncini, Counsel, Legal Services and Judicial Branch PREA Coordinator and Mr. Dennis Harrell, Court Planner. During this meeting, those present discussed the audit process, schedule and work plan.

Following the Entrance Meeting, the auditor was provided an extensive tour of the Lafayette Street Lockup; to include cell blocks, Control Center and holding cells for the court rooms. Following the tour, the auditor began interviews.

The detainee population on June 15, 2015 at the start of the audit was 16 males and 3 females. No youthful offenders were present. As this location is classified as a 24 Hour Lockup, there was a tremendous number of detainees moved in and out of the facility during the day and early evening. Due to this movement, only nine (9) detainees (at random) were interviewed. Of the nine (9) interviewed three (3) were females, the remaining number were male.

Eight (8) security staff, from the three (3) shifts were interviewed, also randomly selected by the auditor; two (2) Lieutenants, two (2) Sergeants and four (4) security staff. Also interviewed was the Director of Judicial Marshal Services, Deputy Director of Judicial Marshal Services/Backup PREA Coordinator, Program Manager of Judicial Marshal Services and PREA Coordinator, Chief Judicial Marshal, Deputy Chief Judicial Marshal, Deputy Director and Judicial Branch PREA Coordinator, Human Resources, Counsel/Legal Services and Judicial Branch PREA Coordinator and a contractor.

During the past year, this facility has had no reports of sexual abuse or sexual harassment. It should be noted that after the detainee interviews, one (1) female that was interviewed provided an allegation of sexual harassment to staff.

Within the facility, there are seventeen (17) cameras. Cameras do not record the interior of the cells.

When the on-site audit was completed, an exit meeting was held. Those present included: Mr. Kevin Grosse, Deputy Director; Mr. Jim Rushkowsky, PREA Coordinator; Ms. Jamie Lettieri, Chief Judicial Marshal, Mr. Luis Sola, Deputy Chief Judicial Marshal; Mr. Rich Loffredo, PREA Coordinator and Ms. Denise Poncini, PREA Coordinator. At that time, the auditor was unable to give those present a final finding. She did provide a positive overview of the audit and thanked those present for their hard work and commitment to operationalizing the Prison Rape Elimination Act.

DESCRIPTION OF FACILITY CHARACTERISTICS:

The Connecticut Judicial Branch is comprised of five (5) divisions: Administrative Services, Court Support Services, External Affairs, Information Technology and Superior Court Operations. The Superior Court Operations is made up of eight (8) units, which includes: Administration, Judicial Marshal Services, Judge Support Services, Legal Services, Staff Development, Superior Court Operations, Support Enforcement Services and Office of Victim Services. The only divisions within the Connecticut Judicial Branch that have confinement facilities are Superior Court Operations and the Court Support Services Division.

Note: The Connecticut Judicial Branch is not a part of the Executive Branch of Government.

The Judicial Marshal Services, within the Superior Court Operations Division of the Connecticut Judicial Branch operates two (2) twenty-four hour lockup/confinement facilities located in Hartford and New Haven, Connecticut. This audit was conducted at 101 Lafayette Street Detention Center, Hartford. The Detention Center is located in the basement of the G.A. (Geographic Area) 14 Courthouse. The lockup would be considered a hybrid – during the business day, it serves as the courthouse lockup; during non-business hours, it holds arrestees from the Connecticut State Police and local police departments from surrounding towns. It also serves as a holding facility to transport Department of Correction prisoners to/from court.

The average length of time spent at the facility is less than 8 hours for DOC inmates as opposed to the detainees whose average length of stay is less than 24/48 hours. Although the length of stay is short; the facility held 17,290 detainees over the last year and of those numbers held 8740 overnight. Additionally, 112 youthful detainees were held at the facility in the past year.

For the purpose of this audit there are two separate sets of policies governing PREA; the Judicial Branch Policy and the Judicial Marshal Policy and Procedure Manual. Both were reviewed to determine consistency with each other and also with practice.

The Chief Court Administrator for the Connecticut Judicial Branch is the Honorable Patrick L. Carroll, III. Mr. Richard Loffredo, Deputy Director and Ms. Denise Poncini, Legal Counsel share the responsibilities of a Judicial Branch PREA Coordinator. Mr. James Rushkowsky, Program Manager for the Judicial Marshal Services acts as the PREA Coordinator for the Judicial Marshal Service. Mr. Kevin Grosse, Deputy Director for the Judicial Marshal Services serves as the PREA Back-up Coordinator. Due to the organization of the Connecticut Judicial Branch, no PREA Manager has been assigned

Ms. Jaime Lettieri, serves as the Chief Judicial Marshal of the Lafayette Facility. Mr. Luis Sola is the Deputy Chief Judicial Marshal. Ms. Lettieri has been with this facility for the last four (4) years. Mr. Sola transferred to this location nearly three (3) months before the audit. At the time of the pre-audit, the facility had 34 staff who had contact with the detainees.

Currently, the facility has seventeen (17) cameras located within cellblock hallways, doors, additional hallways, bullpen, sally port and yard gates. Those named cameras are located in A, B, C, D Block; Door 3,4, 5 and 13; Bullpen (GH1/GH2); Back Halls South and North; Front Hall; Sallyport – outside and inside; Yard Gate 1 and 2.

As a Lockup facility, Lafayette does not have programming, jobs, education, mental health or medical staff. Lafayette utilizes two contracts; one for telephone translation and interpretation services (contract held with Department of Administrative Services), the other for cleaning. The cleaning contract crew is trained on PREA, with signature verification.

SUMMARY OF AUDIT FINDINGS:

Number of standards exceeded: 1

Number of standards met: 30

Number of standards not met: 0

Number of standards not applicable: 2

Standard number here	115.111 – Zero Tolerance of Sexual Abuse and Sexual Harassment; PREA Coordinator
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- 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)

Both the Judicial Branch and the Judicial Marshal's written policies are clear on the mandatory zero tolerance towards all forms of sexual abuse and sexual harassment. Judicial Marshal Policy #213-13 supplements the Judicial Branch's policies addressing definitions, hiring and promotional practices, contractual, intern and volunteer notifications of PREA requirements, and annual training. (List of training subject matter is addressed in policy #213-13.)

Mr. Richard Loffredo, Deputy Director, Ms. Denise Poncini, Legal Counsel and Mr. Jim Rushkowski act as PREA Coordinators. Ms. Poncini reports to Mr. Joe Del Ciampo, Deputy Director of Legal Services. Mr. Loffredo reports to Ms. Vicki Nichols, Deputy Director for Administration. Mr. Rushkowski reports to Mr. O'Donovan Murphy, Director of Judicial Marshal Services. Policy requires that the PREA Coordinator be of a Program Manager Level or higher;

which Mr. Loffredo, Mr. Rushkowski and Ms. Poncini meets. In addition, all feel that they have adequate scheduling time to meet the responsibilities of this position.

Standard number here **115.112 – Contracting with Other Entities for the Confinement of Detainees.**

- 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)

This Standard is **not applicable** as the facility has not had an applicable contract in a substantial length of time.

Standard number here **115.113 – Supervision and Monitoring.**

- 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)

Judicial Marshals assigned to the facility are to ensure that at no time the prisoner to staff ratio is greater than 15:1. Marshals are to segregate and monitor all prisoners in lockup and holding areas. The Lieutenant on the shift whose ratio of staff falls below required numbers, will call the Chief or Deputy Chief for permission to hire over-time. Overtime costs are high, but there is no present plan to change the noted ratio.

Cameras are adequate for the physical layout of the building. There is no mobile camera in use at the facility. Cameras/IT records for each camera is maintained an average of 28 – 30 days. These records can be used for investigations, if needed.

During 2015, the Judicial Branch PREA Coordinators, the Judicial Marshal Services PREA Coordinator, the Judicial Branch PREA Implementation Team, the Director of Judicial Marshal Services and the Chief Judicial Marshal met to revise the template for staffing plans. The group also reviewed physical layout, population, if any incidents of sexual abuse (none), video monitoring, mirrors, audio monitoring, composition of population and posting of staff.

All individuals upon arriving at this facility are screened and given notice of the zero tolerance policy (to include ability and process for reporting). Notices of PREA Rights and phone numbers are taped on the walls of the hallway in the booking area for reading by staff and detainees. These documents are in English, Spanish, Portuguese and Polish, as these are the predominant languages spoken by their detainees. Forms are JD-MS-44 for Lockup Screening and JD-MS-43 for DOC detainees, which are also posted. Policy notes that all must be screened before being placed in holding cells. Documentation of screening must be placed in the cellblock log/CMS

(computer program) system. Policy addresses actions to be taken by staff if the detainee is identified as either at risk of being abused or of being an abuser. If a detainee moves from one building to another, they must be screened at each location. In addition the policy also addresses the use of the screening document for transports.

While the auditor was in the facility, she was able to observe the booking procedure which included all detainees being placed in the posted hallway and the PREA notice being given to each individually. She also watched a detainee who did not understand English, who was taken into an office area where a language service was called. The service provided interpretation of the PREA Notice. Additionally, placed on the wall directly in front of the telephone, is a large poster with numerous languages. If an offender cannot tell staff in English what his language is, he is able to point to the language.

Rounds are conducted every 15 minutes, with call outs of announcing the opposite gender on the floor. In addition to written documentation of the rounds, staff utilize a "pipe" system which documents the round into a computerized log. These logs are reviewed to ensure compliance by staff.

Standard number here 115.114 – Juveniles and Youthful Detainees.
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- 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)

Policy 213-13 addresses that juvenile and youthful detainees must be held separately from adult detainees in a manner that ensures physical, sight and sound separation. Policy, in addition to housing, addresses that transportation be in a manner that ensures physical and sight separation from adult detainees and the prohibition of strip searches and body cavity searches.

Although the facility has the ability to double bunk in their cells, the practice is to single cell, juveniles/ youthful detainees are kept in separate cell blocks. Many times juveniles/youthful detainees are held in the courtroom cells, usually for short periods of time. If necessary, one to one (staff) will to be assigned. They also have the ability to house DOC inmates segregated in their own cell block as well as the same for other entities.

During the 12 months prior to the audit, this facility has held a total of 112, 16 and 17 year olds. As noted previously there were no juveniles present at the time of the audit.

Standard number here 115.115 – 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)

Policy #210-13 is a Policy on Cross-Gender, Intersex and Pat-Down Searches. Policy #213-13 covers PREA – Lockup Standards. Before staff are allowed to conduct any pat-down searches, they are required to attend a training session “Cross-Gender, Intersex and Transgender Pat-Down” conducted by the Judicial Marshal Academy Pre-Service Training Program (curricula written 2014) (viewed). Policy is very clear on format to be utilized in exigent circumstances that necessitate a cross-gender search, to include: locating a same gender Judicial Marshal to conduct the search if possible (that includes contacting another facility within close proximity), proper notification/explanation to a detainee, format of the pat-down and if a Marshall of the same gender is not present – a Lieutenant or Sergeant additionally must be present. A camera/video is utilized for all cross-gender pat-downs. Documentation is required.

Policy addresses privacy issues regarding showers, bodily functions and clothing changes as well as prohibiting searches to determine detainee’s genital status. In addition, the facility is none-smoking. Due to the short stay of the detainees, showers are not granted (from a physical layout perspective, there is no ability to add a shower area unless major renovations take place) nor are they given a change of clothes. All detainees interviewed shared that announcements were made of cross-gender rounds and that they felt safe and they were given their physical privacy.

All staff that were interviewed shared that they had been trained in Cross-Gender Pat Searches, etc. All were able to clearly articulate policy.

Rounds are conducted every 15 minutes, with call outs of announcing the opposite gender on the floor. In addition to written documentation of the rounds, staff utilize a “pipe” system which documents the round into a computerized log. These logs are reviewed to ensure compliance by staff.

Standard number here	115.116 – Detainees with Disabilities and Detainees who are limited English Proficient.
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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)

Policy #213-13 addresses the requirement that detainees understand the PREA notification, including ADA accommodations and translation services. Policy also addresses that another detainee nor a bilingual Judicial Marshall are to be utilized for interpretive services.

Staff state that it does not utilize staff or other detainees for interpretive services, but does utilize a Telephonic Bilingual Service Coordinator in New Britain, CT. The contract for this service is through the State of Connecticut, Department of Administrative Services, Procurement Division and not through the Marshal Service. In addition, postings on zero tolerance, as mentioned previously is posted in four (4) languages. Postings of the Zero Tolerance Statement is in numerous locations throughout the facility.

Also was noted previously, the auditor was able to observe the use of the language services. The process was smooth, with staff very comfortable with the process.

Staff were able to articulate how they would adjust to those individuals who were intellectually disabled while still maintaining their safety.

Standard number here **115.117 – Hiring and Promotion Decisions.**

- 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 Judicial Branch has chosen to be more stringent than the standards require regarding the background record check of its employees. The standard requires each five years, whereas the Judicial Branch has put into place a check to occur annually in January.

Completing background checks on all potential employees or contractors is addressed in policy. In addition, on the State of Connecticut Release of Information Form, Judicial Branch, contains questions specific to PREA Disclosure. This form is required for all potential employees of the Judicial Branch to include those transferring or being promoted.

Standard number here **115.118 – Upgrades to Facilities and Technology.**

- 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 facility is in the basement of the Courthouse, with no ability to expand. Remodeling has not occurred. Therefore, this standard is **non-applicable**.

Standard number here **115.121 – Evidence Protocol and Forensic Medical Examinations.**

- 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 Judicial Branch policy designates two types of investigations; criminal and administrative. All allegations of sexual abuse (criminal) are immediately referred to the Connecticut State

Police. All administrative investigations are handled by the Judicial Branch. The Human Resource Management Unit will investigate any claims in which a Judicial Branch employee is involved unless criminal. Disciplinary Action is governed by a collective bargaining agreement. The Director and Deputy Director of the Judicial Marshal Services, nor any supervisor within the Marshall Services has the ability to discipline or terminate employees. That decision is made by Court Operations.

The Department of Emergency Services and Public Protection, Division of State Police (Connecticut) has a written document that addresses protocol/guidelines for investigating sexual assaults that have been reported by inmates of Connecticut confinement facilities. Also, policy addresses the guidelines for securing physical evidence for all investigations and identifying via on-line training at how to detect and respond to victims of sexual abuse. The Connecticut State Police has added a PREA Coordinator to their staff to be the Center Point of Contact for referrals. There is a Memorandum of Agreement between the two parties.

Staff that were interviewed understood and were able to articulate the protocol for securing the evidence and protection of the detainee.

Medical care via a SAFE program is provided at either Hartford Hospital or St. Francis Hospital. Policy #210-04 addresses the format for transportation and care of a detainee at a Medical Facility. There will be no financial liability for the detainee. In addition, the detainee would be accompanied by an advocate.

There has been no hospital transports within the last year for sexual abuse reasons.

The facility has a Memorandum of Agreement with Connsack Sexual Assault Crisis Services.

**Standard
number here**

115.122 – 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)

Policy states that administrative or criminal investigations are to be completed on all allegations that meet PREA standards. Policy furthermore, notes the difference and protocols of both the Marshal and the CT State Police Policy for Investigations.

The facility has provided to each staff member a "Judicial Marshal / PREA / First Responder Duties" card which is the size of a business card. This card outlines each step that a First Responder is to take if there is a situation involving sexual abuse. While interviewing a staff member, the individual pulled out his card to show that he was able to identify his responsibilities.

There has been no allegations concerning situations at this facility within the past 12 months. As noted previously, after an interview with a female detainee, she made an allegation. This allegation as stated to this auditor was very confusing, with mixed verbalized statements

regarding this facility or a local police department. Note her allegation was not directed at her current stay.

Standard number here **115.131 – 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)

The Judicial Marshal Academy curricula for the Prison Rape Elimination Act training was reviewed and found to address all requirements of the standard. Policy address annual refresher training. Training records were reviewed and met criteria. The next on-site refresher trainings are scheduled for July/August of 2015. The facility uses employee signatures to verify that training has been completed and a scoring system to show understanding.

Staff also were clear about their extensive training on the elements of PREA, content of training, policy and the cross gender pat-downs.

Standard number here **115.132 Auditor Findings.**

- 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)

During the intake process staff read detainees the PREA notification and complete forms JD-MS-42 or JD-MS-44 (as previously discussed). These forms also address items for the reader to consider; age, stature, incarceration history, sexual abuse history, etc. These forms are retained in a secured file area within the facility. In addition, in their automated CMS system, the date of the current notification is entered. Detainees also view the PREA notification and zero-tolerance language when they sign their screening documents.

Contractors who enter the facility are escorted by staff and have no contact with detainees. Each contractor must sign a log sheet before access. This log contains information about the facilities zero tolerance policy.

The facility has just one contract that is with a cleaning crew which comes in 5 nights per week. This crew has been trained in PREA and has signed acknowledgement notices. One contractor was interviewed. He had clear knowledge of PREA requirements.

Standard **115.134 – Specialized Training: Investigations.**

number here

- 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)

One staff person is assigned as an investigator to liaison with the Connecticut State Police in PREA related situations. While CSP does the forensic/interviewing part of the investigation, the staff member would assist in collecting addition paperwork, video and forwarding information to the Program Manager of the Judicial Marshal Services/PREA Coordinator as to the status of the investigation. This investigator has received specialized training through NIC.

There is another investigator who handles Administrative investigations; i.e.: Sexual Harassment/Discrimination. He has received the NIC and Judicial Branch Training; plus is an attorney.

Standard

number here

115.141 – 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)

Upon intake and before placing any detainee together in any holding cell, all detainees are screened to assess risk for both vulnerability and predatory behavior. The screening form includes asking the detainee if they feel at risk of being abused. This screening process determines if single housing is necessary, if so the detainee would be within continuous/direct sound and sight of staff. It should be noted that the facility has the capacity to double bunk, but does not do so unless it is absolutely necessary. Single celling is utilized.

In circumstances when the detainee is being brought from another jurisdiction for court, including DOC, the facility may be informed that an individual is to be PREA segregated, is transgender or has a disability. When this information is shared, the facility is prepared to handle the screening process and celling in the appropriate manner.

Standard

number here

115.151 – Detainee 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)

Policy notes that staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously and from third parties. Detainees may also report to the CT State Police,

Judicial Marshall Service, Rape Crisis Center or any Judicial Branch Employee. Direct reports to the CT State Police are considered confidential.

When interviewed, staff and detainees were able to share methods for reporting. An additional format for reporting to staff is via the use of the language line. Staff also articulated that in a case of sexual abuse, they are not required to utilize the chain of command. They would immediately call the CT State Police and then notify their supervisor and proceed with verbal and written documentation.

Staff shared that they carry and have available to provide to detainees contact numbers to use if they wish to contact someone. The numbers include the Marshal Services, CT State Police and an Advocate. The telephone numbers are posted in the facility. (The auditor viewed the cards which are the size of a business card.)

Standard number here 115.154 – Third – Party Reporting.

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

Policy notes that staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously and from third parties. The Judicial Branch's website has a section on PREA; which includes history, description, contact information, Referral for Investigation, forms, brochures and a link to the State Police PREA-related investigations, also in Spanish. Reports can also be made to local Hot Lines/Advocate, the facility, facility staff and the CT State Police.

Standard number here 115.161 – Staff and Agency Reporting Duties.

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

Facility policy requires all staff to immediately report any knowledge, suspicion or information regarding sexual abuse, harassment or retaliation; as well as all Judicial Branch employees, regardless of title, are under a duty to report any staff neglect or violation of responsibilities that may have contributed to an accident or retaliation. Policy also addresses that any employee who has engaged in a sexual assault report the next business day. Policy is clear on the reporting protocol, including that after the report of the sexual abuse, the Judicial Marshal shall not reveal any information other than to the extent necessary for treatment and investigation decisions. If a victim is under the age of 18, a report is made to the CT State Police and to the DCF Hotline (Department of Children & Family) under applicable mandatory reporting laws. (There is a MOA with DCF.)

All reports of sexual abuse and sexual harassment that are received from third parties are to be received and responded to as noted in policy / by all staff. If an allegation of sexual abuse is received a call is immediately made to the Connecticut State Police. Facility protocol starts when the allegation is received. Staff note that even rumors would be reported.

Staff also articulated that in a case of sexual abuse, they are not required to utilize the chain of command. They would immediately call the CT State Police and then notify their supervisor, the Marshal's PREA Coordinator and proceed with verbal and written documentation.

Standard number here **115.162 – Agency Protection 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)

Agency policy requires staff to take immediate action to protect any detainee they learn may be subject to substantial risks. Format for action is detailed in 115.141.

All staff shared that they are responsible to maintain safety of their detainees. PREA has given them a name for the duties that they have been doing for years. They shared their individual ability to “read” the signs for potential victims and abusers, the ability to rescreen and move individuals, rescreen with every move into their door (Court, transport, hospital trip, etc.), ensure single cells, etc.

The facility's CMS system allows for commentary on information that is applicable to potential victimization or aggressiveness. Staff could share physical/behaviors of those that may be at risk, were victimized or could be a predator. These signs would be used to protect detainees.

Standard number here **115.163 – Reporting to Other Confinement Facilities.**

- 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)

Policies meet the requirements of this standard. During the past twelve (12) months, Lafayette has not received allegations from other facilities. However recently, there was an allegation that during a local police departments transport to their facility, a detainees stated that he was fondled by another detainee. This allegation was investigated and found to be unfounded. This detainee was not in this lock-up's custody at the time of the alleged occurrence.

Standard **115.164 – Staff First Responder Duties.**

number here

- 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 facility does have a policy for first responder duties. Additionally, each staff member carries a card that documents the steps to be taken if an incident occurs.

The physical layout for the cells allow for a toilet and sink. Detainees do not shower at this facility, nor are they given a change of clothing or toothbrush/toothpaste. If an incident occurs, detainees will be removed from the wet cell in order to preserve evidence.

Standard 115.165 – Coordinated Response.
number here

- 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 facility has a Coordinated Response Plan that addresses assigned staff, tasks, date and time completed, initial of staff completing and any additional comments.

As there has been no allegations of sexual abuse/harassment in the past twelve months toward this facility, there has been no need to transfer an offender to another facility.

As noted above, the facility does have a policy for first responder duties.

Standard 115.166 – Preservation of Ability to Protect Detainees from Contact with
number here Abusers.

- 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)

Employees of the Marshals have collective bargaining rights. Currently, the contract does not address any PREA issues. Contractual discussion will begin in August. There is intent to add additional language that focuses on PREA related issues.

Interviews with detainees showed that the PREA standards were read to them and that they understood. All shared that they felt safe.

Standard 115.167 – Agency Protection against Retaliation.

number here

- 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)

Policy #213-13 addresses Protection against Abuse and Retaliation. The Judicial Branch notes any violation of policy will be subject to appropriate disciplinary action or referral to the State Police for Criminal Investigation. In addition, the Judicial Branch PREA Coordinators monitor the conduct and treatment of those employees and individuals who are in the custody of the Branch and will promptly remedy any discovered retaliation.

To date, retaliation accusations have not been received. If one is received, a format is in place to address the issue. If needed, there is EAP access for staff.

Standard number here

115.171 – 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)

Once a referral is made to the Connecticut State Police, the investigation is completely taken away from the facility. Information/status is only received because of the facilities investigator's relationship with CSP. The CSP may also request that the investigator provide additional information such as reports and video.

Administrative Investigations are required to be completed within ninety (90) days of the report. However, the investigator tries to complete within 3 – 4 weeks. Because of the short duration of the detainees stay, much of the investigation may be completed via phone conversations. The final report is documented with all necessary inclusions for a finding. In this type of investigation, 'preponderance of evidence' is the benchmark; as opposed to 'beyond a reasonable doubt'. It is noted that the investigator is an attorney.

Standard number here

115.172 – Evidentiary Standards 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)

Documentation shows that on March 25, 2014, Judicial Branch PREA Coordinators implemented the standards for this section, noting PREA standards for evidentiary standards. As noted above: Administrative Investigations are required to be completed within ninety (90) days of

the report. However, the investigator tries to complete within 3 – 4 weeks. Because of the short duration of the detainees stay, much of the investigation may be completed via phone conversations. The final report is documented with all necessary inclusions for a finding; including video, emails, letters (communication), witness statements, any additional evidence, date, location, time, policy, violation and if any prior investigations. In this type of investigation, 'preponderance of evidence' is the benchmark; as opposed to 'beyond a reasonable doubt'.

The investigator for Administrative Investigations is an attorney.

Standard number here 115.176 – Disciplinary Sanctions for Staff.
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- 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 Judicial Branch policy notes that any employee who engages in the sexual abuse or sexual harassment of an individual in the custody of the Judicial Branch, or who is found to be negligent in pursuing these responsibilities, will be subject to disciplinary and/or corrective action. Arrest and prosecution may also be pursued when conduct requires such response.

It should be noted that the Marshals work under a collective bargaining agreement which impacts the disciplinary process. Administration is able to move a staff member to another facility or place on Administrative Leave either paid or unpaid, however they are not able to terminate or discipline. That can only be completed by Court Operations. Termination of employees is difficult.

There have been no incidences of allegations toward staff.

Standard number here 115.177 – Corrective Action for Contractors and Volunteers.
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- 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 Judicial Branch Policy states that any Judicial Branch volunteer or intern who engages in the sexual abuse or sexual harassment of an individual in the custody of the Judicial Branch will be terminated. Also, any contractor who engages in the sexual abuse or sexual harassment of an individual in the custody of the Judicial Branch may be subject to contract cancellation.

The facility does not utilize volunteers, nor does it have but one contract and that is for cleaning purposes.

There has been no allegations of sexual abuse within the last twelve (12) months.

Standard number here **115.178 – Referrals for Prosecution for Detainee-on-Detainee Sexual Abuse.**

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

Policy 213-13 requires the Marshall Services to report all allegations of sexual abuse, including third party and anonymous reports to the CT State Police for further investigation. In the last twelve (12) months there has been no accusations/reports of sexual abuse or harassment. After making the referral to the CT State Police, the facility only helps by providing any documentation/videos upon request.

Standard number here **115.182 – Access to Emergency Medical Services.**

- 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)

A review of policies show that the facility meets the standards.

This facility does not have medical or mental health providers in-house. Upon receipt of information, the detainee would be transported to either Hartford Hospital or St. Francis Hospital. The detainee would be accompanied by an advocate.

Standard number here **115.186 – Sexual Abuse Incident Reviews.**

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

Policy states that “Following every investigation in which there is a finding that sexual abuse occurred in a confinement facility under the control of the Judicial Branch, the Judicial Branch PREA Coordinator will initiate a review of the incident within 30 days of the conclusion of the investigation.” Standard states... at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated. To date, the Review Team has not had the need to meet. All individuals who make up the team were able to share the makeup of the team and what they would be required to do as a team.

The Incident Review form meets standard requirements.

Standard number here **115.187 – 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)

The Judicial Branch began implementation of the PREA standards in the first quarter of 2013. Accordingly, they have no data for 2013. A Memo dated April 24, 2015 states that the Judicial Branch has not received any requests from the Department of Justice requesting data regarding sexual abuse in its lockups. In addition the facility does not contract with another agency for confinement of detainees.

It should be noted that data has been gathered for the State PREA report and will be gathered for individual facilities. The plan is to examine trends which can be used to improve operations. The mechanism to gather the data is their own CMS system (computer), which is utilized extensively.

Standard number here **115.188 – 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)

The 2013 and 2014 PREA report is located on the agencies website. It noted in one case of an unsubstantiated allegation, steps were taken to address future related allegations. This case did not occur at this facility.

Standard number here **115.189 – 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)

This facility is in compliance with this standard. Records are retained for 10 years after the initial collection. The annual report is accessible to the public through the agency's website. This report has redacted all personal identifiers. The auditor was able to view the data storage area.

This auditor would like to thank all those individuals who are listed in this report. It is very obvious that a great deal of work went into the preparation, operationalizing and implementation of the PREA Standards. In addition, a special thank-you goes to Richard Loffredo and Denise Poncini for their role in preparing for this audit.

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.

Darlene M. Baugh

Auditor Signature

June 22, 2015

Date