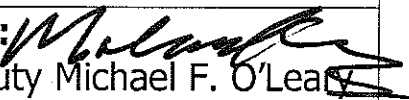


Will County Adult Detention Facility Policy and Procedure

Policy: Support Services # 2501 Prison Rape Elimination Act	
Effective Date: March 15, 2004	Approval:  Chief Deputy Michael F. O'Leary
A.C.A. Standards: 4-ALDF- 4D-22, 4D-22-1, 4D-22-2, 4D-22-3, 4D-22-4, 4D-22-5, 4D-22-6, 4D-22-7, 4D-22-8	Ill. County Jail Standards:
Related Policy: 2500 Sexual Assaults, 1120 Code of Ethics, 6010 Staff Training, 3381 Inmate Discipline	
Revision Dates	Review Dates
02-15-06, 04-15-11, 02-01-14	02-15-06, 02-15-07, 06-15-08, 03-15-09, 06-15-10, 04-15-11, 06-01-11, 03-01-12, 03-01-13, 02-01-14

2501 PRISON RAPE ELIMINATION ACT

POLICY:

The Will County Adult Detention Facility maintains a zero tolerance policy toward all forms of sexual abuse and sexual harassment for detainees and staff. The Will County Adult Detention Facility is committed to establishing and maintaining an atmosphere that prohibits sexual conduct between inmates, inmates and staff, inmates and volunteers or inmates and contractual staff regardless of consensual status, and are subject to administrative and criminal disciplinary sanctions. Inmates while incarcerated at the Will County Adult Detention Facility will be protected from sexual intimidation, harassment, or assault by other inmates, staff, volunteers, and contractual employees.

PROCEDURE:

- I. The Will County Adult Detention Facility complies with the Prison Rape Elimination Act (P.R.E.A.) Standards as a means to provide a safe environment for staff and inmates that is free of sexual intimidation, harassment, or assault. An agency-wide PREA coordinator is appointed to oversee agency efforts to comply with the PREA standards.

- II. Facility staff receive training regarding:
 - A. The Prison Rape Elimination Act Standards.
 - B. Will County Adult Detention Facility Policy related to sexual assault.
 - C. Will County Sheriff's Office General Orders related to harassment and Staff Code of Ethics.
 - D. Illinois Compiled Statutes 720 ILCS 5/11-9.2 Custodial Sexual Misconduct.
- III. Inmates shall receive orientation as to sexual abuse/assault. The information is to be communicated orally and in writing, in a language clearly understood by the offender, upon arrival at the Facility.
 - A. This information will be conveyed through:
 - 1. The inmate handbook
 - 2. The inmate orientation videos
 - 3. Oral orientation from staff
 - B. The following information will be conveyed:
 - 1. Prevention / Intervention
 - 2. Self protection
 - 3. Reporting of sexual abuse / harassment
 - 4. Treatment and counseling
- IV. All detainees will be screened within 72 hours of arrival at the facility for potential vulnerabilities or tendencies for sexually aggressive behavior.
 - A. The Booking Officer will monitor all inmates for potential vulnerabilities or sexually aggressive behavior by visually observing the inmate and through interaction.
 - B. The Booking nurse will utilize the *Medical PREA Screening Form* to document and assess an inmates potential vulnerabilities or tendencies of acting out with sexually aggressive behavior. The Booking nurse will screen and shall consider, at a minimum, the following:
 - 1. Physical, mental/developmental disability
 - 2. Age
 - 3. Physical stature
 - 4. Previous incarceration
 - 5. Whether Criminal History is nonviolent
 - 6. Prior convictions for sex offenses
 - 7. Sexual Orientation
 - 8. Prior sexual victimization
 - 9. Inmate's own perception of vulnerability
 - 10. Past experience with the inmate
 - 11. Interaction with other inmates

12. Harassment by other inmates
 13. Incarceration history
 14. Other observations or facts that the officer can articulate
- C. Sexual aggressiveness may be established by, but not limited to the following:
1. Current charges
 2. Criminal history
 3. History of sexually violent behavior
 4. Past experience with the inmate
 5. Interaction with other inmates
 6. Harassing of other inmates
 7. Incarceration history
 8. Self admission
 9. Combativeness / Aggressiveness
 10. Verifiable complaints from other inmates
 11. Other observations or facts that the officer can articulate
- D. The Booking nurse will enter a PREA Alert in Aegis if the inmate is determined to be sexually vulnerable or aggressive.
- E. All inmates will also be screened with the inmate medical / mental screening form.
- F. The Classification Unit will review all inmates' criminal records within 24 hours to determine if the inmate has a past history of sexually aggressive behavior.
- G. Any indication of vulnerability or aggressive behavior determined by methods described in section IV paragraph (B) or (C) of this section will require:
1. The Booking Nurse to notify Security Staff for immediate intervention.
 2. The Booking Sergeant to be notified to provide the inmate with suitable housing to prevent the inmate from being victimized or victimizing another inmate.

- H. The medical staff member will submit one copy of the Medical PREA Screening Form to:
1. The Inmate Classification Unit.
 2. The Medical records section.
 3. The Mental Health care worker.
- I. The Booking Officer will attach a Classification Alert on the Inmate Management Card of those inmates that have been identified for potential vulnerabilities or tendencies of acting out with sexually aggressive behavior. Inmates will receive one of the following designations:
1. **V-Vulnerable**
 2. **A-Aggressive**
 3. The Classification Unit upon classifying the inmate will utilize the Vulnerable / Aggressor designation as the prefix of the inmates Threat Level Code (i.e. V-03).
 4. Housing assignments will be based on this information. Vulnerable inmates will not be housed with inmates identified as aggressive.
 5. Inmates identified as high risk with a history of sexually assaultive behavior are assessed by a mental health or other qualified professional.
 6. Inmates with a history of sexually assaultive behavior are to be identified, monitored, and counseled.
 7. The Health Care Administrator in cooperation with the Center for Correctional Concerns (C.C.C.) will assure that inmates that are identified with sexually assaultive behavior receive counseling while in custody.
 8. Inmates, identified as being at risk for sexual victimization, will be assessed by the Facility Social Worker. Inmates identified at risk for sexual victimization will be identified, monitored and counseled.
 9. Counseling and treatment will be in accordance with current mental health protocol established by the Will County Adult Detention Facility and the current contractual health care provider.

10. Any staff member that becomes aware of an inmates potential for sexually aggressive behavior or vulnerability to sexual victimization must immediately notify:
 - a. The Watch Commander or Shift Sergeant.
 - b. The Classification Unit or Medical Unit.
 11. The Watch Commander will when made aware of an inmate's potential for sexually aggressive behavior or vulnerability to sexual victimization must take immediate action to isolate that inmate, until such time as the inmate can be evaluated by the Medical Unit.
 12. Inmates shall not be placed in involuntary segregated housing solely because of a high risk for sexual victimization, unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers.
 - a. If a facility cannot conduct such an assessment immediately, the facility may hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment.
- K. In deciding whether to assign a transgender or intersex inmate to a housing unit for male or female inmates, and in making other housing and programming assignments, the agency shall consider on a case-by-case basis.
- L. The agency shall not place lesbian, gay, bisexual, transgender, or intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status, unless such placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting such inmates.

- M. Within 30 days from the inmate's arrival at the facility, the facility will reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening.
 - 1. An inmate's risk level shall be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness.
 - 2. Inmates may not be disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked.

- V. Sexual contact/misconduct between an inmate and any other person in the Facility is prohibited.
 - A. Sexual misconduct can be any behavior or act of a sexual nature directed towards an inmate, staff member or visitor.
 - B. Sexual abuse of an inmate or detainee by another inmate or detainee includes any of the following acts, if the victim does not consent, is coerced into such act by overt or implied threats of violence, or is unable to consent or refuse
 - 1. Contact between the penis and the vulva or the penis and the anus, including penetration, however slight.
 - 2. Contact between the mouth and the penis, vulva, or anus.
 - 3. Penetration of the anal or genital opening of another person, however slight, by a hand, finger, object, or other instrument.
 - 4. Any other intentional touching, either directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or the buttocks of another person, excluding contact incidental to a physical altercation.
 - C. Sexual abuse of an inmate or detainee by a staff member, contractor, or volunteer includes any of the following acts, with or without consent of the inmate, detainee, or resident:
 - 1. Contact between the penis and the vulva or the penis and the anus, including penetration, however slight.
 - 2. Contact between the mouth and the penis, vulva, or anus.

3. Contact between the mouth and any body part where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire.
4. Penetration of the anal or genital opening, however slight, by a hand, finger, object, or other instrument, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire.
5. Any other intentional contact, either directly or through the clothing, of or with the genitalia, anus, groin, breast, inner thigh, or the buttocks, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire.
6. Any attempt, threat, or request by a staff member, contractor, or volunteer to engage in the activities described in sections V. (C. 1- 5) of this policy.
7. Any display by a staff member, contractor, or volunteer of his or her uncovered genitalia, buttocks, or breast in the presence of an inmate or detainee.
8. Voyeurism by a staff member, contractor, or volunteer.

D. Sexual misconduct includes but is not necessarily limited to:

1. Repeated and unwelcome sexual advances, requests for sexual favors, or verbal comments, gestures, or actions of a derogatory or offensive sexual nature by one inmate, detainee, or resident directed toward another
2. Repeated verbal comments or gestures of a sexual nature to an inmate, detainee, or resident by a staff member, contractor, or volunteer, including demeaning references to gender, sexually suggestive or derogatory comments about body or clothing, or obscene language or gestures
3. Sexual assault or battery, sexual abuse, or any activity that encourages or provides for the sexual gratification of another,
4. Obscenity or an unreasonable invasion of privacy,

5. Conversations or other communications that suggest or encourage a romantic or sexual relationship between an inmate and any other person within the Facility,
 6. Any consensual sexual contact.
- E. Voyeurism by a staff member, contractor, or volunteer means an invasion of privacy of an inmate, detainee, or resident by staff for reasons unrelated to official duties, such as peering at an inmate who is using a toilet in his or her cell to perform bodily functions; requiring an inmate to expose his or her buttocks, genitals, or breasts; or taking images of all or part of an inmate's naked body or of an inmate performing bodily functions.
- F. There are multiple internal ways for inmates to privately report sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents.
1. Submitting an Inmate Request Form 22.
 2. Verbally reporting sexual abuse or harassment to any staff member they feel comfortable talking to.
 3. Leaving a voice message on the ADF Information Tip line.
 4. Contacting the rape crisis hotline.
 5. Third Party Reports.
- G. An investigation will be conducted if information or evidence of a sexual encounter or relationship is discovered, or if any sexual misconduct is witnessed.
- i. The inmates involved will be immediately separated and transferred to separate housing.
 - ii. The inmates involved will be interviewed separately to determine if the encounter was consensual or not.
 - iii. The inmates involved will be seen by medical staff.
 - iv. If it is determined that the sexual encounter was consensual, the inmates involved will be subject to sanctions as outlined in **WCADF Policy # 3381 Inmate Discipline**.
 - v. Sexual misconduct incidents alleging the involvement of staff members, volunteers or contractors will be investigated by Will County Sheriff's Criminal Investigations Unit.

vi. The Watch Commander will report any incidents of Sexual Misconduct to the Deputy Chief of Operations.

VI. All allegations of sexual assault, harassment or intimidation made by an inmate, will be investigated by staff.

A. All staff must immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility.

1. Security Staff will notify their immediate supervisor.
2. Civilian staff will notify the Officer that is directly responsible for supervising that inmate without delay and then notify their supervisor.
 - a. Medical and mental health practitioners shall be required to report any knowledge, suspicion, or information regarding sexual abuse and to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services.
3. Security staff receiving any third party reports or allegations of sexual assault from a source outside of the Facility, or from another inmate who has witnessed an assault or who has knowledge of an assault must immediately notify their supervisor.
4. Aside from reporting to their supervisors, or to the officers supervising the inmate making the allegation of abuse or harassment, staff are not to reveal any information related to a sexual abuse report to any one else unless directed to by a supervisor as part of the investigation.

B. Upon receiving information of an assault, harassment or intimidation the staff member will make sure the inmate does not come in to further contact with the alleged perpetrator.

1. Inmates who are victims of sexual assaults, abuse or harassment may report the incident to any staff member that they feel comfortable with.
 - a. The inmate has the option to report the incident to a designated staff member other than their immediate point of contact line officer or their housing unit officer.

- VII. The Watch Commander will notify the health care worker on duty concerning allegations of sexual assault or abuse of an inmate.
- A. The Health Care Worker will implement the following procedures as soon as an alleged assault has been reported:
 - 1. Administer emergency care, if needed.
 - 2. Document any objective medical findings, such as bleeding, bruises, scratches, and report the findings to the Watch Commander.
- VIII. The on duty Watch Commander will initiate an investigation and a case report will be filed identifying:
- A. The victim's name
 - B. The time and date of the incident
 - C. The location of the incident
 - D. The names of the perpetrator(s)
 - E. The reporting staff members name and ID number
 - F. A synopsis of the incident
 - G. Initial medical care provided
 - H. The name of the person investigating the incident.
- IX. The on-duty Watch Commander will ensure that:
- A. The crime scene is secured (if possible).
 - B. That the alleged perpetrator(s) are isolated and placed in administrative segregation pending the outcome of the investigation.
 - C. Any evidence collected is handled in accordance with Will County Sheriff's Office policy related to the preservation of evidence.
 - D. A written report is filed.
- X. The Watch Commander will report the incident to the Deputy Chief of Operations or their designee as soon as the initial facts of the case are determined.
- A. The Deputy Chief of Operations will notify the Criminal Investigation Section to initiate an investigation.
 - B. The Deputy Chief of Operations will confer with the Medical Director or their designee regarding transfer of the victim to an outside medical facility or hospital for examination and evidence collection.

- XI. The Deputy Chief of Operations will notify the Facility Administrator of all allegations of sexual assault or intimidation made by an inmate.
- XII. The Facility Administrator will notify the Sheriff of all allegations of sexual assault or intimidation made by an inmate.
- XIII. A Report of Extraordinary Occurrence will be filed, by the Watch Commander, with the Illinois Department of Corrections within 72 hours of the allegation being reported. A copy of that report will be forwarded to the Facility Administrator.
- XIV. **WCADF Policy # 2500 Sexual Assaults** will be followed regarding the handling of all sexual assault cases.
- XV. Inmates, who are identified, as victims of sexual assault or attempted sexual assault while in custody, will be transferred to a local medical facility for treatment and gathering of evidence.
 - A. Treatment will be based on the medical facility's protocol for the treatment of sexual assault victims. The Illinois State Police Rape Kit will be used to collect evidence. The victim will not be forced to submit to this examination or the collection of evidence. Refusal to accept medical treatment or submit to evidence collection will be documented on a report continuation that will be added subsequently to the original case report and report number.
 - B. Inmates who are identified as a victim of a sexual assault or attempted sexual assault will be afforded testing for sexually transmitted diseases.
 - 1. Inmates will not be required to submit to such testing.
 - 2. Refusal to accept medical treatment or testing will be documented on a report continuation that will be added subsequently to the original case report and report number.
 - C. Inmates, who are identified as the victim of a sexual assault or attempted sexual assault will be afforded counseling by the Facility Social Worker(s) as appropriate.

- D. Inmates who are identified as a victim of a sexual assault, or attempted sexual assault will be afforded prophylactic treatment and follow-up care for sexually transmitted diseases.
- E. Inmates who have been returned from a medical facility after medical treatment for sexual assault, or attempted sexual assault will:
 - 1. Be afforded an evaluation by mental health staff to assess the need for crisis intervention counseling and long-term follow-up care.
 - a. This evaluation must occur as soon as possible upon the inmate's return to the Facility.
 - b. Inmates will be placed on close observation status, until such time, the inmate has been seen by mental health staff.
- F. Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, the agency shall inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded
 - 1. Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, the agency shall subsequently inform the inmate (unless the agency has determined that the allegation is unfounded) whenever:
 - a. The staff member is no longer posted within the inmate's unit.
 - b. The staff member is no longer employed at the facility.
 - c. The agency learns that the staff member has been indicted on a charge related to sexual abuse within the facility.
 - d. The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility.

2. Following an inmate's allegation that he or she has been sexually abused by another inmate, the agency shall subsequently inform the alleged victim whenever
 - a. The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility
 - b. The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.
3. All such notifications or attempted notifications shall be documented.

G. All case records associated with claims of sexual abuse, including incident reports, investigative reports, offender information, case disposition, medical and counseling evaluation findings, and recommendations for post-release treatment and/or counseling are retained in accordance with an established schedule.

- XVI. The facility shall conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded.
- A. Such review shall ordinarily occur within 30 days of the conclusion of the investigation
 - B. The review team shall include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners
 - C. The review team shall:
 1. Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse
 2. Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility

3. Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse
4. Assess the adequacy of staffing levels in that area during different shifts
5. Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff
6. Prepare a report of its findings and any recommendations for improvement and submit such report to the facility head and PREA compliance manager.

XVII. This policy will be reviewed annually and updated as needed.