

STATE OF INDIANA Department of Correction

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Robert E. Carter Jr. Commissioner

2020 Sexual Abuse Prevention Program Annual Report

This report provides a summary of the sexual incident report data collected in 2020, compares reporting data with the previous two years, summarizes problems identified and corrective actions completed, changes made to improve compliance with PREA standards, and identifies continued needs for compliance for the Agency.

1. Summary of SIR data for 2020

2020 AGENCY TOTALS	Substantiated	Unsubstantiated	Unfounded	Ongoing Invest	Total
Inmate Sexual Harassment	7	104	47	7	165
Abusive Sexual Contact	4	44	12	5	65
Nonconsensual Sexual Act	3	65	24	16	108
Staff Sexual Harassment	0	39	21	7	67
Staff Sexual Misconduct	15	25	15	2	57
Totals	29	277	119	37	462

2. Comparison of 2020 SIR data with previous two years.

2019 AGENCY TOTALS	Substantiated	Unsubstantiated	Unfounded	Ongoing Invest	Total
Inmate Sexual Harassment	9	57	38	16	120
Abusive Sexual Contact	6	36	23	18	83
Nonconsensual Sexual Act	4	30	21	7	62
Staff Sexual Harassment	4	34	19	11	68
Staff Sexual Misconduct	22	23	35	11	91
Totals	45	180	136	63	424

2018 AGENCY TOTALS	Substantiated	Unsubstantiated	Unfounded	Ongoing Invest	Total
Inmate Sexual Harassment	8	42	31	6	87
Abusive Sexual Contact	8	39	14	6	67
Nonconsensual Sexual Act	5	20	15	7	47
Staff Sexual Harassment	7	31	25	6	69
Staff Sexual Misconduct	16	19	19	12	66
Totals	44	151	104	37	336

The number of substantiated reports for the last three years is as follows:

- 2018 44 total substantiated reports
- 2019 45 total substantiated reports
- 2020- 29 total substantiated reports

In comparing the data from the last two years to 2020, there has been a 8% increase in the total reports received compared to 2019. Substantiated investigation findings are down 36% from the last two years. Substantiated findings for staff sexual misconduct have decreased by 32% from 2019. There was an increase in reports of nonconsensual sex acts by 43% in 2020, however the number of substantiated investigation findings did not increase. Reports of harassment by another inmate increased by 27% for the second year in a row.

3. Problems identified and corrective actions taken.

The following are corrective actions by the agency in 2020:

There were no agency level corrective actions required during a facility audit in 2020.

The following are corrective actions as a result of incident reviews by facilities during 2020:

Indiana State Prison

- Request for additional cameras in the Chapel.
- Request for additional cameras in the ICI areas.

Indiana Women's Prison

- Offenders were reminded not to loiter around the shower areas.
- Camera coverage was added to the icehouse.
- Lighting on unit 6 was adjusted.
- Lights were to remain on in all hallways at night.

The following are corrective actions as a result of facility PREA audits during 2020:

Correctional Industrial Facility

- 115.33 Staff were pre-completing the offender PREA orientation document and having the offender simply sign it after orientation. Staff were instructed to provide the offender with a blank form so they can fill it in.
- 115.61 A facility nurse did not immediately forward a report from an offender of sexual abuse as required by the standard. The nurse was given additional training and documentation provided to the auditor.

Pendleton Correctional Facility

 Reviews of Vulnerability Assessment (SVATS) were found being completed outside of the required 30 days time frame. Staff completing assessments were re-educated on

- the DOC policy and PREA standard. Adjustments were made to better track time frames.
- Investigations were found to be conducted by staff not qualified to investigate sexual abuse. The investigations were not thoroughly documented. The Executive Director of PREA conducted training with the investigators at Pendleton and provided a PREA investigations checklist to guide a PREA investigation and writing of the report. Additional investigations were provided to the auditor for review and were determined to meet the standard.

Putnamville Correctional Facility

- The PCM was moved in the facility organizational chart to report directly to the Warden.
- A memorandum from the Warden to all staff required the PREA unannounced rounds to be conducted by the shift supervisor every shift and documented in each housing unit logbook.
- Vulnerability assessments were completed out of the required time frame. The PCM reminded staff of the 72 hour and 30 day time frames and implemented a tracking mechanism to ensure timeliness.
- Staff were reminded of the requirement for retaliation monitoring for a report of sexual abuse. The auditor reviewed retaliation monitoring for new cases after the onsite audit.
- Staff had to be reminded of the requirement to give a victim a written notice of outcome for a sexual abuse investigation.
- Additional training was given to the members of the sexual abuse incident review committee on how to conduct a review and ensure the required staff are on the committee based on the standard and policy.

LaPorte Juvenile Correctional Facility

- Staff that had not completed Search training at the time of the audit, were provided the training. Documentation of the training was provided by the PCM to the auditor.
- Offenders that reported being prior victims of sexual abuse were referred to medical/mental health but were not seen within 14 days. Medical and mental health staff were provided additional training about the standard requirements.

4. Steps taken by the Agency to meet PREA standards.

The following are steps the Indiana Department of Correction took during 2020 to improve compliance with PREA standards. Although the state is not 100% compliant with the PREA standards, Governor Holcomb provided assurance the state would continue to work toward 100% compliance to the U.S. Attorney General. The following are steps the agency took to work toward compliance or improved compliance:

- Policy 02-01-115 Sexual Abuse Prevention was revised to mirror the PREA standards.
- The Sexual Violence Assessment Tool (SVAT) for adult and juvenile offenders was revised.
- The retaliation monitoring process and form were revised to monitor retaliation for sexual abuse reports only.
- The Sexual Abuse Incident Review form was revised to improve the documentation of who was on the review committee and the documents that were reviewed.

- The monthly PREA Committee Meeting Minutes form was revised to reflect the change in policy covering the topics the committee was to review each month.
- A Quarterly PREA Compliance Review form was created to document the facility PREA Compliance manager's quarterly reviews that are no required in the policy revision.

5. Continued Needs for Compliance

In October of 2017, the staffing ratios required in standard 115.313 became effective for all juvenile facilities. The IDOC Division of Youth Services closed the Madison Juvenile Facility and moved the population to the La Porte Juvenile Correctional Facility. The Logansport Juvenile Correctional Facility (2019) and the La Porte Juvenile Correctional Facility (2020) were found to meet the required staffing ratios based on the results of PREA audits. The Pendleton Juvenile Correctional Facility was found to not meet the staffing ratios during a 2019 PREA audit. The continued need for compliance at Pendleton Juvenile CF is filling current vacancies and an increase in staffing to meet the staffing ratios required by standard 115.313.

6. Summary

In 2020, the Indiana Department of Correction continued to make improvements in policy and practice to meet the PREA standards. The Agency continues to improve video monitoring technology in several facilities. Seven facilities participated in a PREA audit in 2020, completing year 2 of audit cycle 3. Five received a final report with full compliance in 2020. Two are in the corrective action period that will soon be completed during 2021.

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Commissioner