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creating diverse and innovative services for people

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Section: Safety and Emergency Planning

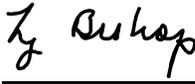
Subject: PREA (Prison Rape Elimination Act)

Policy Number: C.7

Effective Date: April 1, 2014

References: NAFI/NFI Employee Handbook Code of Conduct and
NAFI CT P&P Harassment, Bullying, and Intimidation.
NAFI CT P&P Reporting Unethical Behavior
DBT P&P B.2 Care and Supervision
DBT P&P C.12 Video Surveillance
DBT P&P C.11 Program, Room, and Person Searches
NAFI CT P&P HR 1.3 Background Checks
NAFI CT P&P LE 4.2 Investigations
NAFI CT P&P SD 1.1 Employee Training
DBT P&P A.10 Intake Process
NAFI CT P&P OP 3.3 Physical Interventions and Seclusion
NAFI CT P&P OP 3.7 Client Grievances
DBT P&P B.5 Grievances.
NAFI CT P&P LE 4.3 Mandated Reporting
NAFI CT P&P LE 3.3 Case Record Archiving, Destruction, and
Shredding

Attachments: None

Approved: 
Lynn Bishop
Executive Director, NAFI CT

April 1, 2021
Date

Policy: New
 Revised **Revision Date: 4/1/2021**

POLICY:

In accordance with federal guidelines and regulations, NAFI CT operates a program of education, prevention, detection, response and tracking of all reported incidences of sexual abuse and harassment.

PROCEDURE:

Prevention and Responsive Planning

1. The Agency institutes a zero tolerance policy on sexual abuse and harassment. Please see **NAFI/NFI Employee Handbook Code of Conduct** and **NAFI CT P&P LE 2.1 Harassment, Bullying, and Intimidation**.
2. The Agency institutes a policy on reporting all illegal and unethical behavior. Please see **NAFI CT P&P LE 4.1 Reporting Unethical Behavior**.
3. The DBT Program Director is assigned as the PREA Coordinator/Manager to ensure programs are in compliance with PREA standards.
4. Programs provide adequate staffing ratios to protect clients from sexual harassment and/or abuse. NAFI CT does not authorize staffing ratios that exceed one staff to four clients (1:4). Managers conduct and document unannounced visits to confirm ratios and supervision policies are being adhered to. Please refer to **DBT P&P B.2 Care and Supervision**.
5. To further enhance monitoring the programs are equipped with video surveillance. Please refer to **DBT P&P C.12 Video Surveillance**. Cameras are reviewed on a regular basis to ensure program safety.
6. The agency prohibits strip searches, body cavity searches, and cross gender searches (unless it is clinically appropriate based on the youths' gender identity or trauma history). Please refer to **DBT P&P C.11 Program, Room, and Person Searches**.
7. All staff, volunteers and interns are subject to extensive background checks prior to hire. Please refer to **NAFI CT P&P HR 1.3 Background Checks**.
8. In the event that an incident of sexual abuse occurs at the facility, the agency ensures the client has immediate access to forensic medical exam performed by a Sexual Assault Forensic Examiner. In addition, the agency will make available a victim advocate from a rape crisis center that can accompany the client through the forensic medical process, investigatory interviews and provide emotional support and crisis intervention.

9. Upon any instance or allegation of sexual abuse and/or harassment, the agency ensures an administrative or criminal investigation occurs. Both the police as well as the DCF hotline and guardian are notified. Please refer to **NAFI CT P&P LE 4.2 Investigations**.
10. The agency will ensure that written materials are in formats that ensure effective communication with clients who are limited English proficient.
11. At no time does the program utilize resident readers/interpreters. The agency will only utilize staff fluent in the language of choice, or contract with the language line to ensure all aspects of PREA education are interpreted for resident.

Training and Education

1. The agency facilitates mandatory training for all employees, interns and volunteers that addresses the zero tolerance policy for sexual abuse and sexual harassment, policies and procedures regarding prevention, detection and reporting, signs and symptoms of sexual abuse, and professional boundaries with clients. Please refer to **NAFI CT P&P SD 1.1 Employee Training**.
2. Employees, interns and volunteers will attend an initial PREA training and then a recertification every two years thereafter.
3. Annually, employees, interns and volunteers receive information on the agencies sexual abuse and sexual harassment policies.
4. The agency will document through employee signature that employees have attended training and/or received and understood written information.
5. Employees designated to perform internal investigations attend training on conducting investigations in residential and group home settings. This training is documented in the employee's electronic training file.
6. Within 10 days of program intake, clients are educated on their rights to be free from sexual abuse and sexual harassment and to be free from retaliation from reporting such events. Please refer to **DBT P&P A.10 Intake Process**.
7. Residents who are transferred from another facility are educated on their rights to be free from sexual abuse and harassment, and retaliation from reporting such events regardless of such policies and procedures from previous facility.
8. The agency posts visible information through posters and handbooks to remind clients of their rights.

Screening for Risk

1. All residents partake in a thorough biopsychosocial exam upon intake that outlines prior sexual abuse and victimization, disabilities, level of emotional and cognitive development, etc. Please refer to **DBT P&P A.10 Intake Process**.
2. The agency uses the information to make an informed decision on where the resident resides and the amount of supervision they may need. At no time does the agency seclude clients. Please refer to **NAFI CT P&P OP 3.3 Physical Interventions and Seclusion**.

Reporting

1. The agency provides multiple methods for clients to privately report sexual abuse and harassment. Please see **NAFI CT P&P OP 3.7 Client Grievances** and **DBT P&P B.5 Grievances**.
2. The agency provides multiple methods for employees to privately report incidences of sexual abuse and harassment. Please refer to **NAFI CT P&P Reporting Unethical Behavior**.
3. The agency complies with designated timeframes for investigating and responding to grievances. Please refer to **NAFI CT P&P OP 3.7 Client Grievances** and **NAFI CT P&P LE 4.2 Investigations**.

Response Following a Report, Medical and Mental Health Care

1. All staff is required to report any incidences immediately on any knowledge, suspicion, or information they receive regarding any incident of sexual abuse or sexual harassment that occurred in any facility, whether or not it is a part of the agency. Please refer to **NAFI CT P&P LE 4.3 Mandated Reporting**.
2. When the agency learns that a client is subject to a substantial risk of imminent sexual abuse, it takes immediate action to protect the client.
3. Upon learning of an allegation of sexual abuse or harassment, staff first responders will separate the alleged victim and abuser, protect any evidence of the potential crime, and follow program specific chain of command reporting.
4. Upon report, if abuse occurred within a timeframe where that still allows for physical evidence to be collected, the staff will not take any actions with alleged victim that could destroy physical evidence such as, showering, brushing teeth, smoking, drinking, eating, urinating, defecating or changing clothes.
5. All clients have immediate access to mental health and medical resources both internally and externally.

6. For at least 90 days following the report, the agency monitors the conduct and treatment of the residents and staff who reported the abuse and the clients who were reported to have suffered the sexual abuse.

Investigations, Discipline, Corrective Action

1. When necessary, the agency will conduct its own investigations into sexual abuse and sexual harassment allegation. Please refer to **NAFI CT P&P LE 4.2 Investigations**.
2. If and when the quality of the evidence appears to support criminal prosecution, the agency will immediately contact the appropriate law enforcement agency and transfer the investigation.
3. The agency will openly and willingly cooperate with any and all external investigations that may occur due to allegation sexual abuse or sexual harassment.
4. The Human Resource Manager will be actively involved in any and all investigations and determine, with program leadership, protocol for staff involved.
5. The Human Resource Manager will determine course of action for identified staff of the investigation. Upon results of the investigation, the Human Resource Manager will determine the employee's status within the agency. Dependent upon the investigatory findings the agency can take disciplinary action, up to including termination of employment.
6. If the client is in the agency's care, the agency will maintain open and transparent contact with the client throughout the investigation process.
7. The client is not subject to disciplinary action unless the investigative finding is that the resident engaged in resident-on-resident sexual abuse.
8. After the conclusion of any investigation, the agency reviews the findings and develops a corrective action plan to address any programmatic findings. Please refer to **NAFI CT P&P PQI 2.2 Critical Incidents**.

Data Collection and Review

1. The agency conducts a sexual abuse incident review at the conclusion of every sexual abuse investigation, including those incidents where the allegation was not substantiated.
2. Reviews take place within 30 days of the conclusion of the investigation.

3. The review team consists of the Executive Director, Director of Operations, Human Resource Manager, Director of Quality Assurance, and department heads.
4. The team considers whether the incident was motivated by race, gender identity, gang affiliation or other group dynamics at the facility.

Audits, Corrective Action Plan, State Compliance

1. All data collected is securely retained. Please refer to **NAFI CT P&P LE 3.3 Case Record Archiving, Destruction, and Shredding**.
2. The agency will make available aggregated sexual abuse data at least annually via its website.
3. The agency will maintain sexual abuse data for at least 10 years after the date of its initial collections.
4. The agency will contract with a qualified external resource to conduct audits at least every three years to ensure the agency is in compliance with PREA standards.
5. The agency will comply with and adhere to any recommendations outlined on a corrective action plan.