

**PREA AUDIT REPORT    INTERIM    FINAL**  
**JUVENILE FACILITIES**

**Date of report:** August 18, 2016

<b>Auditor Information</b>			
<b>Auditor name:</b> Robert Burns Latham			
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<b>Telephone number:</b> 205-746-1905			
<b>Date of facility visit:</b> July 21-23, 2016			
<b>Facility Information</b>			
<b>Facility name:</b> Swanson Center for Youth			
<b>Facility physical address:</b> 4701 South Grand Street, Monroe, LA 71202 and 132 Hwy 850, Columbia LA 71418			
<b>Facility mailing address:</b> <i>(if different from above)</i> P.O. Box 69, Grayson, LA 71435 (Columbia)			
<b>Facility telephone number:</b> 318-362-5000(Monroe); 318-649-2385(Columbia)			
<b>The facility is:</b>	<input type="checkbox"/> Federal	<input checked="" type="checkbox"/> State	<input type="checkbox"/> County
	<input type="checkbox"/> Military	<input type="checkbox"/> Municipal	<input type="checkbox"/> Private for profit
	<input type="checkbox"/> Private not for profit		
<b>Facility type:</b>	<input checked="" type="checkbox"/> Correctional	<input type="checkbox"/> Detention	<input type="checkbox"/> Other
<b>Name of facility's Chief Executive Officer:</b> Richard Robinson			
<b>Number of staff assigned to the facility in the last 12 months:</b> 300			
<b>Designed facility capacity:</b> 192			
<b>Current population of facility:</b> 186			
<b>Facility security levels/inmate custody levels:</b> Maximum/ Medium to Maximum			
<b>Age range of the population:</b> 13 - 20			
<b>Name of PREA Compliance Manager:</b> Shakita R. Hays		<b>Title:</b> PREA Compliance Manager	
<b>Email address:</b> <a href="mailto:shakita.hays@la.gov">shakita.hays@la.gov</a>		<b>Telephone number:</b> 318-362-5000 ext. 4891	
<b>Agency Information</b>			
<b>Name of agency:</b> Louisiana Youth Services Office of Juvenile Justice (OJJ)			
<b>Governing authority or parent agency:</b> <i>(if applicable)</i> <a href="#">Click here to enter text.</a>			
<b>Physical address:</b> 7919 Independence Boulevard; State Police Bldg., 1st Floor, Baton Rouge, LA 70806			
<b>Mailing address:</b> <i>(if different from above)</i> P.O. Box 66458, Audubon Station, Baton Rouge, LA 70896			
<b>Telephone number:</b> 225-287-7900			
<b>Agency Chief Executive Officer</b>			
<b>Name:</b> Dr. James Bueche		<b>Title:</b> Deputy Secretary	
<b>Email address:</b> <a href="mailto:james.bueche@la.gov">james.bueche@la.gov</a>		<b>Telephone number:</b> 225-287-7937	
<b>Agency-Wide PREA Coordinator</b>			
<b>Name:</b> Yezette White		<b>Title:</b> PREA Coordinator	
<b>Email address:</b> <a href="mailto:yezette.white@la.gov">yezette.white@la.gov</a>		<b>Telephone number:</b> 504-252-7236	

## AUDIT FINDINGS

### NARRATIVE

The PREA audit of Swanson Center for Youth (SYC) at Monroe and Columbia occurred July 21-23, 2016.

Notices of the PREA Audit, including confidential contact information for the auditor, were sent on June 8, 2016 (six weeks prior to the on-site audit) to the Louisiana Office of Juvenile Justice (OJJ) PREA Coordinator. The notices were posted throughout the facilities in areas accessible to staff, youth, volunteers and visitors. Photos demonstrating the notices were posted were emailed to the auditor for verification.

Four weeks prior to the on-site audit, the SYC PREA Compliance Manager mailed a USB flash drive to the auditor. The flash drive included the following:

- Swanson Center for Youth PREA Audit: Pre-Audit Questionnaire – Juvenile Facilities
- Population Reports for the 1<sup>st</sup>, 10<sup>th</sup>, and 20<sup>th</sup> of the 12 month audit period
- The OJJ Mission Statement
- The OJJ Vision Statement
- OJJ Policies and Procedures
- Supporting Documentation for Each Standard

The auditor reviewed the documentation and requested some additional supporting documentation prior to the on-site audit, during the on-site audit and afterward. The PREA Compliance Manager and PREA Coordinator were very accommodating and promptly provided all requested documentation.

The onsite-audits at SYC at Monroe and Columbia began with an entrance session. The auditor and key staff members introduced themselves, discussed the audit process, and a tour of each facility followed.

The tour of SYC Monroe lasted approximately three hours. It is a large and sprawling campus. Cameras were located in most areas of the campus, with the school being one of the exceptions. Grant funds have been allocated to add video surveillance technology to the school. Monitors are located in the dormitories and a central control center, located in the gatehouse. Individuals with access to video monitoring include the Regional Director, Facility Director, Deputy Director, Assistant Director and Investigative Services. Although some areas are in need of additional cameras, policy requires youth are always under the direct supervision of staff. Staff interviews confirmed this practice.

The tour of SYC Columbia revealed the smaller of the two facilities had cameras placed tactically throughout the facility to minimize blind spots. Monitors are located in a central control center. Individuals with access to video monitoring include the Columbia Deputy Director, Assistant Deputy Director, and Investigative Services in Monroe.

Both SYC Monroe and Columbia had PREA posters located strategically next to direct connect telephones. Youth have access to privately report allegations of sexual abuse or harassment to the Investigative Services Hotline or the Louisiana Foundation Against Sexual Assault (LaFASA). A telephone number was also available for the Wellspring Alliance for Families for victim advocacy services.

There were 138 youth at SYC Monroe during the audit. Thirteen (13) youth were interviewed, including one youth who identified as transgendered and one youth who disclosed prior victimization. There were 47 youth at SYC Columbia during the audit. Seven (7) youth were interviewed. Twenty (20) of the total 185 youth were interviewed during the three day audit.

Staff interviews included the following:  
Agency Head (Designee)

Facility Director  
 Deputy Director – Columbia  
 PREA Coordinator  
 PREA Compliance Manager  
 Intermediate or Higher Level Staff – Unannounced Rounds  
 Medical Staff  
 Mental Health Staff  
 Human Resources Staff  
 SANE/SAFE Staff (Ouachita Coroner’s Office)  
 Volunteer who has Contact with Residents  
 Investigative Staff  
 Staff that Performs Screening for Risk of Victimization and Abusiveness  
 Staff who Supervise Residents in Isolation  
 Incident Review Team Member  
 Designated Staff Member Charged with Monitoring Retaliation  
 Staff Member who has acted as a First Responder  
 Intake Staff

Ten (10) random direct care staff interviews were conducted at Swanson Monroe and ten (10) random direct care staff interviews were conducted at Swanson Columbia. A total of twenty (20) random direct care staff interviews were conducted during the three day audit.

A total of thirty-eight staff interviews were conducted. Staff were generally well informed of their responsibilities and committed to enforcing the OJJ zero-tolerance policy toward all forms of sexual abuse and sexual harassment.

Aggregated data for allegations during the 12 month audit period is as follows:

Type of Allegation	Substantiated	Unsubstantiated	Unfounded
Youth-on Youth Nonconsensual Sexual Act	0	0	0
Youth-on Youth Abusive Contact	0	3	6
Youth-on Youth Sexual Harassment	1	2	17
Staff Misconduct	0	1	5
Staff Sexual Harassment	0	0	5

## **DESCRIPTION OF FACILITY CHARACTERISTICS**

The Louisiana Youth Services, Office of Juvenile Justice (OJJ) Swanson Center for Youth (SCY) is located in Monroe and Columbia, Louisiana.

SYC Monroe is located on approximately 600 acres within the city limits of Monroe, Louisiana. The facility has a capacity for 144 male youth. The campus consists of an administration building, chapel, gymnasium, infirmary, dining hall and kitchen, maintenance buildings, a warehouse, laundry facilities, three school buildings, a control center, gatehouse, staff development building, records building, carpentry shop, welding shop, mechanical building, ten dormitories, and outdoor recreation space. The campus is surrounded by a ten foot chain link fence topped with razor wire. The administration building is located outside the fence. Entrance to the campus is gained through a fenced in sally port for vehicles. Individuals enter by foot through the adjacent gatehouse and then through the sally port.

SYC Columbia is located on 10 acres in nearby Columbia, Louisiana. The facility has a capacity for 48 male youth. The campus consists of an administration building, dining hall and kitchen, a maintenance building, infirmary, school, four dormitories and outdoor recreation space. The buildings are surrounded by a ten foot chain link fence. Entrance to the campus is gained through a fenced in sally port with electronic gates for both vehicles and foot traffic.

The mission of the Agency is, "OJJ protects the public by providing safe and effective individualized services to youth, who will become productive, law-abiding citizens."

The vision of the Agency is, "OJJ is a quality system of care which embraces partnerships with families, communities and stakeholders to assist youth in redirecting their lives toward responsible citizenship."

### **Treatment Programs:**

- Mental Health Unit
- Transitional Mental Health
- Dialectical Behavioral Therapy
- Sex Offender Treatment
- Substance Abuse
- Pre-release/Life Skills
- Anger Management
- Victim Awareness
- Conflict Resolution
- Health Masculinity
- Cognitive Behavior Program
- FAST TRACK
- Victory Transitional Treatment Unit

### **Educational Programs:**

- Alternative High School
- Special Education
- PRE-GED and GED Course Work

### **Vocational Education**

- Welding
- Carpentry
- Horticulture
- OSHA

## **SUMMARY OF AUDIT FINDINGS**

On July 21-23, 2016 three site visits were completed at Swanson Center for Youth in Ouachita Parish and Caldwell Parish, Louisiana. The results indicate Swanson Center for Youth met forty (40) standards and one (1) standard was not applicable.

Number of standards exceeded: 0

Number of standards met: 40

Number of standards not met: 0

Number of standards not applicable: 1

**Standard 115.311 Zero tolerance of sexual abuse and sexual harassment; PREA Coordinator**

- 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

The following was considered in determining compliance with the standard:

**Policy and Procedures**

C.2.11, Prison Rape Elimination Act (PREA) Sections: V-VI, Pages 3-4

**Supporting Documentation**

Swanson Center for Youth PREA Audit: Pre-Audit Questionnaire – Juvenile Facilities  
Louisiana Office of Juvenile Justice Organizational Chart  
Swanson Center for Youth Organizational Chart  
Memorandum Designating Agency Wide PREA Coordinator  
Memorandum Designating Facility PREA Compliance Manager

**Interviews**

Agency Wide PREA Coordinator  
Facility PREA Compliance Manager

**Conclusion:** The PREA Coordinator and PREA Compliance Manager are designated by memoranda and are included in the agency/facility organizational structure. Louisiana Youth Services Office of Juvenile Justice (OJJ) policy mandates zero tolerance toward all forms of sexual abuse and sexual harassment. Policy outlines how Swanson Center for Youth will implement the agency’s approach to preventing, detecting, and responding to sexual abuse and sexual harassment. The policy includes definitions of prohibited behaviors regarding sexual abuse and sexual harassment, as well as sanctions for those found to have participated in such behaviors.

The PREA Coordinator confirmed she has sufficient time and authority to develop, implement, and oversee OJJ efforts to comply with PREA standards in its facilities. The facility PREA Coordinator confirmed she has sufficient time and authority to coordinate the facility’s efforts to comply with the PREA standards.

**Standard 115.312 Contracting with other entities for the confinement of residents**

- 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion**

**must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

The following was considered in determining compliance with the standard:

### **Supporting Documentation**

Swanson Center for Youth PREA Audit: Pre-Audit Questionnaire – Juvenile Facilities  
Contracts for the Confinement of Residents with Private Agencies

### **Conclusion:**

Contracts for the confinement of residents with private agencies or other entities include the following language:

“Contractor will comply with the Prison Rape Elimination Act of 2003 (Federal law 42. U.S.C.15501 ET. Seq.), and with all applicable PREA Standards, YS Policies related to PREA and Standards related to PREA for preventing, detecting, monitoring, investigating, and eradicating any form of sexual abuse within YS Facilities/Programs /Offices owned, operated or contracted. Contractor acknowledges that, in addition to "self-monitoring requirements" YS will conduct announced or unannounced, compliance monitoring to include "on-site" monitoring. Failure to comply with PREA, including PREA Standards and YS Policies may result in termination of the contract. Contractor is required to comply with all applicable provisions of the Louisiana Children's Code.”

### **Standard 115.313 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

The following was considered in determining compliance with the standard:

### **Policy and Procedures**

C.2.11 Prison Rape Elimination Act (PREA), Section VI. D, Page 4  
C.2.19 Youth Accountability – Secure Care Facilities

### **Supporting Documentation**

Swanson Center for Youth PREA Audit: Pre-Audit Questionnaire – Juvenile Facilities  
Memorandum - Internal Review of Staff Pattern and Daytime Staffing Ratios  
Annual Review of Staffing Plan  
PREA 2015 Annual Report  
Duty Logs - Staffing Ratios  
Manpower Movement Logs  
Logbook Entries - Unannounced Rounds

## Interviews

Superintendent

Agency Wide PREA Coordinator

Facility PREA Compliance Manager

Intermediate or Higher Level Staff

## Conclusion:

Louisiana Youth Services Office of Juvenile Justice (OJJ) policy requires all aspects of the standard to be considered in determining adequate staffing levels and determining need for video monitoring. The facility's self-assessment determined documenting daytime staffing levels needed improvement. Steps were taken to address this area prior to contracting with the auditor. The facility uses Duty Logs to document 1:8 ratios during waking hours and 1:16 ratios during youth sleeping hours. Manpower Movement Logs document staff reassignments and holdovers used to meet required staffing ratios. Previous reasons for deviations from the staffing plan included staff illness and injury and emergencies. Documentation of Duty Logs and Manpower Movement Logs, provided to the auditor, demonstrate Swanson Center for Youth has fully implemented documenting staffing ratios and has made this an established practice.

OJJ policy requires the agency, in consultation with the PREA Coordinator, to assess, determine and document whether adjustments are necessary to the staffing plans and deployment of video monitoring and other monitoring systems for its secure facilities. Staffing Pattern reviews were provided to the auditor for 2015 and 2016.

OJJ determined in its PREA 2015 Annual Report a need to improve unannounced round documentation by intermediate level or higher supervisors with review by PREA compliance managers and the agency PREA Coordinator. Routine rounds were regularly documented. Unannounced rounds occurred, but were not clearly documented as such. This area was addressed and unannounced rounds are clearly and consistently documented on all shifts. The auditor was provided with documentation demonstrating full implementation and establishment of this practice.

## Standard 115.315 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

The following was considered in determining compliance with the standard:

## Policy and Procedures

C.2.11 Prison Rape Elimination Act (PREA), Section VI. D, Page 5

B.2.20 Non-Discriminatory Services to LGBTIQ and Nonconforming Youth

C.2.3 Searches of Youth

A.2.25 Staff Development and Training Plan

CA-02-011 Shower Procedures

SF-05-011 Facility Design

PREA Audit Report



## Supporting Documentation

Swanson Center for Youth PREA Audit: Pre-Audit Questionnaire – Juvenile Facilities  
Memorandum - Medical did not conduct cross-gender strip searches.  
Guidance in Cross-Gender and Transgender Pat Searches - *The Moss Group, Inc.*  
Staff Training Records - Cross-Gender Pat Searches

## Interviews

Superintendent  
PREA Compliance Manager  
Staff  
Residents

## Conclusion:

Louisiana Youth Services Office of Juvenile Justice (OJJ) policy states cross-gender strip searches or visual body cavity searches are prohibited except in exigent circumstances or when performed by medical practitioners. Youth are able to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing them except in exigent circumstances when such viewing is incidental to routine cell checks. Searches or physical examinations of transgender or intersex youth shall not be utilized solely for determining genital status. Staff are trained on conducting cross-gender pat-down searches and searches of transgender and intersex youth.

Interviews with staff and residents confirmed pat-down searches are only conducted by male staff. Staff confirmed they have received training concerning cross-gender, intersex and transgender searches.

Female and male staff confirmed that female staff announce their presence when entering a youth housing unit. Often after a female staff has announced her presence, male staff announce the female staff's presence as well.

## Standard 115.316 Residents with disabilities and residents who are limited English proficient

- 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

The following was considered in determining compliance with the standard:

## Policy and Procedures

C.2.11 Prison Rape Elimination Act (PREA), Section VI. E, Page 5  
B.8.8 Americans with Disabilities Act (Youth)

## Supporting Documentation

Swanson Center for Youth PREA Audit: Pre-Audit Questionnaire – Juvenile Facilities  
Teacher's Special Education Certificates  
Memorandum of Understanding for Interpreter Services  
PREA Audit Report

Memorandum of Understanding with Grace and Glory, Inc. (Speech and Hearing Impaired)  
Contract with Visual Communication Service, LLC (Interpreter Services for Hearing Impaired)  
Youth Safety Guide - English  
Youth Safety Guide - Spanish  
Edmark Reading Program  
Staff Training Records - Americans with Disabilities Act

### **Interviews**

Agency Head Designee  
Staff

### **Conclusion:**

Louisiana Youth Services Office of Juvenile Justice (OJJ) policy provides disabled residents equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. Special education teachers are on-site. Language interpreter services are available for residents who are limited English proficient. Resident interpreters are not used and are prohibited due to confidentiality of resident information. Zero-tolerance information is available through English and Spanish Youth Safety Guides.

Interviews with staff confirmed interpreters would be provided for residents who are limited English proficient. No staff member reported knowledge of the use of resident interpreters or readers.

### **Standard 115.317 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

The following was considered in determining compliance with the standard:

### **Policy and Procedures**

C.2.11 Prison Rape Elimination Act (PREA), Section VI. F, Pages 5-6  
A.2.18 Criminal Record Check

### **Supporting Documentation**

Swanson Center for Youth PREA Audit: Pre-Audit Questionnaire – Juvenile Facilities  
Department of Children and Family Services (DCFS) Child Abuse Registry Checks  
Criminal Background Checks

### **Interview**

Administrative (Human Resources) Staff

### **Conclusion:**

Louisiana Youth Services Office of Juvenile Justice (OJJ) policy requires the Human Resources staff conduct a PREA Audit Report

background check, consults the Department of Children and Family Services (DCFS) child abuse registry, and contacts previous employers for information on substantiated allegations of sexual abuse or resignation during a pending investigation of allegation of sexual abuse. Job applicants and employees are also asked about previous misconduct in written job applications and interviews for hiring and promotion. Employees have a continuing duty to disclose any such misconduct; material omissions or providing materially false information shall be grounds for termination.

OJJ uses a capturing system to remain informed of a current employee's criminal background.

The Human Resources staff confirmed Swanson Center for Youth follows all requirements of policy concerning hiring and promotions. Documentation provided to the auditor included: criminal background clearances, DCFS child abuse registry consultations, and examples of applications and interview questions.

### **Standard 115.318 Upgrades to facilities and technologies**

- 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

The following was considered in determining compliance with the standard:

#### **Policy and Procedures**

C.2.11 Prison Rape Elimination Act (PREA), Section VI. G, Page 6

#### **Supporting Documentation**

Swanson Center for Youth PREA Audit: Pre-Audit Questionnaire – Juvenile Facilities

#### **Interview**

Agency Head (Designee)  
Superintendent

#### **Conclusion:**

Louisiana Youth Services Office of Juvenile Justice (OJJ) policy states all designing, acquiring, renovations, additions, and new construction shall be of a design that facilitates direct contact between youth and staff, while considering the agency's ability to protect youth from sexual abuse. Additionally, when installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the agency shall consider how such technology may enhance the agency's ability to protect youth from sexual abuse.

Interviews and the Pre-Audit Questionnaire confirmed the facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012. OJJ has built a new facility in Acadiana, Louisiana. The new facility is not yet operational.

### **Standard 115.321 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)

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The following was considered in determining compliance with the standard:

**Policy and Procedures**

C.2.11 Prison Rape Elimination Act (PREA), Section VII. A-D, Pages 7-8

C.4.6 Securing Physical Evidence/Crime Scene

A.1.4 Investigative Services

CA-MC-04-02 Child Abuse Reporting and Allegations

**Supporting Documentation**

Swanson Center for Youth PREA Audit: Pre-Audit Questionnaire – Juvenile Facilities

Memorandum of Understanding with Ouachita Parish Coroner’s Office

Memorandum of Understanding with Wellspring Alliance for Families

Memorandum of Understanding with Monroe Police Department

St. Francis Medical Center Forensic Sexual Assault Evaluation Form

**Interviews**

SAFEs/SANEs Staff

PREA Compliance Manager

Staff

**Conclusion:**

Swanson Center for Youth conducts administrative and criminal sexual abuse investigations. Allegations are referred for criminal investigation when supported by the evidence. Both administrative and criminal investigations follow the National Protocol for Sexual Assault Medical Examinations.

Residents are offered access to forensic medical examinations through the Ouachita Parish Coroner’s Office. They offer SANE and SAFE services. Wellspring Alliance for Families provides victim advocate services. The victim advocate accompanies and supports the victim through the forensic medical examination process and investigatory interviews and provides emotional support, crisis intervention, information and referrals. There was one forensic examination conducted on a resident within the past 12 months.

An interview with a representative from the Ouachita Parish Coroner’s Office confirmed SANE services are available 24 hours a day.

**Standard 115.322 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

The following was considered in determining compliance with the standard:

**Policy and Procedures**

C.2.11 Prison Rape Elimination Act (PREA), Section VII. E, Page 8  
 A.1.4 Investigative Services  
 SC-01-021 Investigations

**Supporting Documentation**

Swanson Center for Youth PREA Audit: Pre-Audit Questionnaire – Juvenile Facilities  
 Memorandum of Understanding with Monroe Police Department

**Interviews**

Agency Head (Designee)  
 Investigative Staff

**Conclusion:**

Louisiana Youth Services Office of Juvenile Justice (OJJ) policy requires an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment. This policy is published on the OJJ website. Swanson Center for Youth has a memorandum of understanding with the Monroe Police Department for criminal investigations requiring referral for prosecution.

**Standard 115.331 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)

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The following was considered in determining compliance with the standard:

**Policy and Procedures**

C.2.11 Prison Rape Elimination Act (PREA), Section VIII. J, Pages 10-11  
 B.2.20 Non-Discriminatory Services to LGBTIQ and Nonconforming Youth  
 A.2.24 Staff Development and Training Plan

### **Supporting Documentation**

Swanson Center for Youth PREA Audit: Pre-Audit Questionnaire – Juvenile Facilities  
PREA Employee Training Curriculum-*The Moss Group, Inc.*  
Quick Series PREA Pocket Guides  
Staff Confirmation of Receipt of PREA Training  
Statement of Fact - All employees have received PREA training.

### **Interviews**

Staff

### **Conclusion:**

Louisiana Youth Services Office of Juvenile Justice (OJJ) requires all employees who have contact with residents receive training on the eleven required PREA training topics. Training is tailored to the gender and attributes of the residents in the facility. PREA training is required yearly for all Swanson Center for Youth Staff. Quick Series PREA pocket guides are provided to staff for a quick reference of the PREA standards. Training is documented with the Staff Confirmation of Receipt of PREA Training.

A statement of fact provided by the Facility Director and interviews with staff confirmed all employees have received PREA training.

### **Standard 115.332 Volunteer and contractor 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

The following was considered in determining compliance with the standard:

### **Policy and Procedures**

C.2.11 Prison Rape Elimination Act (PREA), Section VIII. J, Pages 10-11  
B.2.20 Non-Discriminatory Services to LGBTIQ and Nonconforming Youth  
A.2.24 Staff Development and Training Plan

### **Supporting Documentation**

Swanson Center for Youth PREA Audit: Pre-Audit Questionnaire – Juvenile Facilities  
PREA Employee Training Curriculum-*The Moss Group, Inc.*  
Contract Provider/Volunteer Confirmation of Receipt of PREA Training  
Statement of Fact - All contractor and volunteers have received PREA training.

### **Interview**

Volunteer who has Contact with Residents

**Conclusion:**

Louisiana Youth Services Office of Juvenile Justice (OJJ) requires volunteers and contractors who have contact with youth shall be trained on their responsibilities under the Agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures.

The level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with youth, but all volunteers and contractors who have contact with youth shall be notified of the Agency's zero-tolerance policy regarding abuse and sexual harassment and informed how to report such incidents.

Training is documented with the Contract Provider/Volunteer Confirmation of Receipt of PREA Training.

An interview with a volunteer confirmed she received the required PREA training. Additionally, the Facility Director provided a statement of fact affirming all volunteers and contractors have received PREA training.

**Standard 115.333 Resident education**

- 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

The following was considered in determining compliance with the standard:

**Policy and Procedures**

C.2.11 Prison Rape Elimination Act (PREA), Section IX. A, Pages 11-12  
B.2.3 Secure Care Intake  
B.8.12 Secure Care Youth Orientation

**Supporting Documentation**

Swanson Center for Youth PREA Audit: Pre-Audit Questionnaire – Juvenile Facilities  
Memorandum of Understanding for Interpreter Services  
Memorandum of Understanding with Grace and Glory, Inc. (Speech and Hearing Impaired)  
Contract with Visual Communication Service, LLC (Interpreter Services for Hearing Impaired)  
Youth Confirmation of Receipt of PREA Education  
Youth PREA Education Curriculum - PowerPoint  
Youth PREA Orientation Video  
Youth Parent/Handbook -PREA  
Youth Safety Guide - English  
Youth Safety Guide - Spanish  
Poster – Break the Silence

**Interviews**

Intake Staff

Residents

**Conclusion:**

Upon admission, youth receive information explaining, in an age appropriate fashion, the agency’s zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment. Within two (2) days, but no more than ten (10) days, required PREA education is provided and explained to the residents. Appropriate provisions are made as necessary for residents who are limited English proficient, deaf, visually impaired or otherwise disabled, as well as youths who have limited reading skills. Youth sign the Youth Confirmation of Receipt of PREA Education. Throughout their time at the facility, key PREA information is readily accessible through posters, Youth Safety Guides and resident handbooks.

Interviews with youth and intake staff confirmed required PREA orientation is provided upon admission and additional training occurs within ten (10) days of admission. Additionally, the Facility Director provided a statement of fact affirming all juveniles have received PREA training.

**Standard 115.334 Specialized training: 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

The following was considered in determining compliance with the standard:

**Policy and Procedures**

C.2.11 Prison Rape Elimination Act (PREA), Section VIII. I, Page 10

A.1.4 Investigative Services

SC-01-0-21 Investigations

**Supporting Documentation**

Swanson Center for Youth PREA Audit: Pre-Audit Questionnaire – Juvenile Facilities

Training Records

NIC Training Certificates - PREA: Investigating Sexual Abuse in a Confinement Setting

NIC Training Certificates-Communicating Effectively and Professionally with LGBTI Offenders

Statement of Fact - All Investigative staff have received PREA training.

**Interviews**

Investigative Staff

**Conclusion:**

Investigators receive the required specialized training topics for investigative staff, as well as the eleven (11) topics listed in standard 115.331. Training participation is documented in TREC. Training certificates and logs were provided to the auditor.



An interview with the lead investigator confirmed he has received required PREA training. Additionally, the Facility Director provided a statement of fact affirming all investigators have received required PREA training.

**Standard 115.335 Specialized training: Medical and mental health care**

- 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

The following was considered in determining compliance with the standard:

**Policy and Procedures**

- C.2.11 Prison Rape Elimination Act (PREA), Section VIII. J, Pages 10-11
- B.2.20 Non-Discriminatory Services to LGBTIQ and Nonconforming Youth
- A.2.24 Staff Development and Training Plan

**Supporting Documentation**

- Swanson Center for Youth PREA Audit: Pre-Audit Questionnaire – Juvenile Facilities
- PREA Employee Training Curriculum-*The Moss Group, Inc.*
- Staff Confirmation of Receipt of PREA Training
- Correct Care Solution (CCS) Certificates - PREA
- NIC Certificates - Medical Health Care for Sexual Assault Victims in a Confinement Setting
- NIC Certificates - Behavioral Health Care for Sexual Assault Victims in a Confinement Setting
- Statement of Fact - All medical and mental health personnel have received PREA training.

**Interviews**

Medical and Mental Health Staff

**Conclusion:**

Training for medical and mental health staff includes the topics in standard 115.331 as well as the four specialized topics listed in the standard. Medical staff do not conduct forensic examinations. Training is documented with the Staff Confirmation of Receipt of PREA Training. Training certificates and documents were provided to the auditor.

Interviews with Medical and Mental Health staff confirmed they have received the required PREA training. Additionally, the Facility Director provided a statement of fact affirming all medical and mental health personnel have received required PREA training.

**Standard 115.341 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

The following was considered in determining compliance with the standard:

### **Policy and Procedures**

C.2.11 Prison Rape Elimination Act (PREA), Section X. A-C, Pages 12-13

B.2.2 Youth Classification System and Treatment Procedures

B.2.3 Secure Care Intake

B.2.16 Secure Care Intake / Assessment of Youth who Demonstrate Sexual Behavior Problems

B.2.20 Non-Discriminatory Services to LGBTIQ and Nonconforming Youth

B.3.1 Secure Care Youth Records; Composition and Maintenance

B.3.2 Access to and Release of Active and Inactive Youth Records

CA-MC-03-05 Health Record and Case Record Interface

PS-01-001 Youth Classification

PS-01-002 Admission Procedures

### **Supporting Documentation**

Swanson Center for Youth PREA Audit: Pre-Audit Questionnaire – Juvenile Facilities

Intake Screening and Housing Assessment

Initial Mental Health Evaluation

### **Interviews**

PREA Coordinator

PREA Compliance Manager

Staff Responsible for Risk Screening

Residents

### **Conclusion:**

Louisiana Youth Services Office of Juvenile Justice (OJJ) policy states that within 72 hours of a youth's arrival at the facility and periodically throughout a youth's confinement, OJJ shall obtain and use information about each youth's personal history and behavior to reduce the risk of sexual abuse by or upon a youth.

Swanson Center for Youth uses an objective screening instrument, the Intake Screening and Housing Assessment, to ascertain the information required by the standard. Access to this sensitive information is controlled in order to ensure it is not exploited to the youth's detriment by staff or other youths.

If screening indicates a youth has a history of being sexually victimized or perpetrating sexual abuse a PREA alert is placed in the Juvenile Electronic Tracking System (JETS) to ensure proper placement, monitoring and services are provided as needed.

Interviews with the PREA Coordinator, PREA Compliance Manager and Staff Responsible for Intake Screening revealed sensitive information ascertained from intake screening is made available only on a need to know basis to ensure proper placement, monitoring and services are provided as needed.

Interviews with youth confirmed they were screened for sexual abuse victimization and sexual abusiveness toward other youth upon admission to the facility.

**Standard 115.342 Use of screening information**

- 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

The following was considered in determining compliance with the standard:

**Policy and Procedures**

- C.2.11 Prison Rape Elimination Act (PREA), Section X. D, Pages 13-14
- B.2.2 Youth Classification System and Treatment Procedures
- B.2.3 Secure Care Intake
- B.2.20 Non-Discriminatory Services to LGBTIQ and Nonconforming Youth

**Supporting Documentation**

- Swanson Center for Youth PREA Audit: Pre-Audit Questionnaire – Juvenile Facilities
- Intake Screening and Housing Assessment
- Initial Mental Health Evaluation

**Interviews**

- PREA Coordinator
- PREA Compliance Manager
- Superintendent
- Staff Responsible for Screening
- Transgender Resident

**Conclusion:**

Information obtained from the Intake Screening and Housing Assessment form is used to determine appropriate housing, bed, program, education, and work assignments for youth with the goal of keeping all youth safe and free from sexual abuse. Swanson Center for Youth uses protective custody to keep youth safe and only uses isolation as a last resort. There are no special housing assignments for LGBTIQ youth. Facility assignment for a transgender or intersex resident are made on a case-by case basis with the goal of providing a safe and secure environment. Reassessment would occur at least twice a year to review any threats to safety experienced by the youth. A transgender or intersex youth’s views with respect to his or her own safety would be given serious consideration. All youth shower individually.

The PREA Compliance Manager confirmed the facility uses screening information to keep residents safe and free from sexual abuse through housing and bed assignments.

The Staff Responsible for Screening also confirmed the facility uses the screening information to keep youth safe and free from sexual abuse through housing and bed assignments.

The Facility Director confirmed the facility would use isolation only as a last resort.

The PREA Coordinator and PREA Compliance Manager confirmed there are no special housing assignments for LGBTI.

The PREA Compliance Manager and Staff Responsible for Risk Screening confirmed housing and program assignments for transgender or intersex youth would be made on a case-by case basis with the goal of providing a safe and secure environment. A youth's own views with respect to his or her own safety would be given serious consideration. Lastly, the interviews confirmed showers are all conducted individually, providing privacy for all youth.

One youth identified as transgender during the interview process. The youth expressed feeling safe and confirmed no special housing assignment was made.

### **Standard 115.351 Resident 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

The following was considered in determining compliance with the standard:

#### **Policy and Procedures**

C.2.11 Prison Rape Elimination Act (PREA), Section XI. A, Pages 14-15

A.1.4 Investigative Services

A.2.1 Employee Manual

B.5.1 Youth Code of Conduct-Secure Care

JO-03-001 Behavior Intervention Unit

SC-01-021 Investigations

#### **Supporting Documentation**

Swanson Center for Youth PREA Audit: Pre-Audit Questionnaire – Juvenile Facilities

Memorandum of Understanding with Wellspring Alliance for Families

Youth Confirmation of Receipt of PREA Education

Administrative Remedy Procedure (ARP) Form

Sexual Assault Response Team (SART) Meeting Minutes

Unusual Occurrence Reports (UOR)

Poster - Reporting Resources

Poster - Break the Silence

Youth/Parent Handbook - PREA

PREA Audit Report

## Interviews

PREA Compliance Manager  
Staff  
Residents

## Conclusion:

The Louisiana Youth Services Office of Juvenile Justice (OJJ) provides multiple ways to privately report sexual abuse and sexual harassment, retaliation for reporting, and staff neglect of responsibilities that may have contributed to sexual abuse and sexual harassment. Internal reports can be made by reporting verbally to staff, filing a formal written grievance by way of the Administrative Remedy Procedure (ARP) Form, calling the OJJ Investigative Services hotline at 1-800-626-1430 or \*999# from the direct connect phones.

Youth may report to an outside entity by calling the Louisiana Foundation Against Sexual Assault (LaFASA) at 1-888-996-7273. Youth may remain anonymous upon request.

All staff are mandatory reporters and are required to accept verbal, written, anonymous and third party reports. Verbal reports are documented immediately. Youth are provided with ARP forms located throughout the facility. Pens or pencils are available upon request. Staff are permitted to privately report sexual abuse and sexual harassment of residents by calling the OJJ Investigative Services hotline. No youth have been detained solely for civil immigration purposes.

Youth were knowledgeable about the different ways to report. When asked about reporting to someone who does not work at the facility they referred to the Reporting Resources posters that are located above the direct connect phones. Many youth were able to name LaFASA as an outside source for reporting.

Staff were knowledgeable about the different ways to report and their obligation as mandatory reporters. Staff reported they would document verbal reports immediately. Staff named the OJJ Investigative Services hotline as an avenue to privately report sexual abuse and sexual harassment of youth.

The PREA Compliance Manager confirmed the residents may report sexual abuse and sexual harassment to an outside entity by calling the LaFASA hotline. She confirmed youth may remain anonymous upon request and ARP forms and writing instruments are provided.

## Standard 115.352 Exhaustion of administrative remedies

- 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

The following was considered in determining compliance with the standard:

## **Policy and Procedures**

C.2.11 Prison Rape Elimination Act (PREA), Section XI. B, Pages 15-16

A.1.4 Investigative Services

B.5.1 Youth Code of Conduct - Secure Care

B.5.3 Administrative Remedy Procedure

B.8.1 Telephone Usage by Youth and Monitoring of Calls

C.1.4 Attorney Visits

C.2.8 Youth Visitation in Secure Facilities

JO-08-004 Access to Courts and Counsel

SC-01-021 Investigations

PS-01-005 Youth Handbook

## **Supporting Documentation**

Swanson Center for Youth PREA Audit: Pre-Audit Questionnaire – Juvenile Facilities

Youth/Parent Handbook - PREA

Administrative Remedy Procedure (ARP) Form

Youth Confirmation of Receipt of PREA Education

Poster - Reporting Resources

Youth Safety Guide - English

Youth Safety Guide - Spanish

## **Interviews**

Residents who Reported a Sexual Abuse - None

## **Conclusion:**

Louisiana Youth Services Office of Juvenile Justice (OJJ) policy for the Administrative Remedy Procedure (ARP) does not contain a timeline on when a youth may submit a grievance regarding an allegation of sexual abuse. Youth are not required to use an informal grievance process. A youth who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint. A final decision on the merits of any portion of a grievance shall be issued within 90 days of the initial filing of the grievance. Third parties, including fellow youth, staff members, family members, attorneys and outside advocates may assist youth in filing requests for administrative remedies of sexual abuse. Parents or legal guardians of a youth may file a grievance without the youth agreeing to have the grievance filed on his behalf.

Emergency grievances alleging a youth is subject to a substantial risk of imminent sexual abuse shall be immediately forwarded to the Regional Director for immediate corrective action. An initial response is made within 48 hours and a final response within five (5) calendar days. OJJ's initial response and final decision shall document the finding as to whether the youth is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance.

Youth who file a grievance in bad faith may be disciplined for doing so. Within the past 12 months no youth have filed a grievance in bad faith.

## **Standard 115.353 Resident access to outside confidential support 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

The following was considered in determining compliance with the standard:

**Policy and Procedures**

- C.2.11 Prison Rape Elimination Act (PREA), Section XI. C, Pages 16-17
- A.1.4 Investigative Services
- B.5.1 Youth Code of Conduct - Secure Care
- B.8.1 Telephone Usage by Youth and Monitoring of Calls
- C.1.4 Attorney Visits
- C.2.8 Youth Visitation in Secure Facilities
- JO-08-004 Access to Courts and Counsel
- SC-01-021 Investigations
- PS-01-005 Youth Handbook

**Supporting Documentation**

- Swanson Center for Youth PREA Audit: Pre-Audit Questionnaire – Juvenile Facilities
- Memorandum of Understanding with Wellspring Alliance for Families
- Youth Confirmation of Receipt of PREA Education
- Youth/Parent Handbook - PREA
- Poster - Reporting Resources
- Youth Safety Guide - English
- Youth Safety Guide - Spanish

**Interviews**

- Superintendent
- PREA Compliance Manager
- Residents
- Residents who Reported a Sexual Abuse - None

**Conclusion:**

Swanson Center for Youth provides victim advocates from the Wellspring Alliance for Families. Contact information is posted in the facility. Residents are given the opportunity to communicate confidentially and are informed of mandatory reporting laws. Also, residents are provided with confidential access to attorneys or other legal representation.

Residents interviews confirmed they were aware of outside support services, but they didn’t know exactly what services would be provided. Most mentioned they would receive counseling or therapy. Residents confirmed contact information was provided on posters and phone calls would be free of charge. All residents interviewed stated that they would be able to call when they needed to. The stated they believed conversations would remain private, but they were aware of mandatory reporting duties. The residents stated they would be able to contact a lawyer and parents or legal guardians when needed.

**Standard 115.354 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

The following was considered in determining compliance with the standard:

**Policy and Procedures**

C.2.11 Prison Rape Elimination Act (PREA), Section XI. D, Page 17

**Supporting Documentation**

- Swanson Center for Youth PREA Audit: Pre-Audit Questionnaire – Juvenile Facilities
- Office of Juvenile Justice (OJJ) Website – Investigative Services Hotline Number
- Youth Confirmation of Receipt of PREA Education
- Administrative Remedy Procedure (ARP) Form
- Youth/Parent Handbook - PREA
- Poster - Reporting Resources
- Poster – Break the Silence
- Youth Safety Guide - English
- Youth Safety Guide - Spanish

**Conclusion:**

The Louisiana Youth Services Office of Juvenile Justice (OJJ) provides a hotline number (1-800-626-1430) for reporting sexual abuse or sexual harassment. OJJ has a link to the hotline number on its website. Residents, staff and any person who wishes to make a report can call the hotline.

**Standard 115.361 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

The following was considered in determining compliance with the standard:

**Policy and Procedures**

C.2.11 Prison Rape Elimination Act (PREA), Section XII. A, Page 18

A.1.4 Investigative Services



C.4.3 Mandatory Reporting of Abuse and Neglect of Youth  
C.2.8 Youth Visitation in Secure Facilities  
CA-MC-04-02 Child Abuse Reporting and Investigations  
SC-01-021 Investigations  
PS-01-005 Youth Handbook

### **Supporting Documentation**

Swanson Center for Youth PREA Audit: Pre-Audit Questionnaire – Juvenile Facilities  
Office of Juvenile Justice (OJJ) Website – Investigative Services Hotline Number  
Staff Confirmation of Receipt of PREA Education  
Sexual Assault Response Team (SART) Meeting Minutes  
PREA Steering Committee Meeting Minutes  
Unusual Occurrence Reports (UOR)  
Poster - Reporting Resources

### **Interviews**

Superintendent  
PREA Compliance Manager  
Medical and Mental Health Staff  
Staff  
Residents

### **Conclusion:**

Louisiana Youth Services Office of Juvenile Justice (OJJ) policy require staff to immediately report sexual abuse, sexual harassment, retaliation, or staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. Staff receiving such reports shall immediately contact their direct supervisor. Staff may also call the Investigative Services hotline by calling 1-800-626-1430.

All staff, including medical and mental health practitioners, are mandatory reporters. Interviews confirmed mandatory reporting responsibilities. Medical and mental health practitioners are required to inform residents at the initiation of services of their duty to report and limitations of confidentiality. All staff follow shared information guidelines to share information only with those who need to know.

Upon receiving any allegation of sexual abuse or sexual harassment, including third-party and anonymous reports, the Facility Director promptly reports the allegation to the appropriate Regional Director and the Director of Investigative Services. The Regional director also notifies the Assistant Secretary, Chief of Operations and the Deputy Secretary. The Facility Director also notifies the alleged victim's parents or legal guardians. If the alleged victim is under guardianship of the child welfare system, the report shall be made to the alleged victim's case worker. The Facility Director shall also report the allegation to the appropriate juvenile judge, the youth's attorney, or other legal representative of record within 14 days of receiving the allegation.

### **Standard 115.362 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)

### **Auditor discussion, including the evidence relied upon in making the compliance or non-compliance**

**determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

The following was considered in determining compliance with the standard:

**Policy and Procedures**

C.2.11 Prison Rape Elimination Act (PREA), Section XII. B, Page 18

**Supporting Documentation**

Swanson Center for Youth PREA Audit: Pre-Audit Questionnaire – Juvenile Facilities

**Interviews**

Agency Head (Designee)

Superintendent

Staff

**Conclusion:**

Louisiana Youth Services Office of Juvenile Justice (OJJ) policy states immediate action shall be taken to protect a youth when the Agency learns that a youth is subject to a substantial risk of imminent sexual abuse. Interviews confirmed immediate action would be taken to protect a youth at risk of imminent sexual abuse.

Within the past 12 months there were no reports of a youth being subject to a substantial risk of imminent sexual abuse.

**Standard 115.363 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

The following was considered in determining compliance with the standard:

**Policy and Procedures**

C.2.11 Prison Rape Elimination Act (PREA), Section XII C, Page 19

SC-01-021 Investigations

**Supporting Documentation**

Swanson Center for Youth PREA Audit: Pre-Audit Questionnaire – Juvenile Facilities

Investigative Services Formal Report

**Interviews**

Agency Head (Designee)

PREA Audit Report

Superintendent

**Conclusion:**

Louisiana Youth Services Office of Juvenile Justice (OJJ) policy requires that upon receiving an allegation that a youth was sexually abused while confined at another facility, the facility director shall notify the facility director where the abuse occurred within 72 hours and document the notification. Investigative Services is also notified.

Within the past 12 months the facility did not receive an allegation that a youth was sexually abused while at another confinement facility. However, the facility did receive an allegation of sexual abuse from a previous resident alleging sexual abuse that occurred between May of 1999 and March of 2000, when Swanson Center for Youth was known as the Louisiana Training Institute. Investigative services determined the allegation to be unsubstantiated.

**Standard 115.364 Staff first responder 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

The following was considered in determining compliance with the standard:

**Policy and Procedures**

C.2.11 Prison Rape Elimination Act (PREA), Section XII C, Page 19  
C.4.6 Securing Physical Evidence/ Crime Scene  
SC-01-021 Investigations

**Supporting Documentation**

Swanson Center for Youth PREA Audit: Pre-Audit Questionnaire – Juvenile Facilities  
Card - First Responder Steps  
Investigative Services Formal Report

**Interviews**

Staff First Responder  
Staff

**Conclusion:**

Louisiana Youth Services Office of Juvenile Justice (OJJ) policy states the guidelines first responders are required to follow upon learning of an allegation that a resident was sexually abused. Interviews confirmed staff are knowledgeable of first responder duties.

**Standard 115.365 Coordinated response**

- 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

The following was considered in determining compliance with the standard:

**Policy and Procedures**

C.2.11 Prison Rape Elimination Act (PREA), Section XII. E, Page 19

**Supporting Documentation**

Swanson Center for Youth PREA Audit: Pre-Audit Questionnaire – Juvenile Facilities  
Swanson Center for Youth Sexual Abuse Protocol

**Interview**

Superintendent

**Conclusion:**

The Swanson Center for Youth Sexual Abuse Protocol coordinates actions taken in response to an incident of sexual abuse among first responders, medical and mental health staff, investigators and facility leadership. The superintendent confirmed the facility has a written plan to coordinate staff actions in response to an incident of sexual abuse.

**Standard 115.366 Preservation of ability to protect residents from contact with 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

The following was considered in determining compliance with the standard:

**Policy and Procedures**

C.2.11 Prison Rape Elimination Act (PREA), Section XII. F, Page 19-20

**Supporting Documentation**

Swanson Center for Youth PREA Audit: Pre-Audit Questionnaire – Juvenile Facilities

## Interview

Agency Head (Designee)

### Conclusion:

The Louisiana Youth Services Office of Juvenile Justice (OJJ) does not have a union or collective bargaining agreements. The Agency head confirmed OJJ does not have a union or collective bargaining agreements. This standard is not applicable.

### Standard 115.367 Agency protection against retaliation

- 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

The following was considered in determining compliance with the standard:

### Policy and Procedures

C.2.11 Prison Rape Elimination Act (PREA), Section XII. G, Page 20

A.1.4 Investigative Services

B.2.2 Youth Classification System and Treatment Procedures

SC-01-021 Investigations

### Supporting Documentation

Swanson Center for Youth PREA Audit: Pre-Audit Questionnaire – Juvenile Facilities

### Interviews

Agency Head (Designee)

Superintendent

Staff Member Charged with Monitoring Retaliation

### Conclusion:

The Louisiana Youth Services Office of Juvenile Justice (OJJ) policy protects against retaliation. Investigative Services will monitor for retaliation of residents and staff members for at least 90 days and continue monitoring until there is no indication of the continuing need to do so.

Within the past 12 months there have been no incidents of retaliation.

### Standard 115.368 Post-allegation protective custody

- 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

The following was considered in determining compliance with the standard:

**Policy and Procedures**

C.2.11 Prison Rape Elimination Act (PREA), Section XII. H, Page 20  
JO-03-001 Behavior Intervention Unit

**Supporting Documentation**

Swanson Center for Youth PREA Audit: Pre-Audit Questionnaire – Juvenile Facilities  
Cypress Daily Tracking Logs  
Log Book Entries

**Interviews**

Superintendent  
PREA Compliance Manager  
Medical and Mental Health Staff

**Conclusion:**

Swanson Center for Youth uses the less restrictive measure of protective custody rather than isolation. The protective custody unit, Cypress B, provides a safe and secure environment for youth while an investigation is in process.

**Standard 115.371 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

The following was considered in determining compliance with the standard:

**Policy and Procedures**

C.2.11 Prison Rape Elimination Act (PREA), Section XIII. A, Page 21  
A.1.4 Investigative Services  
SC-01-021 Investigations

**Supporting Documentation**

Swanson Center for Youth PREA Audit: Pre-Audit Questionnaire – Juvenile Facilities  
PREA Audit Report

NIC Training Certificates - PREA: Investigating Sexual Abuse in a Confinement Setting  
Memorandum of Understanding with Monroe Police Department  
Investigative Services Formal Report  
PREA Investigations Report  
Formal Investigation Form

### **Interviews**

Superintendent  
PREA Coordinator  
PREA Compliance Manager  
Investigative Staff

### **Conclusion:**

The Louisiana Youth Services Office of Juvenile Justice (OJJ) Investigative Services conducts administrative and criminal investigations of all allegations of sexual abuse and sexual harassment. This includes investigations of anonymous and third party reports. On-site investigators have received required PREA training. Swanson Center for Youth has six commissioned officers who are certified to conduct criminal investigations.

Investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any electronic monitoring data; interview alleged victims, suspected perpetrators, and witnesses; and shall review prior complaints and reports of sexual abuse involving a suspected perpetrator. Investigations are not terminated solely because the source of an allegation recants the allegation.

The Director of Investigative Services confirmed OJJ does not require a youth who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding with an investigation.

Administrative investigations are documented with the Formal Investigation Form. The investigations include whether staff actions or failures to act contributed to abuse, testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings.

Criminal investigations are documented with the Formal Investigation Form. When the quality of evidence supports criminal prosecution, cases are referred to the Monroe Police Department. Swanson Center for Youth maintains a Memorandum of Understanding with the Monroe Police Department.

OJJ retains all written reports for as long as the alleged abuser is incarcerated or employed by the agency, plus five years, unless the abuse was committed by a youth applicable state law requires a shorter period of retention.

The departure of an alleged abuser or victim from the employment or control of Swanson Center for Youth or OJJ shall not provide a basis for terminating an investigation.

When allegations are referred to the Monroe Police Department for prosecution, the facility shall cooperate with outside investigators and shall remain informed of the progress of the investigation.

The Pre-Audit Questionnaire indicated two (2) substantiated allegations were referred for criminal prosecution since August 20, 2012.

No allegations were referred for criminal prosecution within the past 12 months.

### **Standard 115.372 Evidentiary standard 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

The following was considered in determining compliance with the standard:

**Policy and Procedures**

C.2.11 Prison Rape Elimination Act (PREA), Section XIII. B, Page 22  
 A.1.4 Investigative Services  
 SC-01-021 Investigations

**Supporting Documentation**

Swanson Center for Youth PREA Audit: Pre-Audit Questionnaire – Juvenile Facilities

**Interviews**

Investigative Staff

**Conclusion:**

Louisiana Youth Services Office of Juvenile Justice (OJJ) policy states Investigative Services shall not use a standard higher than the preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. An interview with an investigator confirmed this practice.

**Standard 115.373 Reporting to residents**

- 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

The following was considered in determining compliance with the standard:

**Policy and Procedures**

C.2.11 Prison Rape Elimination Act (PREA), Section XIII. C, Page 22  
 A.1.4 Investigative Services  
 SC-01-021 Investigations

**Supporting Documentation**

PREA Audit Report



**Interviews**

Superintendent  
Investigative Staff

**Conclusion:**

Louisiana Youth Services Office of Juvenile Justice (OJJ) policy is inclusive of all aspects of the standard. Investigative services completes a Youth Investigation Outcome Notification following an investigation into a youth’s allegation of sexual abuse. A copy is maintained in the Investigative Case File. Additionally the Program Manager receives a copy and the youth’s counselor receives a copy. The counselor discusses the outcome with the youth before filing it in the youth’s file.

**Standard 115.376 Disciplinary sanctions for staff**

- 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

The following was considered in determining compliance with the standard:

**Policy and Procedures**

C.2.11 Prison Rape Elimination Act (PREA), Section XIV. A, Page 23  
A.1.4 Investigative Services  
A.2.1 Employee Manual  
SC-01-021 Investigations

**Supporting Documentation**

Swanson Center for Youth PREA Audit: Pre-Audit Questionnaire – Juvenile Facilities

**Conclusion:**

Louisiana Youth Services Office of Juvenile Justice (OJJ) policy includes staff sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies.

There have been no staff terminations for sexual abuse or sexual harassment within the past 12 months.

**Standard 115.377 Corrective action for contractors and volunteers**

- 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

The following was considered in determining compliance with the standard:

### **Policy and Procedures**

C.2.11 Prison Rape Elimination Act (PREA), Section XIV. B, Page 23  
AM-07-001 Volunteer Services

### **Supporting Documentation**

Swanson Center for Youth PREA Audit: Pre-Audit Questionnaire – Juvenile Facilities  
Contract Provider/Volunteer Confirmation of Receipt of PREA Training

### **Interviews**

Superintendent

### **Conclusion:**

Louisiana Youth Services Office of Juvenile Justice (OJJ) policy prohibits volunteers or contractors from further contact with residents if they have engaged in sexual abuse. Criminal activity would be referred to law enforcement agencies and relevant licensing bodies.

There have been no volunteers or contractors reported for sexual abuse or sexual harassment within the past 12 months.

### **Standard 115.378 Disciplinary sanctions for residents**

- 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

The following was considered in determining compliance with the standard:

### **Policy and Procedures**

C.2.11 Prison Rape Elimination Act (PREA), Section XIV. C, Pages 23-24  
B.2.16 Secure Care Intake & Assessment of Youth who Demonstrate Sexual Behavior Problems  
B.5.1 Youth Code of Conduct - Secure Care  
JO-03-004 Code of Conduct Procedures

### **Supporting Documentation**

**Interviews**

Superintendent

Medical and Mental Health Care Staff

**Conclusion:**

Louisiana Youth Services Office of Juvenile Justice (OJJ) policy states a youth maybe subject to disciplinary sanctions only pursuant to a formal disciplinary process following an administrative finding that youth engaged in youth-on-youth sexual abuse, or following a criminal finding of guilt for youth-on-youth sexual abuse. If a disciplinary sanction results in the placement of a youth in the Behavior Intervention (BI) Unit, the youth shall not be denied access to daily large-muscle exercise, required educational programming, and special education services. The youth are to receive daily visits from a medical or mental health care clinician.

Within the past 12 months no youth were placed in the BI Unit as a disciplinary sanction for resident-on-resident sexual abuse. Additionally, OJJ prohibits disciplinary action for a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred, even if an investigation does not establish evidence sufficient to substantiate the allegation.

**Standard 115.381 Medical and mental health screenings; history of 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

The following was considered in determining compliance with the standard:

**Policy and Procedures**

C.2.11 Prison Rape Elimination Act (PREA), Section XV. A, Page 24

**Supporting Documentation**

Swanson Center for Youth PREA Audit: Pre-Audit Questionnaire – Juvenile Facilities  
Sexual Assault Awareness for Offenders

**Interviews**

Staff Responsible for Risk Screening

Medical and Mental Health Staff

Residents who Disclose Sexual Victimization at Risk Screening

**Conclusion:**

Louisiana Youth Services Office of Juvenile Justice (OJJ) policy states if screening indicates a youth has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff ensure that the youth is offered a follow-up meeting with a medical or mental health practitioner within 14 days of

the direct admission screening. A follow-up meeting with a mental health practitioner is offered within the same time period for youth who have previously perpetrated sexual abuse. Medical and mental health care practitioners shall obtain informed consent from youth before reporting information about prior victimization that did not occur in an institutional setting, unless the youth is under the age of 18.

One youth disclosed prior sexual victimization during the interview process. He confirmed being offered a follow-up meeting a medical or mental health practitioner, but stated he refused.

Within the past 12 months no youth disclosed previously perpetrating sexual abuse.

**Standard 115.382 Access to emergency medical and mental health 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

The following was considered in determining compliance with the standard:

**Policy and Procedures**

C.2.11 Prison Rape Elimination Act (PREA), Section XV. B, Pages 24-25

**Supporting Documentation**

Swanson Center for Youth PREA Audit: Pre-Audit Questionnaire – Juvenile Facilities  
Memorandum of Understanding with Ouachita Parish Coroner’s Office  
St. Francis Medical Center Forensic Sexual Assault Evaluation Form  
Emergency Department Discharge Notes  
Nursing Progress Notes  
Mental Health Progress Notes  
Laboratory Results

**Interviews**

Medical and Mental Health Staff

**Conclusion:**

Louisiana Youth Services Office of Juvenile Justice (OJJ) policy states youth who are victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services. Swanson Center for Youth provides victims access to emergency medical treatment and crisis intervention services through agreements with the Ouachita Parish Coroner’s Office and Wellspring Alliance for Families.

Medical and Mental Health Staff confirmed victims are offered access to emergency medical treatment and crisis intervention services as soon as possible. Information and access to sexually transmitted infections prophylaxis is offered as well.

Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

**Standard 115.383 Ongoing medical and mental health care for sexual abuse victims and 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

The following was considered in determining compliance with the standard:

**Policy and Procedures**

C.2.11 Prison Rape Elimination Act (PREA), Section XV. C, Page 25

**Supporting Documentation**

Swanson Center for Youth PREA Audit: Pre-Audit Questionnaire – Juvenile Facilities  
Nursing Progress Notes  
Mental Health Progress Notes  
Laboratory Results

**Interviews**

Medical and Mental Health Staff

**Conclusion:**

Swanson Center for Youth offers medical and mental health evaluations and, as appropriate treatment to all youth who have been victimized by sexual abuse. Youth victims of sexual abuse, while at the facility, are offered tests for sexually transmitted infections as medically appropriate. The facility attempts to conduct a mental health evaluation of all known youth-on-youth abusers within 60 days of learning of such history and offers treatment when deemed appropriate. All treatment services are offered at no cost to the victim.

**Standard 115.386 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

## Policy and Procedures

C.2.11 Prison Rape Elimination Act (PREA), Section XVI. B, Page 26

### Supporting Documentation

Swanson Center for Youth PREA Audit: Pre-Audit Questionnaire – Juvenile Facilities  
Investigative Services Formal Report  
Sexual Assault Response Team (SART) Meeting Minutes  
PREA Meeting Minutes

### Interviews

Superintendent  
PREA Compliance Manager  
Incident Review Team

### Conclusion:

Louisiana Youth Services Office of Juvenile Justice (OJJ) policy states the facility shall conduct sexual abuse incident reviews at the conclusion of every sexual abuse investigation, unless the allegation has been determined to be unfounded. The incident review team considers all the requirements listed in standard 115.386.

Incident reviews are conducted by the Sexual Assault Response Team (SART). The SART team includes the PREA Compliance Manager, investigators, medical and includes of mental health practitioners, counselors and supervisors. The team prepares a report of its findings, including recommendations for improvement, and submits it to the facility director, PREA Compliance Manager and PREA Coordinator.

The PREA Steering Committee meets quarterly to review incidents and is dedicated to advancing OJJ PREA efforts. The committee continually assesses and improves training, security measures, victim health services, physical plant issues, and community and family involvement. Members of the team include the Deputy Secretary, Chief of Operations, Agency PREA Coordinator, Director of Health Services, Director of Treatment, Director of Investigative Services, Director of Education, General Counsel, Director of Staff Development, Regional Director, and Family Services Director.

The Swanson Center for Youth Pre-Audit Questionnaire indicated there were seven (7) administrative investigations of alleged sexual abuse completed at the facility within the past 12 months.

### Standard 115.387 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

The following was considered in determining compliance with the standard:

## Policy and Procedures

C.2.11 Prison Rape Elimination Act (PREA), Section XVI. C, Pages 26-27

## Supporting Documentation

Swanson Center for Youth PREA Audit: Pre-Audit Questionnaire – Juvenile Facilities  
PREA 2015 Annual Report  
Formal Investigation Form

## Conclusion:

Louisiana Youth Services Office of Juvenile Justice (OJJ) collects accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using the SSV-IJ Survey of Sexual Victimization, Incident Form (Juvenile) as their standardized instrument and set of definitions. The SSV-IJ Survey of Sexual Victimization, Incident Form (Juvenile) includes all data necessary to answer all questions on the DOJ Form SSV-5 Survey of Sexual Victimization, State Juvenile Systems Summary Form.

Upon request, all such data from the previous calendar year shall be provided to the U.S. Department of Justice no later than September 15<sup>th</sup> of each year on DOJ Form SSV-5 Survey of Sexual Victimization, State Juvenile Systems Summary Form. OJJ completed the SSV-5 Survey of Sexual Victimization, State Juvenile Systems Summary for 2014 and is currently working toward providing 2015 data to the DOJ by September 15, 2016.

## Standard 115.388 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

The following was considered in determining compliance with the standard:

## Policy and Procedures

C.2.11 Prison Rape Elimination Act (PREA), Section XVI. C, Pages 27-28

## Supporting Documentation

Swanson Center for Youth PREA Audit: Pre-Audit Questionnaire – Juvenile Facilities  
PREA 2015 Annual Report

## Interviews

Agency Head (Designee)  
PREA Coordinator  
PREA Compliance Manager

## Conclusion:

Louisiana Youth Services Office of Juvenile Justice (OJJ) published the PREA 2015 Annual Report on the OJJ website at: <http://www.ojj.la.gov/ojj/files/file/Demographics/PREA%202015%20Annual%20Report.pdf>

A comparison was made between 2015 and 2014 for secure facilities. 2015 showed a decrease in PREA related incidents in secure facilities. Some of the steps OJJ identified during 2015 to enhance prevention and detection of sexual abuse incidents includes:

- Providing comprehensive PREA training to all OJJ staff to improve understanding of PREA
- Providing cross gender and transgender pat search training
- Updating the Youth Safety Guide, printed and distributed in English and Spanish to aid in improving youth understanding of PREA during the intake process
- Creating First Responder cards
- Developing an Intake Screening Assessment tool
- Partnering with the Louisiana Foundation Against Sexual Assault (LaFASA) to allow youth to report incidents of sexual abuse to a private entity
- Providing Quick Series PREA pocket guides for a quick reference of the PREA standards for staff
- Improving the 72 hour and periodic screenings process to enhance housing decisions
- Ensuring all new contracts and contract renewals include appropriate language for compliance with the juvenile PREA standards and specifies the agency's obligation to provide PREA monitoring of such compliance
- Improving Sexual Assault Response Teams' (SART) response and incident reviews by providing refresher training through an LCLE grant opportunity
- Establishing use of the Field PREA database for field investigators throughout the agency for incident tracking
- Improving "unannounced round" documentation by intermediate level or higher supervisors with review by PREA compliance managers and the agency PREA Coordinator
- Annual review of staffing plan for all facilities to identify patterns or trends in incidents of sexual abuse
- Enhanced data reporting to reflect a separation of sexual abuse and sexual harassment incidents

#### **Standard 115.389 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

The following was considered in determining compliance with the standard:

#### **Policy and Procedures**

C.2.11 Prison Rape Elimination Act (PREA), Section XVI. D, Page 28

#### **Supporting Documentation**

Swanson Center for Youth PREA Audit: Pre-Audit Questionnaire – Juvenile Facilities  
PREA 2015 Annual Report

#### **Interview**

PREA Coordinator

#### **Conclusion:**

PREA Audit Report



Louisiana Youth Services Office of Juvenile Justice (OJJ) published the PREA 2015 Annual Report on the OJJ website at: <http://www.ojj.la.gov/ojj/files/file/Demographics/PREA%202015%20Annual%20Report.pdf>  
All personal identifiers are removed from the published report. OJJ maintains sexual abuse data for at least ten (10) years after its initial collection.

**AUDITOR CERTIFICATION**

I certify that:

- The contents of this report are accurate to the best of my knowledge.
- No conflict of interest exists with respect to my ability to conduct an audit of the agency under review, and
- I have not included in the final report any personally identifiable information (PII) about any inmate or staff member, except where the names of administrative personnel are specifically requested in the report template.

Robert Burns Latham

August 18, 2016

Auditor Signature

Date