

**HIGHFIELDS FREEDOM FROM SEXUAL HARASSMENT/ABUSE POLICY**  
**Prison Rape Elimination Act (PREA)**

**PREVENTION OF RESIDENT SEXUAL ABUSE & HARASSMENT**

Highfields adheres to a zero-tolerance policy of sexual abuse and sexual harassment. Personnel will follow all rules and expectations designed to prevent sexual assault and must cooperate with law enforcement, prosecutors, and the courts in the investigation and possible prosecution of anyone involved in the sexual assault/rape of a client.

**PURPOSE**

To implement the Prison Rape Elimination Act (PREA) and prevent sexual assault/rape of clients in residential care; to prevent incidents of sexual abuse and sexual harassment; and to take prompt, effective, and compassionate action if allegations of sexual abuse or harassment are made.

**DEFINITIONS:**

**Resident-on-resident sexually abusive penetration:** Any sexual penetration by a resident of another resident with or without the latter's consent, or of a resident who is coerced into the sexual contact by threats of violence, or of a resident who is unable to refuse. The sexual acts included are: contact between the penis and the vagina or the anus; contact between the mouth and the penis, vagina, or anus; or penetration of the anal or genital opening of another person by a hand, finger, or other object.

**Resident-on-resident sexually abusive contact:** Non-penetrative touching (either directly or through the clothing) of the genitalia, anus, groin, breast, inner thigh, or buttocks without penetration by a resident of another resident, with or without the latter's consent, or of a resident who is coerced into sexual contact by threats of violence, or of a resident who is unable to refuse.

**Resident-on-resident sexual harassment:** Repeated and unwelcome sexual advances, requests for sexual favors, verbal comments, or gestures or actions of a derogatory or offensive sexual nature by one resident directed toward another.

**Staff-on-resident sexually abusive contact:** Includes non-penetrative touching (either directly or through the clothing) of the genitalia, anus, groin, breast, inner thigh, or buttocks by a staff member or a resident that is unrelated to official duties.

**Staff-on-resident sexually abusive penetration:** Sexual penetration by a staff member of a resident, including contact between the penis and vagina or anus; contact between the mouth and the penis, vagina, or anus; or penetration of the anal or genital opening of another person by a hand, finger, or other object.

**Staff-on-resident indecent exposure:** The display by a staff member of his or her uncovered genitalia, buttocks, or breast in the presence of a resident.

**Staff-on-resident voyeurism:** An invasion of a resident's privacy by staff for reasons unrelated to official duties or when otherwise not necessary for safety and security reasons

**Staff-on-resident sexual harassment:** Repeated verbal comments or gestures of a sexual nature to a resident by a staff member. Such statements include demeaning references to gender, sexually suggestive or derogatory comments about body or clothing, or profane or obscene language or gestures.

**Staff sexual misconduct:** Includes any behavior or act of a sexual nature directed toward a juvenile or youthful offender by an employee, volunteer, contractor, official visitor, or other agency representative. Sexual relationships of a romantic nature between staff and youth are included in this definition.

**Sexual Exploitation:** Includes allowing, permitting, or encouraging a child to engage in prostitution, or allowing, permitting, encouraging, or engaging in the photographing, filming, or depicting of a child engaged in a listed sexual act as defined in MCL 750.145c  
Also see JRG, on-line [JJ Residential Glossary](#).

**Staff neglect of duties:** Any violation of duties that may have contributed to an incident of sexual abuse or sexual harassment:

**Retaliation:** Includes revenge on a resident because they reported sexual abuse or harassment with threats or bullying. Or if staff were to hurt the resident by taking away rewards, moving rooms or allowing other residents to bully the youth.

**Voyeurism by a staff member, contractor or volunteer:** An invasion of resident's privacy beyond official duties. This could include peering at a resident who is using the restroom, showering or changing their clothing, requiring a resident to expose their buttocks or genitals, taking pictures of residents naked bodies, etc.

**First Responder:** Includes any/all agency personnel to whom an incident or report of alleged sexual abuse, or any other form of abuse/neglect of youth is reported. This includes staff's own observation or suspicion, direct report (verbal or written) from youth or third parties of abuse or neglect in accordance with Mandated Reporting laws and agency policies.

**Age of legal consent in Michigan:**

While no statute specifically establishes an age at which a minor may legally consent to sexual activity, there can be criminal penalties for consensual sexual activity with a minor under 16 years of age. See MCL § 750.520b. There also can be criminal penalties for consensual sexual activity with a minor under 18 years old when certain circumstances exist. For example, it is considered "third degree criminal sexual conduct" for a teacher or school administrator to sexually penetrate a student under 18 years old, irrespective of consent. MCL § 750.520d.

## STANDARD OPERATING PROCEDURE

### A. Providing Sexual Assault/Rape Prevention Information to Youth

1. During the intake process, the Highfields' Family Counselor reviews and completes with youth the *Highfields Residential Treatment Programs PREVENTING SEXUAL ASSUALT* Youth Orientation Packet. This orientation will take place within 72 hours of admittance.
2. During the initial intake and orientation process, this packet is reviewed verbally with the youth and a hard copy is given to them to keep, read and refer to. The youth is asked to sign a written acknowledgement form for the sexual assault/rape portion of the orientation. The Orientation Packet includes the following information:
  - a) The agency's zero-tolerance policy.
  - b) Self-protection including avoiding risky situations related to sexual assault prevention/intervention.
  - c) Reporting procedures; how to report rape, sexual activity, sexual abuse, or sexual harassment.
  - d) Multiple reporting options at Highfields' include:
    - 1) Verbally to any staff, counselor, or administrator;
    - 2) in writing to any staff, counselor, or administrator;
    - 3) in writing through the youth and family grievance process
    - 4) Externally by telephoning Children's Protective Services. Anonymous and third-party reports must also be accepted.
  - e) Treatment and counseling, how to obtain counseling services and/or medical assistance if victimized.
  - f) Protection against retaliation.
  - g) Risks and potential consequences for engaging in any type of sexual activity while at the facility.
  - h) Disciplinary action(s) for making false allegations.
  - i) Clients will not be disciplined for making an allegation of sexual abuse or sexual harassment if the investigation determines that the abuse did not occur, so long as the allegation was based upon a reasonable belief that the abuse occurred, and the allegation was made in good faith. Clients may be subject to disciplinary sanctions only pursuant to positive findings that the youth engaged in youth-on-youth sexual abuse. Clients may be subject to disciplinary sanctions for sexual contact with staff only upon findings that the staff member did not consent to such contact.

3. The signed acknowledgment form is filed in the youth's case record.
4. The information must be provided verbally and in written form, and the information is in a language and format that the client can understand. This will be accomplished with the assistance of an interpreter or other appropriate accommodations.
5. The use of resident interpreters is prohibited except in limited circumstances when delay in translation could compromise resident safety, the performance of first responder duties, or the investigation of a resident's allegations. Should this occur, it will be documented as to why a resident interpreter was needed.
6. Sanctions: Should an allegation of sexual abuse or harassment be substantiated against a resident, disciplinary action will result including loss of program privileges, restricted movement, and implementation of a behavior treatment plan to address and correct the inappropriate behavior. Sexual activity is a violation of Highfields rules but is NOT deemed criminal sexual assault IF the activity was not coerced.
7. Youth must be provided with comprehensive PREA education within 10 days of intake.

#### **B. Youth Assessment**

1. Prior to placement, a referred youth's behavior history is reviewed by Highfields Residential Coordinator, the Director of Residential Services and/or designee. The client's behavior history is reviewed prior to intake during screening processes, and as part of orientation/treatment planning to determine if the client is prone to victimize other clients, especially in regard to sexual behavior, based on the following risk factors:
  - a) History of sexually aggressive behavior
  - b) History of violence as related to a sexual offense
  - c) Anti-social attitudes indicative of sexually aggressive behavior
2. As part of a youth's intake, an assessment by Highfields Intake staff is completed using the '**PREA INTAKE SCREENING**' to determine the potential risk of sexual vulnerability and propensity to victimize other youth, especially in regard to sexual behavior. This screening / assessment must occur within 72 hours of intake. This assessment is based upon the following factors:
  - a) Age
  - b) Physical stature
  - c) Developmental disability
  - d) Mental illness

- e) Sex offender status (per offense history)
- f) First-time offender status
- g) Past history of victimization

**\*\*All residents that disclose any prior sexual victimization during a screening must be offered a follow-up meeting with a medical or mental health practitioner within 14 days. All residents that disclose during screening that they previously perpetrated sexual abuse are offered a follow-up meeting with a mental health practitioner. These referrals must be documented.**

3. This assessment is used to determine appropriateness of placement, housing and High Alert Status. High Alert Status is designed to ensure resident safety and freedom from sexual abuse or harassment upon admittance into Highfields' program. How the information was used to inform bed, housing, and other assignments must be documented.
4. Highfields does not utilize isolation as a housing designation. As a last resort, , we may temporarily place a resident, fully staffed, in the Dart Family Center or other designated area, if less restrictive measures are inadequate to keep residents at risk of sexual victimization safe and only until an alternative means of keeping all residents safe can be arranged. Such residents have access to legally required educational programming, special education services, and daily large-muscle exercise. Highfields affords each such resident a review every 30 days to determine whether there is a continuing need for separation from the accused.
5. LGBTQI residents will be reviewed on a case by case basis (Note: Highfields does not accept children into its residential program who have been convicted of sexual crimes unless they have completed a program of sexual offender treatment.) Interventions will be put into place to maximize their individual safety. Note: *Highfields' facility is small and cannot accommodate separate housing or shower facilities however transgender and intersex youths will be provided with the opportunity to shower separately from other residents. These factors will be taken into account when considering the appropriateness of placement for LGBTQI youth.* Utilizing a youth's LGBTQI status to place in a certain housing unit, room, group, etc. is strictly prohibited. The student's own view of his/her gender identity must be considered when determining placement. Youth must not be considered more likely to perpetrate sexual abuse solely because of LGBTQI identity.
6. Highfields Residential staff reviews placement and programming assignments at least quarterly in conjunction with treatment plan updates (based on incidents reported, supervision practices or issues, grievances and daily log review) to assess any threats to safety experienced by the client.

7. Staff must not search or physically examine a transgender or intersex resident for the sole purpose of determining a youth's genital status. If a youth's genital status is unknown, it may be determined during conversations with the youth, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner.

### **C. Staff Training**

1. All facility personnel, contractors, and volunteers must complete training for sexual assault/rape prevention, detection, incident response, and reporting. All facility staff, contractors, and volunteers must complete annual refresher training. At the conclusion of each training session, staff, contractors, and volunteers must sign that they attended and understood the training. This signature sheet will be kept in each staff personnel file as part of the permanent HR record.
2. All facility staff must read this policy and any related local facility written policy or procedure articles prior to assuming duties with client, when the policy or procedure changes, and on at least an annual basis. Staff must sign a written acknowledgment that they read and understood the policies and procedures. This signature sheet will be kept in each staff personnel file as part of the permanent HR record.
3. All full and part time medical and mental health care practitioners who work regularly with Highfields Residential residents must receive specialized training on: Detecting signs of sexual abuse, preserving physical evidence, effective response, and reporting. Training will be documented in personnel records. Staff that conduct administrative investigations into allegations of sexual abuse / sexual harassment must complete specialized training in how to conduct these investigations.
4. Direct care staff must be trained in how to conduct a pat down search. Cross gender pat searches are prohibited, except in exigent circumstances. In that event, exigent circumstances must be documented with justification of the circumstances leading to cross gender pat search. Searches of transgender and intersex residents must be conducted in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs. Staff that search transgender and intersex youth must be trained in how to conduct such searches.

### **D. Staff Supervision relative to PREA standards**

1. Staff must recognize that sexual assault/rape can occur in virtually any area in a residential facility. Facility requirements for supervision and monitoring of youth and staff-to-youth ratios apply at all times. Staff-to-youth ratios of 1:6 during waking hours and 1:10 during sleeping hours apply at all times.

2. Staff must always be aware of warning signs that may indicate that a youth has been sexually abused or is in fear of being sexually abused. Warning signs include but are not limited to: Isolation, depression, lashing out at others, refusing to shower, suicidal thoughts or actions, and seeking protection from staff.
3. Staff must be aware of sexually aggressive behavior. Characteristics or warning signs may include but are not limited to: A prior history of committing sex offenses, use of strong arm tactics (extortion), associating or pairing up with a youth that meets the profile of a potential victim, exhibiting voyeuristic and/or exhibitionistic behavior, and a demonstrated inability to control anger.
4. All staff of the opposite gender must announce their presence, when entering a resident housing unit. Staff of the opposite gender shall announce their presence once, at the beginning of their shift, when entering any areas where residents are likely to be showering, performing bodily functions, or changing clothes. Non-medical staff of the opposite gender of youth may not observe youth changing clothing, showering, or performing other bodily functions where buttocks or genitalia of youth are exposed except in exigent circumstances or when such viewing is incidental to routine room checks.
5. Supervisors will conduct unannounced rounds to ensure and verify compliance with PREA standards and protocols, and to support safety and reporting. Unannounced rounds will occur across all shifts. Staff is prohibited from warning other staff when unannounced supervisory rounds are occurring.

#### **E. Client Response to Sexual Assault/Rape**

Clients must be supported and encouraged to report sexual assault/rape/harassment, or attempted sexual assault/rape/harassment, staff neglect and/or violation of responsibility that contributed to the abuse and protected from retaliation. A client that believes that they were the victim of a sexual assault/rape/harassment or attempted sexual assault/rape/harassment, or believes another client was the victim or sexual assault/rape/harassment or attempted sexual assault/rape/harassment, must report this information to a staff member. Clients may also write down their report and use the youth and family grievance system to submit reports. Clients also have access to an outside reporting option, the Department of Health & Human Services Protective Services toll-free number at 1-855-444-3911

1. If a client requests to report outside of the facility, the staff will ensure following occur:

- a) First Responder staff will contact the on-duty Supervisor or Administrator to remove the client requesting access to the telephone from the living unit and will facilitate the call in an unimpeded manner in a private and safe location.
- b) The Supervisor/Administrator will dial the CPS number. The Supervisor/Administrator will leave the room to provide confidentiality for the youth but will maintain line of sight supervision of the youth at all times.
- c) Following completion of the call, the Supervisor/Administrator will notify the facility Director or designee and report that a youth made a call to CPS.

**\*Note:** Calls to the hotline are confidential however it could occur that a youth also volunteers information to staff about sexual abuse. If at any time a youth discloses information about sexual abuse to any Highfields personnel then staff must respond in accordance with the procedures listed under "Staff Response to Sexual Abuse/Rape".

2. The facility will provide an outside advocate, if requested by the victim, or qualified staff person, to accompany the victim through the forensic examination process and provide advocacy
3. Clients must be informed, prior to giving them access to outside victim advocates for emotional support services related to sexual abuse, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws. Clients age 18 and older must give written informed consent before medical/mental health personnel engage in reporting regarding victimization occurring outside of a facility or institutional setting.
4. Following a client's allegation that a staff member has committed sexual abuse against the resident, Highfields subsequently informs and documents informing the client of the outcome of the investigation. Highfields must also inform the client (unless the facility has determined that the allegation is unfounded) whenever:
  - The staff member is no longer posted within the resident's unit;
  - The staff member is no longer employed at the facility;
  - Highfields learns that the staff member has been indicted on a charge related to sexual abuse within the facility; or
  - Highfields learns that the staff member has been convicted on a charge related to sexual abuse within the facility.
5. Following a resident's allegation that he or she has been sexually abused by another resident in the facility, Highfields subsequently informs and documents informing the client of the investigation outcome. Highfields also informs the client whenever:



- Highfields learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility; or
- Highfields learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.

6. Client Grievances related to sexual abuse allegations:

- A grievance alleging sexual abuse can be filed at any time regardless of when the incident allegedly occurred.
- Third party grievances alleging sexual abuse are accepted.
- The facility allows parents or legal guardians of residents to file a grievance alleging sexual abuse, including appeals, on behalf of a resident. Regardless of whether or not the resident agrees to have the grievance filed on their behalf.
- A grievance alleging sexual abuse or sexual harassment does not have to be submitted to the person that is the subject of the allegation.
- There is no requirement that youth use an informal process for resolving grievances alleging sexual abuse or sexual harassment.
- Emergency grievances alleging sexual abuse and/or the imminent threat of sexual abuse must be responded to immediately and no later than 48 hours.
- If a grievance alleging sexual abuse is not responded to at any level of the process within the time allotted by policy, the grievance will be denied at that level.

**F. Staff/First Responder: Response to Sexual Assault/Rape**

1. Staff/First Responder receiving a report made verbally, in writing, anonymously, or from a third party of a sexual assault/rape or attempted sexual assault/rape, or staff neglect and/or violation of responsibility that contributes to the abuse, or staff that become aware of sexual activity between clients or between a client and staff, contractor, visitor, or volunteer, or sexual harassment of residents, and/or retaliation against residents or staff who reported sexual abuse or sexual harassment must immediately report this event to their supervisor. The staff and/or site supervisor will relay the report to the Facility Director or designee. That administrator is responsible for notifying DCWL. Referrals for criminal investigations will be made to the Ingham County Sheriff's Department, when appropriate.
2. The staff member receiving the report of actual or suspected sexual abuse or rape must complete and submit an Incident Report before the end of their work shift and must complete a DHS-3200, Report of Actual or Suspected Child Abuse or Neglect, within 72 hours of becoming aware of the incident.
3. If it is believed or determined that a sexual assault/rape occurred and that the alleged sexual assault/rape occurred within the last 96 hours, the Facility Director or designee must make immediate arrangements to transport the client to Sparrow

Hospital, St. Lawrence Campus at 1210 W. Saginaw Hwy. Lansing, MI) emergency room for a rape kit and the area where the incident occurred must be secured for evidence collection. First responder staff will act to preserve and protect any crime scene until appropriate steps can be taken to collect any evidence. This may include requesting that the alleged victim or abuser not take any actions that could destroy evidence; including as appropriate, washing, brushing teeth changing clothing, urinating, defecating, smoking, drinking or eating. This may also include prohibiting the alleged perpetrator from washing, brushing teeth, changing clothing, urinating, defecating, smoking, drinking or eating, also to avoid possible destruction of evidence. If it is believed or determined that a sexual assault/rape occurred more than 96 hours previous, the hospital will be contacted for further instructions.

4. Following emergency response and completion of the rape kit (if applicable) a client believed or determined to have been the victim of a sexual assault/rape must also be examined by medical staff for possible injuries, regardless of when the alleged sexual assault occurred. Resident victims of sexual abuse must be offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate.
5. Alleged victims and alleged perpetrators of sexual assault will be encouraged to test for sexually transmitted infections. In the case of a substantiated incident of sexual assault, the perpetrator must be requested to test for sexually transmitted infections. If the perpetrator will not voluntarily submit to such tests, the Facility Director or designee may seek a court order compelling the tests.
6. The victim of sexual assault/rape or attempted sexual assault/rape will be provided mental health assistance and counseling as determined necessary and appropriate. All medical and mental health services will be provided without charge to the resident.
7. The Facility Director, Program Manager or designee ensures that incidents of sexual abuse/rape, findings from investigations, and other pertinent information is reported to the client's Court of jurisdiction, the client's worker, the client's parent or legal guardian, the child's attorney (if the child/family has an attorney) within 14 days and to DCWL.
8. Records of allegations involving an employee must be kept for as long as the employee is employed or the youth is in residence, plus five years.
9. If a report is received of sexual abuse from another facility, the facility Director must report Director-to-Director to the other facility within 72 hours. (All other applicable reporting requirements still apply.)

10. For the protection of clients and staff, a designated facility employee must monitor client and/or staff to prevent retaliation for a minimum of 90 days after a sexual abuse or sexual harassment report is made. This will be documented in the client's case record and/or staff's personnel file. Monitoring should include multiple methods, including but not limited to observation, direct questioning, and review of logs and incident reports.

#### **G. Alternate Housing Placement of Victims and Perpetrators**

The Facility Director or designee will take immediate steps to protect the alleged victim from further potential sexual assault or rape (if still at the facility) by separating the alleged victim from the alleged perpetrator(s) including arranging for separate housing, dining, and/or other elements of daily routine to the extent necessary to ensure protection. These same protections must be provided to any youth believed to be in imminent danger of being sexually abused.

#### **H. Investigation Protocols**

Each incident of alleged or reported sexual abuse or sexual harassment must be investigated to the fullest extent possible. Evidence must be preserved under strict control. Highfields will not terminate an investigation solely because the source of the allegation recants the allegation. Highfields will not terminate an investigation due to the alleged victim or alleged perpetrator(s) leaving the facility. The credibility of all parties is reserved until the investigative process, including staff and resident interviews, video review, and review of any other factors is completed. In addition, the credibility of the alleged victim, suspect, or witness shall be assessed on an individual basis and shall not be determined by the person's status as a resident or staff. Substantiation of an allegation will be based on an evidentiary standard no higher than a preponderance of the evidence. Based on the results of any criminal investigation, facility personnel and prosecuting authorities will meet to determine if prosecution is appropriate

Apart from reporting to the designated supervisors or officials' staff must not discuss the details of sexual abuse reports with anyone other than to the extent necessary to make treatment, investigation and other security and management decisions. Staff must not extensively interview victims or alleged perpetrators for incident details beyond obtaining the basic information necessary to inform further actions that must be taken, such as separation of victims and perpetrators, facilitating for victim medical needs, etc.

1. Suspected or alleged client-on-client rape, sexual assault, sexual harassment or forced sexual activity with or without sexual penetration:

- a) The victim and alleged perpetrator must be immediately separated, kept isolated from each other, and prevented from communicating.
- b) The Facility Director or designee must be contacted immediately. The Facility Director will make necessary required notifications.
- c) If the assault is alleged to have occurred within the past 96 hours, the victim must be transported to Sparrow Hospital, St. Lawrence Campus Emergency Room for a forensic examination at no cost to the victim. If the assault is alleged to have occurred more than 96 hours earlier, the hospital is contacted for instructions.
- d) CPS / police must be contacted to take victim statements and open an investigation, if the alleged complaint is clearly criminal.
- e) The area(s) where the suspected assault took place is sealed off until investigators can gather evidence. Note: Staff or medical personnel can enter the area if it is necessary to ensure client safety, for example if a victim needs medical attention or first aid before being transported, but efforts must be made to disturb the area as little as possible.
- f) Any clothing or articles belonging to the victim are left in place and not handled or disturbed until investigators have gathered evidence.
- g) Staff must submit an Incident Report before the end of their shift.

2. Suspected or alleged staff-on-client sexual activity or harassment of any type:

- a) The Facility Director is immediately notified. The Facility Director or designee will make all required notifications, including notification to the police to open an investigation, if the allegation is clearly criminal, and notification to the suspected employee restricting work activities.
- b) Pending notification from the Director or designee the suspected employee will not be in direct contact with facility clients.
- c) If there has been suspected or alleged sexual penetration of any type the victim is transported for a forensic examination at no cost to the victim and evidence is protected using the same procedures as listed in items c through g in Section 1 above.

3. Any other intentional client-on-client sexual touching (non-penetrative touching, either directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or buttocks without penetration by a client of another client, with or without the latter's consent) and/or alleged or suspected client-on-client sexually abusive contact:

- a) If reported by client, observed, or suspected, duty staff must alert the shift supervisor. The shift supervisor must ensure that duty staff document information in an Incident Report and must ensure that client safety is restored or maintained.

- b) The Facility Director or designee must be notified. The Facility Director or designee determines if police and/or CPS will be contacted for further investigation or if an administrative investigation will be conducted by a designated facility employee(s) that has received specialized training in conducting investigations.
- c) The Facility Director, Program Manager or designee makes required notifications.
- d) Disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) are commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories.
- e) If it is found/proven that an employee participated in behaviors prohibited by the PREA Policy it could be cause for immediate termination from employment with the facility. Dismissal is the presumptive discipline for staff upon a finding that they engaged in sexual abuse of a youth.
- f) Violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation. Be reported to law enforcement agencies (unless the activity was clearly not criminal) and to relevant licensing bodies.

**I. Independent Audits and Agency Monitoring and Reporting, Data Collection**

1. In addition to internal administrative review and analysis, and internal or external Quality Assurance reviews, an independent and qualified auditor must audit the agency at least every three years. Auditors must be able to access and tour the facility, review documents and records, and interview clients and staff.
2. The facility must designate a PREA compliance manager that has the time and authority to oversee facility compliance efforts.
3. The agency will distribute information to the public on how to report sexual abuse and sexual harassment on behalf of clients, information on its zero-tolerance policy for sexual abuse/harassment, and sexual abuse data reports.
4. Upper-level facility management will review each incident of sexual abuse for cause, staffing, and physical barriers, and make recommendations for prevention and implementation of remedy(s).
5. The facility will implement and document a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring to protect clients from sexual abuse. At least annually, the facility Administration and the facility PREA

compliance manager will review the plan to ensure:

- a) Generally accepted secure residential practices are met.
  - b) Findings of inadequacy are addressed.
  - c) Adequate numbers of Supervisory personnel.
  - d) Physical plant inadequacies, such as "blind spots" on video monitoring systems are addressed to the maximum extent possible.
  - e) Responses are made where there is a prevalence of sexual abuse reporting on a certain shift, in a certain location, with certain personnel, or as pertaining to other factors.
6. The facility will collect accurate, uniform data for every allegation of sexual abuse. At a minimum the data will be sufficient to answer all questions on the annually-required Survey of Sexual Violence. Aggregated data will be incorporated into agency PQI processes and will be:
- a) Reviewed in order to assess and improve sexual abuse prevention, detection, and response practices.
  - b) Made available to the public via our agency website.
8. The facility will conduct a sexual abuse incident review at the conclusion of every criminal or administrative sexual abuse investigation, unless the allegation was determined to be unfounded.
9. The incident review team will consider the following:
- a. Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse;
  - b. Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or, gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility;
  - c. Examine the areas in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse;
  - d. Assess the adequacy of staffing levels in that area during different shifts;
  - e. Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; and
  - f. Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to paragraphs (d)(1)-(d)(5) of this section, and any recommendations for improvement and submit such report to the facility head and PREA compliance manager.
10. The Highfields residential program is committed to preventing and reducing the incidence of sexual assault and harassment through the following strategies:
- a) Staff Training
  - b) Supervisory review of staff monitoring practices

- c) Unannounced rounds by supervisory personnel
- d) Use of Video monitoring equipment for incident review
- e) Physical plant review for security weaknesses
- f) Review and response for any confirmed incidents of sexual abuse or harassment

**J. Exhaustion of Administrative Remedies**

1. The facility must issue a final decision (initial decision and appeal decision if appealed) on the merits of a grievance alleging sexual abuse or harassment within 90 calendar days of the initial filing of the grievance.
2. The facility may claim an extension of time to respond of up to 70 calendar days if the normal time period for a response is insufficient to make a decision. The facility must notify the youth and the youth's parent/guardian in writing of any such extension.
3. Third parties, including fellow youths, staff, family, attorneys, and outside advocates may assist a youth filing grievances relating to allegations of sexual abuse and harassment. If a third party, other than the parent or guardian, files a grievance on the youth's behalf, the facility must request as a condition of processing that the alleged victim agree to the grievance filed on his behalf and may also require that the alleged victim pursue any subsequent steps in the remedy process. If the alleged victim declines to have the grievance processed on his behalf, the facility must document the youth's decision.
4. Any staff found to be in violation of agency sexual abuse and/or sexual harassment policies may be reported to law enforcement agencies and relevant licensing bodies.

**K. References to Policy Related to Prevention of Sexual Abuse/Rape**

1. Other policy articles in this policy manual support and address the PREA standards in addition to regulating other activities. Listed below are references to these policy articles:

**RESIDENT SEARCH POLICY**

**GRIEVANCE POLICY**

**AUTHORITY**

1939 PA 280, Social Welfare Act, MCL 400.115a(1)(g)

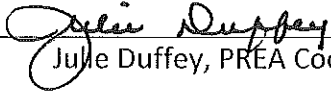
45 USC 15601, Prison Rape Elimination Act



Tyler Jones, Director of Residential Services

5.1.2024

Date



Julie Duffey, PREA Coordinator

5.1.20.24

Date



Darryl Scott, PREA Manager

5-1-2024

Date