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PREA Facility Audit Report: Final

Name of Facility: The Summit Academy

Facility Type: Juvenile

Facility Type Revisited: 07/29/2021

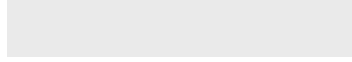
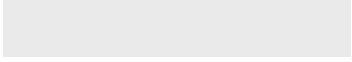
Date Final Report Submitted: 10/21/2021

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input checked="" type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input checked="" type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input checked="" type="checkbox"/>
Auditor Full Name as printed	f... Pf «À Ê.xw% Ó)gx P wtx P v

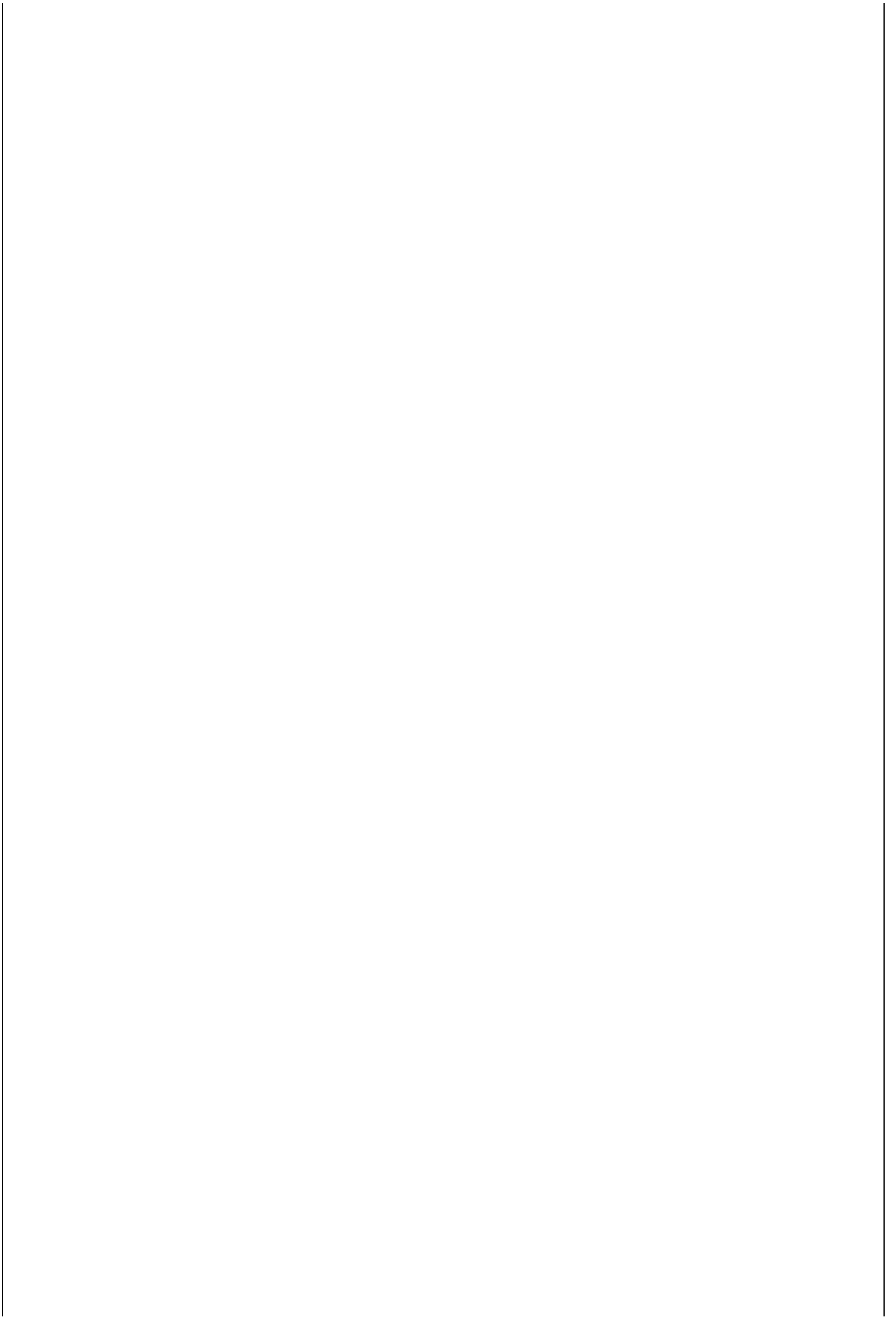
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Facility PREA Compliance Manager	
Name:	
Email Address:	
Telephone Number:	

Facility Characteristics	
Designed facility capacity:	302
Current population of facility:	89
Average daily population for the past 12 months:	101
Has the facility been over capacity at any point in the past 12 months?	No
Which population(s) does the facility hold?	Males
Age range of population:	13-19
Facility security levels/resident custody levels:	N/A
Number of staff currently employed at the facility who may have contact with residents:	123
Number of individual contractors who have contact with residents, currently authorized to enter the facility:	1







Record Review

A facility record review was completed by the Auditor while on site. This included staff and resident PREA-related records and PREA investigative reports.

Staff

The Auditor selected and reviewed a variety of documents, files, and records discussed in detail below. Document sample sizes were derived from the PREA Auditor Handbook.

The Auditor requested the employee records specific to the items listed in the Document Review Checklist Employee Records (background checks, training records and disciplinary sanctions etc.). The Auditor reviewed 15 personnel records (14 employees and one contractor) which included evidence of background checks and discipline, and the training records of those same employees, which included evidence of PREA-related training. The file selections, as with the interview selections, span a variety of job functions and post assignments, including supervisory, line staff, and specialized jobs. In addition, the PREA refresher training records for the past year for all staff were reviewed. Based on the files reviewed, all staff appear to be up to date on PREA refresher training.

PREA Investigations

The Auditor requested and was provided the investigative files for the five (5) investigative reports. The Auditor reviewed the investigative files for completeness and objectivity, using the PREA Document Review-Investigations Checklist as a guide.

Residents

The Auditor requested the resident records specific to the items listed in the Document Review Checklist-Resident Records. The Auditor reviewed 16 resident files for documentation of PREA education, medical and mental health records, screening risk assessment, and appropriate bed and housing assignment. As part of the audit, the Auditor observed a resident intake and viewed the video used for resident PREA education.

Grievance Program

The Auditor also reviewed the resident grievance program. During an interview, the PREA Coordinator explained the facility's grievance process. There were zero (0) PREA-related grievances reported in the 2 months preceding the PREA Audit.

Exit Briefing

The Auditor concluded the on-site portion of the audit on June 9, 2021. An out-brief was conducted and attended by:

- Frank Wentzel, Administrator
- Harry Stasik, Executive Director
- Cindy Boyce, PREA Coordinator

The Auditor thanked the facility for their hospitality and transparency, identified compliance-related strengths and weakness, briefly discussed compliance-related opportunities, and explained the post on-site phase, which may include requests for clarification or additional documentation, a detailed standards analysis, corrective action plan development (if appropriate), report writing, and the issuance of an interim and/or final report.

Post-Site Audit Phase

After the on-site portion of the audit, the Auditor began the Evidence Review phase, utilizing the Auditor Compliance Tool for Juvenile Facility as a guide to determine compliance with each standard. The Auditor utilized information from the PAQ as provided prior to the audit, policies and procedures, information observed from the site review, documents collected while on-site, and information obtained from both the staff and resident interviews to complete a systematic review and determination of compliance for each provision of every standard and to write a professional and through audit report. The Auditor also had several follow-up conversations with the PREA Coordinator during this phase. At the completion of all phases of this PREA Audit, the Auditor identified three (3) standard provisions within one (1) standard requiring corrective action, causing an interim report to be issued. The interim report was forward to the facility on July 25, 2021. Following this, the facility and the Auditor entered into a 180-day corrective action phase. Throughout the 180 days, the facility will maintain compliance with PREA standards. The facility can provide supporting documentation and other evidence to the Auditor throughout this period to support compliance with the corrective action and recommendations. The facility submitted the final corrective plan on September 28, 2021. The corrective action was reviewed and verified by the auditor and the report was finalized on October 21, 2021 and issued to the facility.

Standards

Auditor Overall Determination Definitions

- Exceeds Standard
(~~substantially~~ substantially exceeds requirement of standard)
- Meets Standard

Based on the review of the Pre-Audit questionnaire and related documents submitted, PREA implementation appears to be organized and well-documented under the leadership of the PC. The preparedness for the audit and overall incorporation of institutionalized sexual safety practices demonstrates that the PC has sufficient time and authority to accomplish PREA responsibilities for the agency. Additionally, the PC's ability to delegate other duties, when necessary, further demonstrates she has sufficient time for overseeing PREA and sexual safety practices in the agency. Compliance with this provision was ~~55%~~ 100%.



supervisors.

Evidence used to determine standard compliance includes: Auditor's observations from the site tour, the facility's staffing plan, the facility's policy for having Intermediate and higher-level supervisors conduct and document unannounced rounds, review of staffing records and interviews of random staff, intermediate and higher-level facility staff, the Executive Director, the Program Director and the PREA Coordinator.

The final analysis of the evidence indicates the facility has a staffing plan which had taken into consideration 11 out of 11 of the required criteria in calculating adequate staffing levels. The facility has not deviated from its staffing plan during this audit period. For the past 12 months, the facility has been averaging minimum staffing levels of one (1) staff to every eight (8) residents (1:8 ratio) during waking hours and one (1) staff to every 16 residents (1:16 ratio) during sleeping hours. The facility holds annual meetings to assess, determine, and document whether adjustments are needed to: (a) the staffing ~~and~~ iting

interviews with randomly selected resident and staff.

115.315 (f): All TSA staff have received training on conducting cross-gender pat-down searches and searches of transgender and intersex residents in a professional and respectful manner, consistent with security needs. Training records verified that all staff have received training on conducting cross-gender pat-down searches and searches of transgender and intersex residents in a professional and respectful manner, consistent with security needs.

Compliance with this provision was based upon the Auditor's review of the facility staff training records and a review of the lesson plan. Also supported by interviews with randomly selected staff and review of the training material and records.

Based upon the review and analysis of all the available evidence, the Auditor has determined that the agency is fully compliant with this standard. No corrective action is required.

115.316

Residents with disabilities and residents who are limite

Based upon the review and analysis of all the available evidence, the Auditor has determined that the facility is fully compliant with this standard requiring residents with disabilities (including, for example, residents who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech disabilities) to have an 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. No corrective action is required.

115.317

Hiring and promotion decisions

contact with residents) every ye

115.318	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire for The Summit Academy (TSA). 2. The Summit Academy - PREA Policy (revised 12/29/20) <p>Site Review Observations</p> <ol style="list-style-type: none"> 1. Site review of the entire facility <p>Interviews</p> <ol style="list-style-type: none"> 1. Executive Director 2. Program Director <p>Findings (by provision)</p> <p>115.318 (a): N/A; TSA has not acquired a new facility or made a substantial expansion to existing facilities since the last PREA audit. By policy, The Summit Academy would consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect residents from sexual abuse if it designed or acquired any new facility or planned any substantial expansion or modification of existing facilities.</p> <p>Compliance with this provision was based upon the Auditor's observations during the tour of the facility and supported by interviews the Executive Director and the Program Director.</p> <p>115.318 (b): N/A; TSA has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since the last PREA audit.</p> <p>Compliance with this provision was based upon the Auditor's observations during the tour of the facility, a review of the limited video monitoring system, and supported by interviews the Agency Head and the Program Director.</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined that the facility is fully compliant with this standard requiring upgrades to facilities and technologies to consider the protection of residents from sexual abuse if it designed or acquired any new facility or planned any substantial expansion or modification of existing facilities. No corrective action is required.</p>

115.321

Evidence protocol and forensic medical examinations

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115.321 (f): This provision is not applicable. The Pennsylvania State Police is responsible for conducting criminal sexual abuse investigations, including resident-on-resident sexual abuse or staff sexual misconduct. A documented MOU, dated Feb 2, 2019, with the Pennsylvania State Police includes following the requirements of paraMPolice i ollice ui Es, Pted Feb



115.333	Resident education
	Auditor Overall Determination: Meets Standard
	<p data-bbox="242 208 451 235">Auditor Discussion</p> <p data-bbox="242 271 1026 297">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="242 329 360 356">Documents</p> <ol data-bbox="242 387 858 640" style="list-style-type: none"> 1. Pre-Audit Questionnaire for The Summit Academy (TSA). 2. The Summit Academy - PREA Policy (revised 12/29/20) 3. TSA PREA Student Brochure English (revised 6/20) 4. TSA PREA Information Posters 5. TSA Student Training Records <p data-bbox="242 672 504 698">Site Review Observations</p> <ol data-bbox="242 730 639 815" style="list-style-type: none"> 1. Tour of common areas of the facility 2. Tour of Living Units <p data-bbox="242 846 347 873">Interviews</p> <ol data-bbox="242 904 970 1102" style="list-style-type: none"> 1. Informal discussion with randomly selected residents during site tour 2. PREA Coordinator 3. Intake Staff 4. Executive Director <p data-bbox="242 1133 472 1160">Findings (by provision)</p> <p data-bbox="242 1191 1474 1352">115.333 (a): TSA provides all PREA required information to residents upon intake. Residents receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment and this information is presented in an age-appropriate fashion. This was confirmed during resident interviews. All residents sign a PREA acknowledgement training record document. The PREA information is provided to the residents in the form of handouts and via the PREA information posters.</p> <p data-bbox="242 1384 1449 1442">Compliance with this provision was based upon the Auditor's observations during the tour of the facility and supported by interviews with the Intake Staff, interviews with randomly selected residents, and review of residents' files.</p> <p data-bbox="242 1473 1493 1563">115.333 (b): TSA has comprehensive PREA education video that is to be provided to the residents in an orientation program no more than 1 day after intake. During interviews of randomly selected residents, all confirmed that they had seen the PREA education video. This was also confirmed by interviews with the Intake Staff.</p> <p data-bbox="242 1594 1449 1653">Compliance with this provision was based upon the Auditor's observations during the tour of the facility and supported by interviews with the Intake Staff, interviews with randomly selected residents, and review of residents' files.</p> <p data-bbox="242 1684 1484 1814">115.333 (c): The comprehensive PREA education video was provided to all residents within 1 day after intake and all residents signed a PREA training record. All 14 of the residents interviewed stated they has seen the PREA video and it was age appropriate. The training includes the resident's rights to be free from sexual abuse, retaliation, and the facility's procedures for responding to such incidents.</p> <p data-bbox="242 1845 1449 1904">Compliance with this provision was based upon the Auditor's review and verification of the resident's training records and confirmed by interviews with Intake Staff and randomly selected residents.</p> <p data-bbox="242 1935 1455 1993">115.333 (d): PREA education is in formats accessible to all residents, including those who have limited reading skills. The facility has access to Language Line Solution and maintains a list of bilingual staff.</p> <p data-bbox="242 2024 1449 2083">Compliance with this provision is based upon the Auditor's observations during the tour of the facility and is supported by interviews with the PREA Coordinator and the Executive Director.</p> <p data-bbox="242 2114 1461 2141">115.333 (e): All resident-signed PREA training records were provided to and verified by the Auditor. The Auditor confirmed</p>

the training records were also securely maintained.

Compliance with this provision is based upon the Auditor's review of the PREA training records for all residents. The Auditor verified the initial PREA acknowledgement forms were signed by residents and were securely maintained.

115.333 (f): PREA education and reporting posters are placed throughout the facility. The facility does not issue a Student (Resident) Handbook, but provides the PREA education and information in other written formats to the resident at intake and has comprehensive PREA posters. The Auditor recommended that an additional PREA poster be added to the dining hall, the 2nd floor ppp)

115.334	Specialized training: Investigations
	<p data-bbox="240 147 740 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 273 1026 300">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="240 331 360 358">Documents</p> <ol data-bbox="240 389 1414 586" style="list-style-type: none"><li data-bbox="240 389 858 416">1. Pre-Audit Questionnaire for The Summit Academy (TSA).<li data-bbox="240 445 847 472">2. The Summit Academy - PREA Policy (revised 12/29/20)<li data-bbox="240 501 1414 528">3. The Butler County Department of Human Services (DHS) Office for Children, Youths and Families (CYF) website<li data-bbox="240 557 639 584">3. Pennsylvania ChildLine and Abdbt

6C 115.335	Specialized training: Medical and mental health care
	<p data-bbox="240 147 740 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 273 1026 300">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="240 331 360 358">Documents</p> <p data-bbox="240 389 861 416">1. Pre-Audit Questionnaire for The Summit Academy (TSA).</p> <p data-bbox="240 443 847 470">2. The Summit Academy - PREA Policy (revised 12/29/20)</p> <p data-bbox="240 501 1145 537">3. Medical and Mental Health Staff's Training certificate attached to the PREA Audit Report IT. I D v</p> <p data-bbox="240 560 504 586">Site Review Observations</p> <p data-bbox="240 618 323 645">1. N/A</p> <p data-bbox="240 676 347 703">Interviews</p> <p data-bbox="240 734 638 761">1. Informal discussion during site tour</p> <p data-bbox="240 792 501 819">2. PREA Coordinator</p>

115.342	Placement of residents
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire for The Summit Academy (TSA). 2. The Summit Academy - PREA Policy (revised 12/29/20) 3. TSA PREA Resident Room Assignment Instruments (Not dated) 4. Residents' records <p>Site Review Observations</p> <ol style="list-style-type: none"> 1. Site review of living units <p>Interviews</p> <ol style="list-style-type: none"> 1. Informal discussion with Residents on site tour 2. Randomly selected Residents 3. PREA Coordinator 4. Medical Staff (staff responsible for the Risk Screening) 6. Executive Director 7. Randomly selected Staff <p>Findings (by provision)</p> <p>115.342 (a): TSA use information from the risk assessment for housing, bed, work, education, and program assignmentM</p>

115.351

Resident reporting

Auditor Overall Determination: Meets Standard

Auditor Discussion

The following evidence was analyzed in making the compliance determination:

Documents

1. Pre-Audit Questionnaire for The Sum

Compliance with this provision was confirmed by interviews with the PREA Coordinator and the Auditor's observations of the written material..

115.351 (e): TSA provide a method for staff to privately report sexual abuse and sexual harassment of residents via The Summit Academy (TSA) - PREA Policy (revised 12/29/20).

Compliance with this standard is supported by interviews with randomly selected staff.

Evidences used by the Auditor to determine compliance with the standard include review of the facility's policy the PREA Policy (revised 12/29/20), the Resident's Handbook, and the facility's website; observations of reporting information during the site tour; and interviews with randomly selected staff and residents and with the PREA Compliance Manager.

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115.352 Exhaustion of administrative remedies

Auditor Overall Determination: Meets Standard

Auditor Discussion

The following evidence was analyzed in making the compliance determination:

Documents

- 1. Pre-Audit Questionnaire for The Summit Academy (TSA).
- 2. The Summit Academy - PREA Policy (revised 12/29/20)
- 3. Student Grievance Policy

Site Review Observations

- 1. ~~PREA Grievance~~ Grievance Forms and ~~copies~~ copies observed throughout the facility

Interviews

- 1. ~~Randomly selected~~ Randomly selected Residents
- 2. Randomly selected Staff
- 3. PREA Coordinator
- 4. Program Director
- 5. PREA Compliance Manager

Findings (TSA Provision)

115.352-10 TSA has an administrative procedure for dealing with resident grievances regarding sexual abuse. Therefore, the facility is not exempt from this standard. The administrative procedm

regularly and any concern is immediately addressed. The supervisor in charge will interview the student. That supervisor also has the responsibility to request an incident report from the staff member before the shift ends or before that staff member leaves the facility. The supervisor will report all allegations to the Program Director and to the Child Abuse Hotline.

Compliance with this provision is based upon the Auditor's review of the grievance policy and is supported by an interview with the Program Director.

115.352 (g): TSA Grievance Policy does not allow the facility to discipline a resident for filing a grievance alleging sexual abuse where the agency demonstrates that the resident filed the grievance in bad faith. In the past 12 months, no residents' grievances alleging sexual abuse were filed that resulted in discipline. ~~no~~ ~~at~~ ~~the~~ ~~director~~ ~~disciplat~~ ~~director~~ ~~evascipl~~



Director promptly reports the allegation to the alleged victim's parents or legal guardians. If the alleged victim is under the guardianship of the child welfare system, the Program Director reports the allegation to the alleged victim's caseworker instead of the parents or legal guardians.

Compliance with this provision is supported by an interview with the PREA Coordinator and a review of investigation reports.

115.361 (f): TSA reports all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators who then reports it to Child Protective Services.

Compliance for this provision was supported by interviews with the Program Director and the PREA Coordinator and a review of investigation reports.

Evidences used to determine standard compliance includes a review of case files and interviews with randomly selected staff, Medical and Mental Health staff, Case Workers, the Program Director, and the PREA Coordinator.

Based upon the review and analysis of all the available evidence, the Auditor has determined that the facility is fully compliant with this standard requiring staff and agency reporting duties. No corrective action is required.

115.362	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents</p> <ol style="list-style-type: none">1. Pre-Audit Questionnaire for The Summit Academy (TSA).2. The Summit Academy - PREA Policy (revised 12/29/20) <p>Site Review Observations</p> <ol style="list-style-type: none">1. N/A <p>Interviews</p>

115.363	Reporting to other confinement facilities
	<p data-bbox="242 145 742 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 208 454 237">Auditor Discussion</p> <p data-bbox="242 271 1029 300">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="242 333 359 362">Documents</p> <ol data-bbox="242 387 861 472" style="list-style-type: none"> <li data-bbox="242 387 861 416">1. Pre-Audit Questionnaire for The Summit Academy (TSA). <li data-bbox="242 443 861 472">2. The Summit Academy - PREA Policy (revised 12/29/20) <p data-bbox="242 506 502 535">Site Review Observations</p> <ol data-bbox="242 560 526 589" style="list-style-type: none"> <li data-bbox="242 560 526 589">1. Tour areas of the facility <p data-bbox="242 622 343 651">Interviews</p> <ol data-bbox="242 676 638 819" style="list-style-type: none"> <li data-bbox="242 676 638 705">1. Informal discussion during site tour <li data-bbox="242 732 470 761">2. PREA Coordinator <li data-bbox="242 788 470 817">3. Executive Director <p data-bbox="242 853 470 882">Findings (by provision)</p> <p data-bbox="242 907 1484 1032">115.363 (a): TSA's - PREA Policy, requires that, upon receiving an allegation that a resident was sexually abused while confined at another facility, the Executive Director must notify the head of the facility or appropriate office of the agency or facility where sexual abuse is alleged to have occurred. The facility received zero (0) allegations in the past 12 months that a resident was abused while confined at another facility.</p> <p data-bbox="242 1066 1189 1095">Compliance with this provision is supported by policy and interview with the Executive Director.</p> <p data-bbox="242 1128 1460 1158">115.363 (b): By policy, the Executive Director would notify the facility where the alleged abuse occurred via an immedddd</p>

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115.367 (f): The Auditor is not required to audit this provision.

Evidences used to determine compliance with this standard include a review of case files and interviews of the PREA Coordinator, Executive Director and Shift Supervisors. Based upon the review and analysis of all the available evidence, the Auditor has determined that the facility is fully compliant with this standard requiring agency protection against retaliation. No corrective action is required.

115.368	Post-allegation protective custody
	Audi

115.371	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard
	<p data-bbox="242 210 451 237">Auditor Discussion</p> <p data-bbox="242 271 1026 297">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="242 331 360 358">Documents</p> <ol data-bbox="242 387 858 528" style="list-style-type: none"> 1. Pre-Audit Questionnaire for The Summit Academy (TSA). 2. The Summit Academy - PREA Policy (revised 12/29/20) 3. The Summit Academy PREA Investigative Files <p data-bbox="242 560 504 586">Site Review Observations</p> <ol data-bbox="242 616 320 642" style="list-style-type: none"> 1. N/A <p data-bbox="242 674 347 701">Interviews</p> <ol data-bbox="242 730 474 873" style="list-style-type: none"> 1. Investigative Staff 2. PREA Coordinator 3. Program Director <p data-bbox="242 904 472 931">Findings (by provision)</p> <p data-bbox="242 963 1484 1055">115.371 (a): N/A; TSA does not conduct any form of administrative or criminal investigations of sexual abuse or harassment. Administrative investigations are conducted by the Office of Children, Youth, and Families. The Pennsylvania State Police conducts the investigations of allegations that rise to the level of criminal behavior.</p> <p data-bbox="242 1086 1426 1146">Compliance with this provision was verified by interviews with the PREA Coordinator and the Program Director and the Auditor's review of PREA investigative reports.</p> <p data-bbox="242 1178 1489 1270">115.371 (b): N/A; Administrative investigations are conducted by the Office of Children, Youth, and Families. The Pennsylvania State Police conducts the investigations of allegations that rise to the level of criminal behavior. The facility has no specialized trained sexual abused investigators.</p> <p data-bbox="242 1301 1426 1361">Compliance with this provision was verified by interviews with the PREA Coordinator and the Program Director and the Auditor's review of PREA investigative reports.</p> <p data-bbox="242 1393 1489 1552">115.371 (c): TSA does not conduct any form of administrative or criminal investigations of sexual abuse or harassment. The facility would not gather, but preserve direct and circumstantial evidence, including any available physical and DNA evidence until the outside investigators were to arrive at the facility. However, they would gather and preserve any available electronic monitoring data. They would not interview alleged victims, suspected perpetrators, and witnesses who reported or were involved in allegation of sexual abuse involving the suspected perpetrator per the request of the investigating agencies.</p> <p data-bbox="242 1583 1473 1644">Compliance with this provision was verified by interviews with the PREA Coordinator and the Program Director and reviews of the PREA investigative reports.</p> <p data-bbox="242 1675 1489 1800">115.371 (d): N/A; TSA does not conduct any form of administrative or criminal investigations of sexual abuse or harassment. Administrative Investigations are conducted by the Office of Children, Youth and Families. TSA, by policy, does not terminate an investigation solely because the source of the allegation recants the allegation. This was supported by review of this policy.</p> <p data-bbox="242 1832 1455 1892">Compliance with this provision was verified by interview with the Program Director and the Auditor's review of the facility's PREA policy.</p> <p data-bbox="242 1924 1458 2083">115.371 (e): N/A; TSA does not conduct any form of criminal investigations of sexual abuse or harassment. Administrative investigations are conducted by the Office of Children, Youth and Families. TSA refers sex abuse cases for criminal investigation to the Pennsylvania State Police when the quality of evidence appears to support criminal prosecution. This was supported by review of investigate reports and interviews with the PREA Coordinator and the Program Director. TSA does not conduct compelled interviews; it would be beyond the scope of their authority.</p> <p data-bbox="242 2114 1489 2141">Compliance with this provision was verified by interviews with the PREA Coordinator and the Program Director and review of</p>

115.378	Interventions and disciplinary sanctions for residents
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 271 1026 297">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="240 331 360 358">Documents</p> <ol data-bbox="240 387 858 584" style="list-style-type: none"> 1. Pre-Audit Questionnaire for The Summit Academy (TSA). 2. The Summit Academy - PREA Policy (revised 12/29/20) 3. The Summit Academy PREA Investigative Files 4. Residents' Case Files <p data-bbox="240 618 504 645">Site Review Observations</p> <ol data-bbox="240 674 320 701" style="list-style-type: none"> 1. N/A <p data-bbox="240 734 347 761">Interviews</p> <ol data-bbox="240 790 608 929" style="list-style-type: none"> 1. Medical and Mental Health Staff 2. PREA Coordinator 3. Executive Director <p data-bbox="240 963 472 990">Findings (by provision)</p> <p data-bbox="240 1019 1485 1180">115.378 (a): By policy, TSA residents may be subject to disciplinary sanctions following an administrative finding that a resident engaged in resident-on-resident sexual abuse or following a criminal finding of guilt for resident-on-resident sexual abuse. The resident may be subject to disciplinary sanctions but only pursuant to a formal disciplinary process. This policy was confirmed by interview with the PREA Coordinator. In the past 12 months, there has been no administrative findings nor criminal findings of guilt for resident-on-resident sexual abuse that have occurred at this facility.</p> <p data-bbox="240 1209 1235 1236">Compliance with this provision was confirmed by the Auditor's interview with the PREA Coordinator.</p> <p data-bbox="240 1265 1465 1359">115.378 (b): In the past 12 months, no residents were placed in isolation as a disciplinary sanction for resident-on-resident sexual abuse. It appears that this provision of the standard is not applicable. This was supported by interviews with the Program Director and the PREA Coordinator and the Auditor's review of residents' case files.</p> <p data-bbox="240 1388 1369 1451">Compliance with this provision was supported by the Auditor's interview with the Program Director and the PREA Coordinator and the Auditor's review of residents' case files.</p> <p data-bbox="240 1480 1485 1574">115.378 (c): By policy, TSA disciplinary process does consider whether a resident's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed. This was supported by interview with the Executive Director and the Auditor's review of investigative reports.</p> <p data-bbox="240 1603 1493 1666">Compliance with this provision was supported by the Auditor's interview with the Program Director and the Auditor's review of investigative reports.</p> <p data-bbox="240 1695 1490 1892">115.378(d): TSA offers therapy, counseling, and other interventions designed to address and correct the underlying reasons or motivations for abuse. The Program Director conducts a Multi-Disciplinary Team (MDT) meeting to consider whether to offer the offending resident participation in such interventions. The program may require participation in such interventions as a condition of access to any rewards-based behavior management system or other behavior-based incentives, but not as a condition of access to general programming or education. This policy was confirmed by interviews with the Medical and Mental Health Staff.</p> <p data-bbox="240 1921 1370 1948">Compliance with this provision was confirmed by the Auditor's interview with the Medical and Mental Health Staff.</p> <p data-bbox="240 1977 1469 2072">115.378 (e): By policy, TSA may discipline a resident for sexual contact with staff only upon a finding that the staff member did not consent to such contact. There was no record of disciplinary action against residents for sexual conduct with staff in the last 12 months. This policy and information were confirmed by interview with the PREA Compliance Manager.</p> <p data-bbox="240 2101 1334 2128">Compliance with this provision was confirmed by the Auditor's interview with the PREA Compliance Manager.</p>

115.378 (f): By policy, TSA prohibits disciplinary action for a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred. This policy was confirmed by interview with the PREA Compliance Manager.

Compliance with this provision was confirmed by the Auditor's interview with the PREA Compliance Manager.

115.378 (g): By policy, TSA prohibits all sexual activity between residents. This policy was confirmed by interview with the PREA Compliance Manager.

Compliance with this provision was confirmed by the Auditor's interview with the PREA Compliance Manager.

After review and analysis of all the available evidence, the Auditor has determined that the facility is fully compliant with this standard requiring interventions and disciplinary sanctions for residents. No corrective action is required.

115.383	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 271 1026 297">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="240 331 360 358">Documents</p> <ol data-bbox="240 387 858 472" style="list-style-type: none"> <li data-bbox="240 387 858 414">1. Pre-Audit Questionnaire for The Summit Academy (TSA). <li data-bbox="240 443 858 472">2. The Summit Academy - PREA Policy (revised 12/29/20) <p data-bbox="240 501 504 528">Site Review Observations</p> <ol data-bbox="240 557 320 584" style="list-style-type: none"> <li data-bbox="240 557 320 584">1. N/A <p data-bbox="240 613 347 640">Interviews</p> <ol data-bbox="240 672 608 815" style="list-style-type: none"> <li data-bbox="240 672 608 698">1. Medical and Mental Health Staff <li data-bbox="240 728 475 754">2. PREA Coordinator <li data-bbox="240 784 461 810">3. Program Director <p data-bbox="240 844 472 871">Findings (by provision)</p> <p data-bbox="240 902 1469 965">115.383 (a): TSA, by policy, offers medical and mental health evaluation and, as appropriate, treatment to all residents who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility.</p> <p data-bbox="240 994 1425 1021">Compliance for this provision was determination and supported by interviews with the Medical and Mental Health Staff.</p> <p data-bbox="240 1050 1469 1144">115.383 (b): TSA's evaluation and treatment of victims does include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody.</p> <p data-bbox="240 1173 1238 1200">Compliance for this provision was supported by interviews with the Medical and Mental Health Staff.</p> <p data-bbox="240 1229 1453 1292">115.383 (c): TSA, by policy, provides such victims with medical and mental health services consistent with the community level of care.</p> <p data-bbox="240 1321 1489 1384">Compliance for this this provision was determined by the Auditor's review of medical records and interviews with Medical and Mental Health Staff</p> <p data-bbox="240 1413 948 1440">115.383 (d): This provision is not applicable; TSA is an all-male facility.</p> <p data-bbox="240 1469 948 1496">115.383 (e): This provision is not applicable; TSA is an all-male facility.</p> <p data-bbox="240 1525 1437 1588">115.383 (f): By policy, TSA resident victims of sexual abuse while incarcerated, are offered tests for sexually transmitted infections as medically appropriate.</p> <p data-bbox="240 1617 1410 1680">Compliance determination of this provision was supported by interviews with Medical and Mental Health Staff and the Auditor's review of the PREA policy.</p> <p data-bbox="240 1709 1481 1771">115.383 (g): TSA provides treatment services 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.</p> <p data-bbox="240 1800 1410 1863">Compliance determination of this provision was supported by interviews with Medical and Mental Health Staff and the Auditor's review of the PREA policy.</p> <p data-bbox="240 1892 1445 1955">115.383 (h): TSA does attempt to conduct a mental health evaluation of all known resident-on-resident abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners.</p> <p data-bbox="240 1984 1442 2047">Compliance determination of this provision was supported by the Auditor's review of medical records and interviews with Medical and Mental Health Staff.</p> <p data-bbox="240 2076 1497 2139">Based upon the review and analysis of all the available evidence, the Auditor has determined that the facility is fully compliant with this standard requiring ongoing medical and mental health care for sexual abuse victims and abusers. No corrective</p>

action is required.

Based upon the review and analysis of all the available evidence, the Auditor has determined that the facility is compliant with this standard requiring sexual abuse incident reviews. No corrective action is required.

115.387	Data collection
	<p data-bbox="240 145 740 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 210 451 239">Auditor Discussion</p> <p data-bbox="240 271 1026 300">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="240 329 360 358">Documents</p> <ol data-bbox="240 387 858 645" style="list-style-type: none"> 1. Pre-Audit Questionnaire for The Summit Academy (TSA). 2. The Summit Academy - PREA Policy (revised 12/29/20) 3. Summit Academy PREA Annual Report 2020 4. PREA Incident Reports 5. TSA Administrative and Response Review Form <p data-bbox="240 674 504 703">Site Review Observations</p> <ol data-bbox="240 732 320 761" style="list-style-type: none"> 1. N/A <p data-bbox="240 790 347 819">Interviews</p> <ol data-bbox="240 848 474 931" style="list-style-type: none"> 1. PREA Coordinator 2. Executive Director <p data-bbox="240 960 472 990">Findings (by provision)</p> <p data-bbox="240 1019 1489 1079">115.387 (a): TSA collects accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions.</p> <p data-bbox="240 1108 1425 1169">Compliance with this provision was determined based upon review of all PREA Incident Reports for the prior 12-month reporting period and an interview with the PREA Coordinator.</p> <p data-bbox="240 1198 1473 1258">115.387 (b) TSA aggregates the incident-based sexual abuse data annually as stated by the Program Director. Aggregated sexual abuse data is included in the facility's Annual Report.</p> <p data-bbox="240 1288 1473 1348">Compliance with this provision was determined based upon review of the Annual Report as published and an interview with the Executive Director.</p> <p data-bbox="240 1377 1473 1438">115.387 (c) TSA's incident-based data includes the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice.</p> <p data-bbox="240 1467 1441 1527">Compliance with this provision was determined based upon the completed "Survey of Sexual Violence conducted by the Department of Justice Form" and an interview with the Executive Director.</p> <p data-bbox="240 1556 1493 1691">115.387 (d): TSA maintains and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews. The Administrative and Response Review Form is completed as supporting documentation after every sexual abuse incident review and updated with all current data collected, reviewed, and maintained. This policy was supported by review of the Administrative and Response Review Forms.</p> <p data-bbox="240 1720 1461 1780">Compliance with this provision was determined based upon review of the completed Administrative and Response Review Forms and an interview with the Executive Director.</p> <p data-bbox="240 1809 1010 1839">115.387 (e): N/A - TSA does not contract for the confinement of its residents.</p> <p data-bbox="240 1868 798 1897">115.387 (f): N/A - DOJ has not requested agency data.</p> <p data-bbox="240 1926 1493 1986">Based upon the review and analysis of all the available evidence, the Auditor has determined that the facility is fully compliant with this standard requiring data collection of sexual abuse incidents for corrective action. No corrective action is required.</p>

115.388	Data review for corrective action
	<p data-bbox="240 147 740 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 273 1026 300">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="240 331 360 358">Documents</p> <ol data-bbox="240 389 858 533" style="list-style-type: none"><li data-bbox="240 389 858 416">1. Pre-Audit Questionnaire for The Summit Academy (TSA).<li data-bbox="240 445 858 472">2. The Summit Academy - PREA Policy (revised 12/29/20)<li data-bbox="240 501 740 528">3. Summit Academy PREA Annual Report 2020 <p data-bbox="240 560 504 586">Site Review Observations</p> <ol data-bbox="240 618 328 645" style="list-style-type: none"><li data-bbox="240 618 328 645">1. N/A <p data-bbox="240 676 347 703">Interviews</p> <ol data-bbox="240 734 472 819" style="list-style-type: none"><li data-bbox="240 734 472 761">1. PREA Coordinator<li data-bbox="240 790 472 817">2. Executive Director <p data-bbox="240 851 309 878">F , dB</p>

115.401	Frequency and scope of audits
	<p data-bbox="240 145 740 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 210 451 239">Auditor Discussion</p> <p data-bbox="240 271 1026 300">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="240 329 360 358">Documents</p> <ol data-bbox="240 387 735 416" style="list-style-type: none"><li data-bbox="240 387 735 416">1. Pre-Audit Questionnaire for The Summit vN

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire for The Summit Academy (TSA). 2. The Summit Academy Website <p>Site Review Observations</p> <ol style="list-style-type: none"> 1. N/A <p>Interviews</p> <ol style="list-style-type: none"> 1. PREA Coordinator <p>Findings (by provision)</p> <p>115.403 (f): A review of the TSA websites supports that facility posted all finalized PREA Reports on its facilities' websites. Compliance was verified by a review of the TSA website and confirmed by an interview with the PREA Coordinator.</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined that the agency is fully compliant with this standard requiring publishing audit contents and findings. No corrective action is required.</p>

115.316 (a)	Residents with disabilities and residents who are limited English proficient	
	Does the agency take appropriate steps to ensure that residents with disabilities have an 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, including: Residents who are deaf or hard of hearing?	yes
	Does the agency take appropriate steps to ensure that residents with disabilities have an 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, including: Residents who are blind or have low vision?	yes
	Does the agency take appropriate steps to ensure that residents with disabilities have an 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, including: Residents who have intellectual disabilities?	yes
	Does the agency take appropriate steps to ensure that residents with disabilities have an 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, including: Residents who have psychiatric disabilities?	yes
	Does the agency take appropriate steps to ensure that residents with disabilities have an 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, including: Residents who have speech disabilities?	yes
	Does the agency take appropriate steps to ensure that residents with disabilities have an 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, including: Other? (if "other," please explain in overall determination notes.)	yes
	Do such steps include, when necessary, ensuring effective communication with residents who are deaf or hard of hearing?	yes
	Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with residents with disabilities including residents who: Have intellectual disabilities?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with residents with disabilities including residents who: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with residents with disabilities including residents who: Who are blind or have low vision?	yes
115.316 (b)	Residents with disabilities and residents who are limited English proficient	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to residents who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes

115.333 (b)	Resident education	
	Within 10 days of intake, does the agency provide age-appropriate comprehensive education to residents either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 10 days of intake, does the agency provide age-appropriate comprehensive education to residents either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 10 days of intake, does the agency provide age-appropriate comprehensive education to residents either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
115.333 (c)	Resident education	
	Have all residents received such education?	yes
	Do residents receive education upon transfer to a different facility to the extent that the policies and procedures of the resident's new facility differ from those of the previous facility?	yes
115.333 (d)	Resident education	
	Does the agency provide resident education in formats accessible to all residents including those who: Are limited English proficient?	yes
	Does the agency provide resident education in formats accessible to all residents including those who: Are deaf?	yes
	Does the agency provide resident education in formats accessible to all residents including those who: Are visually impaired?	yes
	Does the agency provide resident education in formats accessible to all residents including those who: Are otherwise disabled?	yes
	Does the agency provide resident education in formats accessible to all residents including those who: Have limited reading skills?	yes
115.333 (e)	Resident education	
	Does the agency maintain documentation of resident participation in these education sessions?	yes
115.333 (f)	Resident education	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to residents through posters, resident handbooks, or other written formats?	yes
115.334 (a)	Specialized training: Investigations	
	In addition to the general training provided to all employees pursuant to §115.331, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators have received training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.321(a).)	na

115.361 (e)	Staff and agency reporting duties	
	Upon receiving any allegation of sexual abuse, does the facility head or his or her designee promptly report the allegation to the appropriate office?	yes
	Upon receiving any allegation of sexual abuse, does the facility head or his or her designee promptly report the allegation to the alleged victim's parents or legal guardians unless the facility has official documentation showing the parents or legal guardians should not be notified?	yes
	If the alleged victim is under the guardianship of the child welfare system, does the facility head or his or her designee promptly report the allegation to the alleged victim's caseworker instead of the parents or legal guardians? (N/A if the alleged victim is not under the guardianship of the child welfare system.)	yes
	If a juvenile court retains jurisdiction over the alleged victim, does the facility head or designee also report the allegation to the juvenile's attorney or other legal representative of record within 14 days of receiving the allegation?	yes
115.361 (f)	Staff and agency reporting duties	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes
115.362 (a)	Agency protection duties	
	When the agency learns that a resident is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the resident?	yes
115.363 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that a resident was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
	Does the head of the facility that received the allegation also notify the appropriate investigative agency?	yes
115.363 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes
115.363 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes
115.363 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes

115.364 (a)	Staff first responder duties	
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
115.364 (b)	Staff first responder duties	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
115.365 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?	yes
115.366 (a)	Preservation of ability to protect residents from contact with abusers	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with any residents pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
115.367 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all residents and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other residents or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.367 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures for residents or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations, such as housing changes or transfers for resident victims or abusers, removal of alleged staff or resident abusers from contact with victims, and emotional support services?	yes

115.371 (m)	Criminal and administrative agency investigations	
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115.381 (c)	Medicaid Use of M	

115.389 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.389 (d)	115.389 (d) Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.387 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	