**PREA AUDIT: AUDITOR’S SUMMARY REPORT**

**Juvenile Facilities**

Date report submitted: 11/13/2016

<table>
<thead>
<tr>
<th>Auditor Information</th>
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<tbody>
<tr>
<td>Auditor: James Roland</td>
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<td>Address: 11820 Parklawn Drive, Suite 240, Rockville, MD 20852</td>
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<td>Telephone number: 419-610-5668</td>
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<tr>
<td>Date of facility visit: November 1-2, 2016</td>
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<thead>
<tr>
<th>Facility Information</th>
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<tr>
<td>Facility Name: Starr Albion Prep</td>
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<tr>
<td>Facility Address: 13725 Starr Albion Prep Road Albion, MI 49224</td>
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<tr>
<td>Facility mailing address: (if different from above)</td>
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<tr>
<td>Telephone number: 517-629-5591</td>
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<tr>
<td>The facility is: ☑ Private not for profit</td>
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<tr>
<td>Facility Type: ☑ Detention</td>
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| Name of PREA Compliance Manager: Nathan Cox |
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| Telephone number: 517-630-2522 |

<table>
<thead>
<tr>
<th>Agency Information</th>
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<tbody>
<tr>
<td>Name of Agency: Juvenile Justice Programs (JPP)</td>
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<tr>
<td>Physical Address: 235 S. Grand Ave. Lansing, Mi. 48909</td>
</tr>
<tr>
<td>Governing authority or parent agency: Michigan Department of Human Services (DHS)</td>
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<tr>
<td>Physical address: 235 S. Grand Ave. Lansing, Mi. 48909</td>
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<td>Telephone number: 517-335-3489</td>
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<th>Agency Chief Executive Officer</th>
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<tr>
<th>Agency-Wide PREA Coordinator</th>
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<td>Telephone number: 517-648-6503</td>
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AUDIT FINDINGS

NARRATIVE:

The site visit for PREA audit of Starr Albion Prep was conducted on November 1-2, 2016 to determine compliance with the 2012 Prison Rape Elimination Act standards. During the audit, the auditor toured the facility and conducted formal staff and resident interviews. The auditor interviewed twenty-one (21) juveniles (eighteen (18) random juveniles from all of the housing units) and three (3) residents that self identified as either gay or bi-sexual. In addition, the auditor questioned 10 staff and youth specialists, (8 specialized staff and 2 random youth specialists), about PREA training, how to report, to whom to report, filing reports, available interventions, conducting interviews, evidence collection, follow up and monitoring retaliation. Specialized staff interviewed included the Director, PREA compliance manager, a medical staff member, two (2) Mental Health Group leaders, a Teacher Consultant and two (2) family services workers.

An entrance meeting was held with the following persons in attendance: the PREA Juvenile Compliance Coordinator, the PREA facility Manager and the Director.

There are currently one-hundred and thirty-four (134) juveniles assigned to the facility. Following the entrance meeting, I toured the facility. In the last calendar year, there were six (6) sexual assault/harassment allegation cases.
Starr Albion Prep is a staff secure residential facility operated by Sequel Youth and Family Services on the campus of Starr Albion Prep in Albion, MI. Programs are centered on a strength-based, client-centered, peer group empowerment model, where students are provided with opportunities to gain insight into their thinking and learn new problem solving and coping skills. The juvenile justice programs serve males and females ages 12-18 (must enter prior to 18th birthday but can remain until 21). The length of stay for residents averages 6-9 months, except in the sexual offender program where stays are typically 12-15 months.

Programming for males: Serving at-risk and delinquent males helps them to develop interpersonal problem-solving and cooperative-learning skills in a therapeutic group setting. The length of stay in the program varies by individual treatment needs. With strength-based practices, the program helps young men identify their strengths and capitalize on those abilities. Programming addresses different criminogenic factors dependent on youth needs and histories.

Sexually reactive programming works with young men that have sexually offended and are at moderate to high risk to re-offend. The length of the program varies depending on individual treatment needs. Group therapy allows young men to interact with other teens facing the same issues and helps them learn to take responsibility for their actions. The Pathways model is utilized for working with sexually aggressive youth. This model uses a restorative justice theme emphasizing concern for restitution, development of victim empathy and personal responsibility.

Substance abuse treatment utilizes the Intensive Seven Challenges specific program to help students to learn to make thoughtful, informed decisions about their substance abuse and redirecting their strengths into constructive behaviors. Youth placed in the residential substance abuse program have experienced court involvement and require a higher level of structure and security than a community-based program can adequately provide.

Starr Albion Prep subscribes to trauma-informed care treatment philosophies. Staff are trained in Structured Sensory Interventions (SITCAP) through the National Institute for Trauma & Loss in Children (NITLC) to help youth who have been subjected to traumatic life events. This provides youth with the opportunity to safely revisit and rework past trauma, beginning with sensory memories which youth have experienced and stored. The process is designed to support safety.

Aggression Replacement Training (ART) is delivered to all residents, in addition to social skills training and moral reasoning training.

The girls’ program at Starr Albion Prep places emphasis on small, personal experiences in their daily living and treatment milieu. The houses are designed to provide a home feel while providing a beautiful environment to better enable the healing process. Girls live, attend school and work in groups of 12-14. They eat meals home style, in a small dining room with food they learn to help prepare. They receive a minimum of 12 treatment sessions per week ranging from Trauma Focused-Cognitive Behavioral Therapy, DBT Informed Care and “Girls Circle”, delivered via group and individual sessions. “Girls Circle” meetings are conducted two times per week. These meetings integrate gender specific issues through activities such as role play modeling and journaling. Each student receives a minimum of 12 group and/or treatment sessions per week.
Residents of both genders receive psychiatric services as warranted through a board certified psychiatrist that provides medication management and evaluation as needed. Residents are enrolled in family therapy as identified by the referring agency in advance of the discharge plan. Identified students are involved in individual therapy for specific reasons including referrals and/or presenting need.

Recreation facilities include: An indoor in-ground Olympic size pool, racquetball courts, gymnasium, fitness center, outdoor track, a football field, a baseball field and basketball courts. There are hiking trails and fishing and canoeing on Montcalm Lake.
SUMMARY OF AUDIT FINDINGS:

An exit meeting was held with the following persons in attendance: the Director, the PREA Agency Compliance Manager, the PREA Compliance Coordinator and the PREA Compliance Manager.

Number of standards exceeded: 0
Number of standards met: 41
Number of standards not met: 0
Not Applicable: 0
§115.311 - Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

☐ Exceeds Standard (substantially exceeds requirement of standard)
☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

The Agency meets the standard with their policies and practice. Starr Albion PREP Policy Manual PREA clearly meets this standard. The facility PREA Plan states zero tolerance as required by the standard. In addition to the facility PREA Compliance Manager, the Agency also employs a fulltime PREA Agency Juvenile Compliance officer to ensure they are meeting all the PREA standards.

§115.312 - Contracting with other entities for the confinement of residents

☐ Exceeds Standard (substantially exceeds requirement of standard)
☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

As of March 2016, Michigan DHS licensed 55 juvenile justice programs, operating in 34 private facilities and 3 public facilities. All are required to comply with the PREA, as listed above. Michigan is engaging in its second cycle of PREA audits at this time. Sequel Youth Services has three juvenile justice contracts, all renewed in March 2016.

§115.313 – Supervision and Monitoring

☐ Exceeds Standard (substantially exceeds requirement of standard)
☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

The Director completes an annual review of the post audits and staffing plan. The Starr Albion PREP staffing plan states that they will adhere to direct care staff to youth ratios of 1:7 during waking hours and 1:20 during sleeping hours. After reviewing population logs for the last twelve months, the facility operated within the 1:8 ratio during waking hours and the 1:8 ratio during sleeping hours. Minimum ratios were met at all times except in the case of unforeseen and temporary circumstances. There are adequate resources to meet PREA and other confinement requirements. The review included an assessment of the facilities’ phone access and staffing levels. They do not operate below the critical post requirements. Documentation of unannounced rounds that cover all shifts was reviewed for compliance. The facility has no video monitoring technology.
§115.315 – Limits to Cross-Gender Viewing and Searches

☐ Exceeds Standard (substantially exceeds requirement of standard)
☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

Staff of the opposite gender are required to announce their presence when entering the resident housing unit(s) by stating “female and/or male on the unit”. This was documented during interviews with staff and juveniles, as well as recorded in housing unit log books. Starr Albion Prep policy F clearly meets this standard. There has been no cross gender strip or visual body cavity searches by non-medical staff in the past year. Staff have been trained on conducting pat-down searches of transgender and intersex inmates in a professional manner. Staff are restricted from pat searching residents.

§115.316 – Residents with Disabilities and residents who are Limited English Proficient

☐ Exceeds Standard (substantially exceeds requirement of standard)
☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

Not applicable. Starr Albion Prep receives no referrals that requires interpreters. Limited English speaking residents are outside of their intake grid. Residents with disabilities are not accepted at Starr Albion Prep.

§115.317 – Hiring and Promotion Decisions

☐ Exceeds Standard (substantially exceeds requirement of standard)
☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

Starr Albion Prep Policy Manual Employee Background Checks/Credentials Section H, #3 and #1 clearly meets this standard. All employees have had their criminal background check completed before hiring and are required to have them done again every 5 years. Two contractors have been employed by the facility in the past year. All had criminal backgrounds checks completed. Vendors do not have criminal background checks but are escorted and supervised when on institutional grounds. A tracking system is in place to ensure checks will be completed every five years.
There have been no facility video or audio upgrades in the last twelve months.

Starr PREA Policy Section H, #3 and #1 address this standard. The facility has a fulltime medical clinic for medical services. Forensic medical examinations are conducted off-grounds at the Oaklawn Hospital. All staff has been trained in evidence protocol. In the event of a sexual assault the shift supervisor is called, then the Director of Starr Albion Prep. The Director determines when the resident should be transported to the hospital for SAFE/SANE exam. The Department of Human Services (DHS) would provide for victim advocate services. The number is posted in each housing unit. All criminal investigations are conducted by the Calhoun Sheriff’s Department.

Starr Albion Prep PREA policy section 1, #1D was reviewed during the on-site inspection to verify the components were met. All investigations are done by the facility investigator and/or Calhoun Sheriff’s Department. There have been six (6) allegations of sexual abuse or sexual harassment in the past twelve months and the results are as follows:

1 unfounded incident of student-on-student Sexually Abusive Contact.
2 unsubstantiated incidents of student-on-student Sexually Abusive Contact.
1 substantiated incident of student-on-student Sexually Abusive Penetration.
1 substantiated incident of student-on-student Sexual Harassment.
1 substantiated incident of staff-on-student Sexual Misconduct.

A review of the files indicate that all investigations were completed in accordance with the standard.
### §115.331 – Employee Training

- ☑ Exceeds Standard (substantially exceeds requirement of standard)
- ☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- □ Does Not Meet Standard (requires corrective action)

Starr Albion Prep staff have been trained for PREA compliance. A review of all training curriculum insures that all of the components of this standard were addressed. All staff interviewed indicated that they received the required PREA training. All training records were reviewed for compliance. All records included employee signatures and dates.

### §115.332 – Volunteer and Contractor Training

- □ Exceeds Standard (substantially exceeds requirement of standard)
- ☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- □ Does Not Meet Standard (requires corrective action)

The PREA program coordinator has the responsibilities for training volunteers and contractors in PREA compliance. Training records were reviewed and found to be in compliance with the standard.

### §115.333 – Resident Education

- □ Exceeds Standard (substantially exceeds requirement of standard)
- ☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- □ Does Not Meet Standard (requires corrective action)

Starr Albion Prep PREA policy section F meets the requirements of this standard. At intake, juveniles receive PREA information in the youth orientation packet and also during their orientation to the facility by their counselor. Intake packets were reviewed for compliance. There are posters throughout the facility with the phone number to call to report an incident. These notices are also posted in each housing unit.
§115.334 – Specialized Training: Investigations

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

The preliminary gathering of information of suspected incidents is conducted by the associate director and forwarded to the Director of Starr Albion Prep. Criminal investigations are conducted outside of the facility by the Calhoun Sheriff's Department. There have been a total of six (6) incidents within the last twelve months.

§115.335 – Specialized training: Medical and mental health care

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Starr Albion Prep policy Section D, #2 meets the components of this standard. The facility has a full service clinic with a fulltime medical staff. All medical services are conducted both on-site and off-site. The medical and mental health staff have all received specialized training on victim identification, interviewing, reporting and interventions. Annual training documentation was reviewed and documented. All medical and mental health care staff have received PREA training.

§115.341 – Screening for Risk of Victimization and Abusiveness

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Starr Albion Prep PREA policy C, #5 includes all components required by this standard. Residents are assessed within 72 hours of their arrival. Interviews with the Director, Medical Clinic Supervisor, and two (2) Senior Group Clinicians for treatment services verified that there is a thorough system for collecting this information and providing continued re-assessment and follow-up services as needed.
§115.342 – Use of Screening Information

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Starr Albion Prep PREA policy C, #5 includes all components required by this standard. A review of the documents associated with intake screening procedures indicates the information from the risk screening is used to ensure the safety of each resident. Isolation is not used at Starr Albion Prep.

§115.351 – Resident Reporting

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Starr Albion Prep PREA policy Section G, J and #3 includes all components required by this standard. Staff and juvenile interviews clearly supported compliance to this standard. The procedures for reporting are clearly stated in the youth orientation packet, on posters and through Starr Albion Prep policy.

§115.352 – Exhaustion of Administrative Remedies

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Starr Albion Prep PREA policy section J,G and #6 covers the components of this standard. Zero grievances were filed last year that alleged sexual abuse. It was clear from interviews that preventing sexual assault in this facility is a responsibility that the personnel at Starr Albion Prep take extremely seriously.
§115.353 – Resident Access to Outside Confidential Support Services

□ Exceeds Standard (substantially exceeds requirement of standard)
☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (requires corrective action)

Presently Starr Albion Prep is in negotiations with outside support services for Confidential Support Services. Residents are provided emergency services and support through the facility. They also can have private conversations with their legal service provider and to their parents on visitation during the two allowed phone calls per week and during a monthly visitation.

§115.354 – Third-Party Reporting

□ Exceeds Standard (substantially exceeds requirement of standard)
☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (requires corrective action)

Information is made available through posters posted throughout the building with the Child Protective Services (CPS) toll-free number and other reporting options; the information is included in the Youth PREA Orientation and the information is listed on the DHS Website at http://michigan.gov/documents/dhs/PREA_Website_Info_Final_445753_7.pdf?20140211132725.

§115.361 – Staff and Agency Reporting Duties

□ Exceeds Standard (substantially exceeds requirement of standard)
☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (requires corrective action)

The Michigan Mandated Reporting Law and Shawono policies 512 and 560 includes all the components of this standard. The Mandated Reporter’s Resource Guide that includes a copy of the Child Protection Law is available online at: http://www.michigan.gov/documents/dhs/Pub-112_179456_7.pdf. This access was also verified through interviews with random staff.
### §115.362 – Agency Protection Duties

- □ Exceeds Standard (substantially exceeds requirement of standard)
- ☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- □ Does Not Meet Standard (requires corrective action)

Starr Albion Prep PREA policy section I meets the components of this standard. If a juvenile was at risk for sexual victimization, they could temporarily be placed in another cottage and/or transferred to another facility. There have been no residents placed in this status in the past twelve months. This was also verified through interviews with random staff.

### §115.363 – Reporting to Other Confinement Facilities

- □ Exceeds Standard (substantially exceeds requirement of standard)
- ☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- □ Does Not Meet Standard (requires corrective action)

Starr Albion Prep PREA policy I, #7 meets all the components of this standard. Compliance was also verified through interviews with the Director and PREA Coordinator. If a report is received alleging sexual abuse from another facility, the Director must report Director-to-Director to the other facility within 72 hours. Investigations are conducted by the Calhoun Sheriff’s Department. All incident reports must be completed before the end of the employees shift. The facility has received six (6) allegations of sexual abuse or harassment from another facility in the past twelve months.

### §115.364 – Staff First Responder Duties

- □ Exceeds Standard (substantially exceeds requirement of standard)
- ☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- □ Does Not Meet Standard (requires corrective action)

Starr Albion Prep PREA policy J, #1 includes all the components of this standard. All staff are trained in first responder duties. This was also verified through interviews with random staff and training records.
### §115.365 – Coordinated Response

- [ ] Exceeds Standard (substantially exceeds requirement of standard)
- [x] Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- [ ] Does Not Meet Standard (requires corrective action)

Starr Albion Prep policy PREA Coordinated Response Plan meets the components of this standard. Staff receiving a report of a sexual assault/rape or attempted sexual assault/rape or staff that become aware of sexual activity between residents or between a resident and staff, contractor, visitor or volunteer must immediately report this event to Supervision. The supervisor must immediately relay the report to the Site Director or manager-level designee. That administrator is responsible for notifying BCAL Michigan: DHS hotline 1-888-444-3911.

### §115.366 – Preservation of ability to protect residents from contact with abusers

- [ ] Exceeds Standard (substantially exceeds requirement of standard)
- [x] Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- [ ] Does Not Meet Standard (requires corrective action)

Starr Albion Prep is a non-union facility. There are no restrictions on protecting victims from abusers.

### §115.367 – Agency protection against retaliation

- [ ] Exceeds Standard (substantially exceeds requirement of standard)
- [x] Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- [ ] Does Not Meet Standard (requires corrective action)

Starr Albion Prep PREA policy I, #7 includes all components of this standard. All staff are required to monitor for retaliation. The Director, the Retaliation Monitor, the Administrative staff, and/or the Chairman of the Board of Trustees are required to monitor all allegations for a minimum of 90 days after they report of an incident.
§115.368 – Post-Allegation Protective Custody

☐ Exceeds Standard (substantially exceeds requirement of standard)
☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

Starr Albion Prep PREA policy C, #7 meets the components of this standard. Residents could temporarily be placed in another cottage unit. Youth could be transferred to the clinic but only as a last resort when other restrictive measures are inadequate to keep the youth safe from himself or other youth and only until an alternate means of keeping the youth can be arranged. Staff may not deny a youth otherwise under control access to daily largemuscle exercise and legally-required educational programming or special education services.

§115.371 – Criminal and Administrative Agency Investigations

☐ Exceeds Standard (substantially exceeds requirement of standard)
☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

Starr Albion Prep meets all of the components of this standard. During the last 12 months there have been six (6) allegations. The Calhoun Sheriff’s Department conduct all criminal investigations. Internal investigations are started by the supervisor, and then sent to the Director for additional investigation if it is so warranted.

§115.372 – Evidentiary Standard for Administrative Investigations

☐ Exceeds Standard (substantially exceeds requirement of standard)
☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

Starr Albion Prep PREA policy J meets the components of this standard. Appropriate measures are taken to protect the due process rights of the residents. There have been six (6) allegations within the last twelve months.
### §115.373 – Reporting to Residents

- □ Exceeds Standard (substantially exceeds requirement of standard)
- ☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- □ Does Not Meet Standard (requires corrective action)

Starr Albion Prep PREA policy G and#4-5 meets all of the components of this standard. There have been six (6) allegations within the last twelve months. The facility uses the Calhoun Sheriff’s Department for investigative services. Residents are informed of the investigative process. Decisions from investigations require that all allegations have a written response, including the rationale for the decision, to the youth or family member. Copies of all allegation decisions are maintained. Decisions are available to the victim’s family, Administration, Juvenile Justice Program (JJP), Bureau of Child and Adult Licensing (BCAL) and the referral service.

### §115.376 – Disciplinary sanctions for staff

- □ Exceeds Standard (substantially exceeds requirement of standard)
- ☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- □ Does Not Meet Standard (requires corrective action)

Starr Albion Prep policy Employee Progressive Discipline includes all the components of this standard. There has been one (1) allegation involving staff within the last twelve months. Disciplinary sanctions for rule violations are explained by Human Resources (HR) at Staff Orientation. All employee rules and sanctions are available to all employees through the facility intranet.

### §115.377 – Corrective action for contractors and volunteers

- □ Exceeds Standard (substantially exceeds requirement of standard)
- ☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- □ Does Not Meet Standard (requires corrective action)

Starr Albion Prep HR policies include all the components of this standard. Contractors are subject to all expectations as employees relative to contact with youth. Contractors may not continue to have contact with youth and will have contracts terminated upon any finding of child abuse or sexual abuse. There have been no incidents in the last twelve months. Vendors must read, understand and sign the zero tolerance PREA policy. All vendors who are unsupervised and/or are around residents are required to receive the same training as employees of the facility.
§115.378 – Disciplinary sanctions for residents

☐ Exceeds Standard (substantially exceeds requirement of standard)
☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

Starr Albion Prep PREA policy B, #2 meets all of the components of this standard. Appropriate measures must be taken to protect the due process rights of youth who are or who may be subject to discipline. This policy ensures youth are treated fairly under a consistent system of discipline that teaches and encourages appropriate behaviors and discourages inappropriate behaviors. The Youth Orientation Packet addresses all disciplinary sanctions for juvenile residents. The facility does not use isolation.

§115.381 – Medical and mental health screenings; history of sexual abuse

☐ Exceeds Standard (substantially exceeds requirement of standard)
☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

Starr Albion Prep PREA policy C, #1i meets the components of this standard. Youth are required to meet with medical and mental health practitioners per standard operating protocol for treatment. Treatment plans must be based on the youth’s assessed risk and assessment of the youth and family’s strengths and needs. The treatment needs of youth are identified and prioritized.

Through interviews with specialized staff, the facility has a thorough system for collecting this information and also has the capacity to provide continued re-assessment and follow-up services as needed. No resident disclosed prior victimization during screening. Additional screening is conducted by the group leader/therapist with the use of The Estimate of Risk of Addressed Sexual Offense Recidivism (ERASOR). All screening is kept in the resident permanent treatment file.
§115.382 – Access to emergency medical and mental health services

☐ Exceeds Standard (substantially exceeds requirement of standard)
☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

Starr Albion Prep PREA policy section H states that health services are provided to the residents at no cost to them. The facility provides timely, unimpeded access to free emergency medical and crisis intervention services. Referrals are made to Oaklawn Hospital, the Calhoun Sheriff’s Department and Child Protective Services (CPS).

§115.383 – Ongoing medical and mental health care for sexual abuse victims and abusers

☐ Exceeds Standard (substantially exceeds requirement of standard)
☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

The victim of sexual assault or attempted sexual assault must be provided mental health assistance and counseling as determined to be necessary and appropriate. Residents are sent to Oaklawn Hospital for treatment for sexually transmitted infections, if appropriate.

§115.386 – Sexual abuse incident reviews

☐ Exceeds Standard (substantially exceeds requirement of standard)
☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

Starr Albion Prep PREA policy I, #4, H meets the components of this standard. Facility management reviews each incident of sexual abuse for cause, staffing and physical barriers and makes recommendations for prevention and implementation of remedies. Interviews with the administrative team indicate that all incidents are reviewed and documented. The team includes the Director, Asst. Director and the PREA coordinator. There have been six (6) incidents in the last twelve months.
§115.387 – Data Collection

- ☑ Exceeds Standard (substantially exceeds requirement of standard)
- ☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- ☐ Does Not Meet Standard (requires corrective action)

Data collection is an agency policy and Starr Albion Prep PREA policy I, #8 addresses the components of the standard. The standardized instrument used is the Survey of Sexual Violence as developed and utilized by the Bureau of Justice Assistance. Data is collected, aggregated and published on the agency (DHS) Website for all public residential facilities and all private facilities that contract with the state to provide juvenile justice residential services. The most recent data published is from calendar year 2015. Data from calendar year 2016 will be collected and published in the summer of 2017. Data collection at the facility is the responsibility of the Vice President of Research and Development (See: http://www.michigan.gov/dhs/0,4562,7-124-5453_34044_39057--,00.html).

§115.388 – Data Review for Corrective Action

- ☑ Exceeds Standard (substantially exceeds requirement of standard)
- ☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- ☐ Does Not Meet Standard (requires corrective action)

Data was collected for the 2015 calendar year, aggregated and posted to the public. In addition to that, data information of activities and compliance status was included in that report. This report was prepared for the Director of DHS to move forward with the PREA. This report recommended that the Governor sign for assurance and also listed general recommendations for achieving full compliance. Specifically, the 2016 data is being collected to compare with the 2015 data. Once this is collected, it will be analyzed and compared with the previous year's data. Recommendations will be made from this comparison.


§§115.389 – Data Storage, Publication, and Destruction

☐ Exceeds Standard (substantially exceeds requirement of standard)
☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

Starr Albion Prep PREA policy I, #8 and MDHHS Umbrella policy #560, page 6-7 meet the components of this standard. This data management occurs annually as administered by the Agency (DHS). Data collected is aggregated and published on the DHS Website. See link http://michigan.gov/documents/dhs/PREA_Website_Info_Final_445753_7.pdf?20140211132725.

AUDITOR CERTIFICATION:

The auditor certifies that the contents of the report are accurate to the best of his/her knowledge and no conflict of interest exists with respect to his or her ability to conduct an audit of the agency under review.

James L. Roland, Jr.

11/13/2016