

Peer I
PREA ALLEGATION SUMMARY REPORT
2012-2014

Submitted by: Barbara Sanchez, PREA Coordinator

YEAR 2012

Total Number of Allegations: 0
Number of Substantiated Allegations: 0
Number of Unsubstantiated Allegations: 0
Number of Unfounded Allegations: 0

Allegations Breakdown: By Facility

Motivation House: 0
Dedication House: 0
Inspiration House: 0
Investment House: 0
Identified Vulnerabilities: None
Corrective Action: None

Year One Assessment

Implementation of PREA Standards for Community Confinement agencies, pursuant to Colorado Community Corrections Standards, began in June 2012. Peer I has an existing zero tolerance practice, which has been in place since its inception in 1977. The agency does not have a history of client sexual abuse, and will continue to ensure employees are trained on PREA standards, policies, and procedures are reviewed and updated on an ongoing basis, and clients are informed of their rights, options pertaining to sexual assault, sexual abuse, sexual harassment, and/or retaliation. The Director is responsible for addressing all PREA related concerns. Facility Director Ken Gaipa participated in multiple trainings throughout the year, and conducted training for clients regarding PREA on 4/24/2012 for 2 hours and also on 10/9/2012 for 2 hours. He led training on PREA for facility employees on 5/30/2012. Participation in these training sessions is retained in individual and aggregate staff training logs and in the PREA Coordinator's binder.

YEAR 2013

Total Number of Allegations: 1
Number of Substantiated Allegations: 1
Number of Unsubstantiated Allegations: 0
Number of Unfounded Allegations: 0

Allegations Breakdown: By Facility

Motivation House: 1
Dedication House: 0
Inspiration House: 0
Investment House: 0
Identified Vulnerabilities: 1
Corrective Action: 1

Year Two Assessment

Motivation House-1

- **Incident:** Client-to-client: Substantiated. On July 28, 2013, Client "A" reported that Client "B" had been "playing sexual games" with him by brushing up against his buttocks (twice) and also slapping him on the buttocks. Client "A" stated that this made him uncomfortable. When investigated, it was determined that Client "B" had also done this type of behavior (touching, rubbing and "blowing kisses into another client's ear" with 3 other clients. Client "B" admitted to this behavior, but said that it was "only playing prison games" and that he knew it was "stupid". Client "B" was returned to custody on July 29, 2013. The incident was reported to the DOC liaison, as well as the Denver Police Department Sex Crimes Unit, who took statements from the staff and clients (videotaped) involved. The statements were submitted to the District Attorney by the Denver Police Department. Client B was charged with "Unlawful Sexual Conduct" (a misdemeanor offense).
- **Identified vulnerabilities:** The incidents reported occurred in the kitchen at Motivation House, in the presence of other clients. This area is normally monitored every two hours.
- **Corrective Action:** Increase monitoring to a minimum of every hour.

Peer I continues to provide staff training regarding PREA Standards and Program Director Ken Gaipa held these staff PREA trainings on 3/27/2013 and 10/23/2013. PREA training for clients was conducted on 7/16/2013. Additionally, staff received trainings to competently address the needs of the population served by Peer I, including trainings on numerous topics which relate to Cultural Sensitivity, Sexual Harassment, etc.

Policies pursuant to the PREA Standards were drafted during the year, and went into effect on August 1, 2013. Further refinement continued throughout the year, with review of all policies in December 2013. Ken Gaipa, Program Director, continues to serve in the role of PREA Coordinator, and leads all staff trainings during this time.

In order to standardize the screening of residents for risk of victimization or predation, Peer I began using the "DCJ Victim/Predator Screening" document in July 2013. Also, in July of 2013, Peer I standardized its resident education practices through the use of the "Client Acknowledgement of Sexually Prohibited Behavior" form and an educational video.

YEAR 2014

Total Number of Allegations: 0
Number of Substantiated Allegations: 0
Number of Unsubstantiated Allegations: 0
Number of Unfounded Allegations: 0

Allegations Breakdown: By Facility

Motivation House: 0
Dedication House: 0
Inspiration House: 0
Investment House: 0
Identified Vulnerabilities: None
Corrective Action: None

Year Three Assessment

Peer I hired Barbara Sanchez as PREA Coordinator on August 15, 2014. The assignment of this staff member to this position allows Peer I program to increase compliance with the spirit of the PREA Standard 115.211(b)2 & 3. Further revision and refinement of policies and procedures occurred.

Resident screening and education efforts have been refined and increased from previous years. Additionally, grievance processes and PREA guidelines were increasingly integrated into culture. Program Director Ken Gaipa conducted PREA training for clients on 2/25/2014. The PREA Coordinator conducted PREA training for clients on 10/21/14 and 12/30/2014. The PREA Coordinator also trained staff regarding PREA on 9/14/2014 and 10/29/2014. Peer I worked to increase information available in the milieus by purchasing informational posters with PREA reporting information on them. Educational videos were also made available in Spanish for residents who may prefer to watch the video in that language. PREA information, including "Facts You Should Know" and a set of PREA comic books were placed in each residential house in common rooms which clients use. Each residential house was also given a copy of all of the PREA Standards, kept in the staff offices.

Peer I began using an electronic health record system in October of 2014. This system increased staff's ability to locate Victim/Predator Screening data for the residents with whom they work, in order to provide better planning around housing assignments, work assignments and other security planning.

Peer I worked with Denver Health Medical Center and The Blue Bench to begin the process of securing MOU's with them.