1.3.E.6  PREA Response and Investigation of Sexual Abuse/Harassment

I Policy Index:

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II Policy:

The South Dakota Department of Corrections (DOC) has a zero-tolerance policy relating to sexual abuse or harassment of an inmate. The DOC will cooperate in the investigation and prosecution of anyone involved in a sexual abuse of an inmate, including those housed in a DOC facility or other approved placement. This policy will be followed in conjunction with DOC policy 1.1.C.3 Staff Reporting Abuse or Neglect and other mandatory reporting requirements of the department. This policy is not intended to govern incidents of sexual abuse by an inmate against an employee, visitor, volunteer or any other individual who has business with the DOC.

III Definitions:

Consensual Sexual Act:  
All participants of the sexual act are inmates and consented to participate without being coerced, under any type of threat or force, or in fear of retaliation.

Facility:  
Refers to individual inmate housing locations and campuses within the South Dakota DOC. The facilities are:
  - South Dakota State Penitentiary (including Jameson Prison Annex)
  - Sioux Falls Community Work Center
  - Mike Durfee State Prison
  - Yankton Community Work Center
  - Rapid City Community Work Center
  - South Dakota Women’s Prison (including Unit E and the PACT House)
  - Pierre Community Work Center

Non-Consensual Sexual Act:  
The inmate sexual contact was unwanted, coerced, or committed under threat of any type of force or retaliation by another inmate; or any sexual contact with staff.
PREA:
The Prison Rape Elimination Act of 2003 was enacted by Congress to ensure inmates in the custody of correctional agencies in the United States are protected from sexual abuse and sexual harassment perpetrated by other inmates and agency staff.

Rape Crisis Center
For the purpose of this policy, a rape crisis center refers to an entity that provides intervention and related assistance, such as:

- 24-hour hotline services providing crisis intervention services and referral;
- Accompaniment and advocacy through medical, criminal justice, and institutional support systems, including medical facilities, investigative and court proceedings;
- Crisis intervention, short-term individual and comprehensive service coordination and supervision to assist sexual abuse victims;
- Information and referral to assist the sexual abuse victim;
- Development and distribution of materials on issues related to services available.

Sexual Abuse-Inmate on Inmate:
Sexual abuse of an inmate by another inmate; which includes any of the following acts if the victim does not consent, is coerced into such an act by overt or implied threats of violence, or is unable to consent or refuse (See Inmate Living Guide):

1. Contact between the penis and the vulva or the penis and the anus, including penetration, however slight;
2. Contact between the mouth and the penis, vulva, or anus;
3. Penetration of the anal or genital opening of another person, however slight, by a hand, finger, object, or other instrument; and
4. Any other intentional touching, either directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or the buttocks of another person, excluding contact incidental to a physical altercation.

Sexual Abuse-Staff on Inmate:
Sexual abuse of an inmate by a staff member, volunteer or contractor. Includes any of the following acts with or without the consent of the inmate:

1. Contact between the penis and the vulva or the penis and the anus, including penetration, however slight;
2. Contact between the mouth and the penis, vulva, or anus;
3. Contact between the mouth and any body part where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
4. Penetration of the anal or genital opening, however slight, by a hand, finger, object, or other instrument, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
5. Any other intentional contact, either directly or through the clothing, of or with the genitalia, anus, groin, breast, inner thigh, or the buttocks, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
6. Any attempt, threat, or request by a staff member, contractor, or volunteer to engage in the activities described in paragraphs (1)-(5) of this section;
7. Any display by a staff member, contractor, or volunteer of his or her uncovered genitalia, buttocks, or breast in the presence of an inmate, and
8. Voyeurism by a staff member, contractor, or volunteer.
Voyeurism by a staff member, contractor, or volunteer means an invasion of privacy of an inmate by staff for reasons unrelated to official duties, such as peering at an inmate who is using a toilet in his or her cell to perform bodily functions; requiring an inmate to expose his or her buttocks, genitals, or breasts; or taking images of all or part of an inmate’s naked body or of an inmate performing bodily functions, either physically or via security cameras.

**Sexual Harassment-Inmate on Inmate:**
Repeated and unwelcome sexual advances, requests for sexual favors, verbal comments, gestures or actions of a derogatory or offensive sexual nature by one inmate directed toward another inmate (See Inmate Living Guide).

**Sexual Harassment-Staff on Inmate:**
Repeated verbal comments or gestures of a sexual nature to an inmate by a staff member, contractor, or volunteer, including demeaning references to gender, sexually suggestive or derogatory comments about body or clothing, or obscene language or gestures.

**Staff Member:**
For the purposes of this policy, a staff member is any person employed by the DOC, full or part time, including an individual under contract assigned to the DOC, an employee of another State agency assigned to the DOC, authorized volunteers and student interns.

**Note:**
The terms “Sexual Abuse or Sexual Harassment do not include:

- Custodial or medical personnel gathering physical evidence or engaging in other legitimate medical treatment
- The use of a health care provider’s hands or fingers or medical devices in the course of appropriate medical treatment
- The use of a health care provider’s hands or fingers and the use of instruments to perform body cavity searches. This exemption is contingent upon the search being conducted in a manner consistent with constitutional requirements and DOC policy 1.3.A.5 Searches - Institutions.
- Consensual sexual contact/activity between inmates. Although, this type of behavior is prohibited (See Inmate Living Guide).

**IV Procedures:**

1. **Response:**
   
   A. **Staff Duties**
      
      1. Complaints or information provided to staff describing risk of sexual abuse of an inmate or information that an inmate is the victim of sexual abuse while in the DOC facility requires prompt action by the staff member receiving the complaint or information.
      
      2. Upon learning such information/receiving the complaint or information, the staff member will promptly report the complaint or information to the Officer in Charge (OIC) or his/her supervisor. If a staff member witnesses sexual abuse or attempted sexual abuse of an inmate, he/she will directly report the information to the OIC or his/her supervisor. Report “directly” means the reporting staff member must speak directly to the OIC or supervisor by radio, telephone or in person.
a. The staff member witnessing the incident will separate the victim and abuser.

b. The OIC or supervisor will gather information and evidence and document the incident on the Sexual Incident Checklist: Officer in Charge form (See Attachment 1). The incident will be reported directly to the Special Investigation Unit (SIU).
   1) The completed Checklist will be forwarded to the Special Investigations Unit, along with all relevant reports, evidence and information by the end of the shift when the incident was initially reported or discovered.
   2) The Special Investigations Unit is responsible for the preliminary investigation into the incident.

3. Staff will preserve and protect any potential crime scene and evidence, in accordance with policy and approved practices, procedures and directives until appropriate steps can be taken to process the scene and collect evidence.
   a. The chain of custody of evidence will be recorded and preserved, in accordance with all applicable DOC policies, institutional operational memorandums (OMs) and correctional best practice.
   b. If the sexual abuse occurred within a time period that allows for the collection of physical evidence, including forensic evidence, staff will ensure the alleged abuser does not take any actions that could destroy physical evidence; including as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, drinking or eating.
   c. Staff first responding to the scene/incident shall remain in the presence of the inmate(s) involved and instruct the inmate not to take any actions that could destroy potential physical evidence.

4. Inmates committing sexual abuse may be placed in disciplinary housing under Investigative Purpose (IP) to allow staff to fully investigate the incident (See DOC policy 1.3.D.1 Disciplinary Housing).

   a. Inmates making a complaint of sexual abuse to staff, or who notify staff they believe they are at risk of sexual abuse, shall be notified within 5 calendar days of staff’s response to their complaint or risk concerns. Responses include, but are not limited to:
      1) Proceeding with a sexual incident investigation.
      2) Continuing with separation or monitoring of those involved.
      3) A finding based upon available evidence and information that there is insufficient reason to continue an investigation or proceed with or continue separation or monitoring.

   b. Inmates are subject to disciplinary action for filing a false claim of sexual abuse or providing false testimony alleging sexual abuse has occurred (See Inmate Living Guide).

5. All staff with information regarding an incident of sexual abuse or attempted sexual abuse/threat of sexual abuse of an inmate must document the information in COMS: Incident Report.
B. Medical Response

1. Health Service response.
   a. Victims of sexual abuse will receive timely, unimpeded access to medical treatment and crisis intervention services; the nature and scope of which shall be determined by Health Services and Behavioral Health Services staff, consistent with professional judgment and best practices (See DOH policy P-F-06 Response to Sexual Abuse and DOC policy 1.4.E.1 Health Care Services for Offenders).

   b. Health Services staff will examine and provide for emergent medical needs of victims of sexual abuse. Health Service staff will not collect forensic evidence from the inmate. Inmates will be transported to an appropriate outside medical provider to facilitate the collection of any forensic evidence (See DOH policy P-G-04 Therapeutic Relationship, Forensic Information, and Disciplinary Actions).

2. When not contraindicated by the inmate’s welfare, preservation and collection of forensic evidence shall be performed by a qualified medical provider.
   a. If staff determine the alleged sexual abuse occurred less than one hundred and twenty hours prior to staff becoming aware of the incident, and there is reason/evidence to suggest the alleged sexual activity was not consensual, staff will:
      1) With consent from the victim, make arrangements to immediately transport the victim to the nearest hospital or emergency room equipped to administer a sexual assault forensic exam (rape kit), consistent with DOC policy 1.3.A.7 Inmate Transport & Escort.

   b. If staff determine the alleged sexual abuse occurred more than one hundred and twenty hours prior to becoming aware of the incident, and there is reason/evidence to suggest the alleged sexual activity was not consensual:
      1) Special Investigations Unit staff will investigate the incident, including interviewing those involved to determine the status of any potential physical evidence. If it is determined some evidence may be present, the victim will be provided the opportunity to consent to the administration of a sexual assault forensic exam, which shall be conducted by qualified outside medical provider.

   c. Sexual assault examinations shall be performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) when and where possible. If SAFEs or SANEs cannot be made available, the examination may be performed by other qualified medical practitioners. The DOC will document its efforts to identify and access SAFEs or SANEs within proximity to each DOC facility housing inmates.

3. Responsive services will be provided without financial cost (including medical co-payment) to the victim (See DOC policy 1.4.E.10 Medical Services Copayments). If convicted or upon entering a plea of guilt, the inmate abuser may be assessed the cost of the victim’s medical examination, as set by the physician, hospital, clinic or Health Services (See SDCL § 22-22-26).
a. Inmates who intentionally make a false claim of a sexual abuse which results in medical costs/fees, may be assessed the respective medical co-payment for services received (See DOC policy 1.4.E.10 Medical Services Copayments).

4. Ongoing Medical Care

a. Health Services and Behavioral Health Services will offer evaluation, testing and treatment as determined appropriate, to inmates in DOC custody who are victims of sexual abuse while in any DOC facility, jail, contract facility or juvenile facility.

b. The evaluation, testing and treatment of victims will include, as appropriate, follow-up services, treatment plans, and when necessary, referrals for continued care following transfer to, or placement at other facilities.

c. Victims shall be offered medical and mental health services consistent with the level of care and services typically provided to sexual abuse victims in the community.

d. Victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests.

e. If pregnancy results from the sexual abuse, the victim shall receive timely and comprehensive information about available medical services and access to all lawful and licensed pregnancy medical services.

f. Victims of sexual abuse will be offered tests for sexually transmitted infections/disease (STDs) as deemed medically appropriate, and in accordance with state statutes regarding the rights of victims and alleged perpetrator (See SDCL § 23A-35B-4 and DOC policy 1.4.E.8 Blood-Borne Pathogens and Infectious Disease Management).

g. Treatment services, testing and follow-up care will be provided to victims by Health Services staff without financial cost to the victim, and regardless of whether the victim names the abuser/perpetrator or cooperates with the investigation arising out of the incident.

h. As deemed appropriate by Sex Offender Management Program staff, a mental health evaluation will be offered to all known inmate-on-inmate abusers within 60 days of staff learning of such abuse. Programming and treatment may be offered, depending on the inmate’s release date (See DOC policies 1.4.B.3 Sex Offender Management Program and 1.4.B.9 Sexual Behavior Issue Review).

C. Victim Advocates

1. The facility will make available to the victim, an advocate from a rape crisis center. If a rape crisis center is not available to provide victim advocate services, the facility will work to ensure qualified staff from a community-based organization or agency that is available to offer victim advocate services. The facility will document efforts to secure such services (See DOC policy 1.3.E.5 PREA Compliance with Prison Rape Elimination Act Standards).

2. As requested by the victim, the advocate, qualified DOC staff or qualified community-based organization staff member, may accompany and support the victim through the
medical examination process, testing and investigatory interviews to provide emotional support, crisis intervention, information, and referral to the inmate victim.

2. Investigations:

A. Allegations

1. All allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, will be promptly, thoroughly, and objectively investigated by designated staff, including but not limited to SIU staff.

2. After notification of an allegation of possible sexual abuse or sexual harassment, staff will create a Reportable Incident Recording in COMS (See Attachment 2) and use this form to track progress of the investigation. While the investigation is on-going, the status of the incident will show as “Pending” until the investigator has reached a determination.

3. If the alleged victim chooses not to provide information or participate in the investigation, staff will document this information on the PREA Sexual Abuse Victim Preference form (See Attachment 4).

4. If a staff member is the alleged perpetrator of a sexual abuse, the respective Warden will be notified immediately.
   a. The Warden or his/her designee will initiate reporting in accordance with DOC policy 1.1.A.3 Staff Reporting Information to DOC Administration and Office of Risk Management.
   b. The Warden or Secretary of Corrections, at his/her discretion, may take any or all of the following action(s) against a staff member:
      1) Disciplinary action, including and up to termination.
      2) Ban the person from being on the premises of the facility or any DOC facility.
      3) Ban the person from having any telephone, written or electronic contact with the victim.
      4) Ban the person from having contact with other staff or discussing the incident with anyone but their attorney.

B. Corrections Protocol for Responding to Sexual Abuse.

1. Staff will gather and preserve direct and circumstantial evidence, including physical evidence, DNA or forensic evidence and any electronic monitoring (evidence obtained through the telephone or messaging system or surveillance camera footage). Staff will interview victims, perpetrators and witnesses. Staff will review any prior complaints or reports of sexual abuse involving the suspected perpetrator or victim.

2. In accordance with state law, if the sexual assault kit evidence is released to the DOC by the health care facility performing the examination, Special Investigation Unit staff will follow standard protocol for handling evidence and ensure the evidence is submitted to the Division of Criminal Investigations (DCI) within fourteen days of receipt.

3. The credibility of a victim, perpetrator and witnesses will be assessed on an individual, case-by-case basis and will not be determined by the person’s status, i.e. inmate, staff, citizen. Inmates alleging sexual abuse are not required to submit to a polygraph
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examination or other truth-telling device as a condition for the department to proceed with investigation of the incident.

4. The DOC staff will follow the Sexual Incident Protocol and Reference Book (See Attachment 5) when responding to and coordinating actions taken in response to an incident of sexual abuse.

C. Administrative investigations

1. The Special Investigations Unit will investigate all reports of sexual incidents involving inmates to determine (See Attachment 2) the following:
   a. If a reported sexual incident was an act of sexual abuse or sexual harassment.
   b. If the reported sexual incident was consensual inmate-with-inmate. This is a violation of institutional rules but may not be a case of sexual abuse.
   c. If the reported sexual incident was non-consensual and inmate-with-inmate. This is a violation of institutional rules and may be a case of sexual abuse. These cases may be referred to DCI for investigation.
   d. If the reported incident involved a sexual act between staff or other person employed within a correctional facility and an inmate. All such cases are considered non-consensual and shall be referred to DCI for investigation and possible prosecution (See SDCL § 24-1-26.1).

2. In addition, the Special Investigations Unit (SIU) or DCI will determine if the reported sexual act was:
   a. Substantiated – The investigation & evidence indicate that the incident did happen.
   b. Unsubstantiated – Insufficient evidence to determine an outcome or positive finding.
   c. Unfounded – The investigation and evidence indicate the incident did not happen.
   d. Informational – Information does not contain an identified victim, or the incident was determined to be a consensual act between inmates.

3. SIU will impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.

4. The Special Investigations Unit will refer incidents involving possible criminal violations to the DCI.

5. The Special Investigations Unit will give a monthly update on all pending investigations during the SI Review meeting.

6. Within seven (7) calendar days of the conclusion of all sexual abuse investigations, SIU will send copies of the completed PREA Sexual Incident Checklist - Officer in Charge (See Attachment 1), COMS Reportable Incident Recording (See Attachment 2) and disciplinary reports to the facility PREA Compliance Manager and PREA Coordinator.
a. SIU will maintain documentation that the investigation is concluded and its findings, i.e. consensual, unfounded, informational, etc. COMS Reportable Incident inquiry is used to track these results.
   1) Documentation shall include any staff actions, policies, directives, procedures, protocols, etc. or if staffs’ failure to act may have contributed to the sexual abuse incident; and
   2) Written reports that include a description of the physical and testimonial evidence, reasoning behind credibility assessments, and investigative facts and findings.

7. SIU will ensure any written reports/files or evidence under its control and authority is kept in a secure location and not accessible to unauthorized persons. Reports/files and evidence related to sexual abuse incidents shall be retained for as long as the alleged abuser is incarcerated. If the incident involves a staff member, the report/file shall be retained for as long as the staff member is employed by the DOC, plus five years.

8. The sharing of confidential information pertaining to a sexual abuse incident shall be limited to those who must know. Sharing information regarding the victim or incident shall be conducted in a manner that is in accordance with all applicable policies, statutes regarding confidentiality, victim rights, and professional licensure and ethics standards.

9. The departure of the abuser or victim from employment or custody will not be used as the basis for terminating an active investigation into a sexual abuse incident.

D. Criminal Referrals

1. The DCI will oversee the investigation of all reported sexual abuse determined by staff to possibly include criminal conduct. The chain of custody of evidence shall be recorded and preserved.
   a. The DCI, in consultation with the respective Warden, will determine if criminal charges will be filed.
      1) Substantiated allegations of conduct that appear to be criminal will be referred for prosecution.

b. If criminal charges are filed, DCI will coordinate the prosecution with the Attorney General’s Office and/or local county States Attorney office.

c. Staff members must cooperate with the investigation.
   1) When the quality of evidence appears to support criminal prosecution, SIU staff will conduct compelled interviews only after consulting with DCI or prosecutors to determine if compelled interviews may be an obstacle for subsequent criminal prosecution.
   2) Facility staff will cooperate fully with DCI investigators. SIU shall remain informed about the progress of the investigation.
   3) Criminal investigations will be documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attaches copies of all documentary evidence, where feasible.
3. Reaction to Incidents:

A. Protective Custody

1. Inmates determined to be at high risk for sexual victimization through completion of the PREA assessment or those who are alleged to have suffered from sexual abuse in the facility will not be placed in involuntary protective custody, unless an assessment of all available alternatives has been made and a determination has been made that there is no available alternative means of separation from likely abusers. Such placement shall be temporary until suitable housing can be identified. If an assessment cannot be conducted immediately, the inmate may be held in involuntary protective custody for a period not to exceed twenty-four (24) hours while the assessment is completed.

2. Inmates placed in protective custody shall have access to approved programs, privileges, education, and work opportunities, as provided to inmates of the same classification. If the inmate’s access to approved programs, privileges, education, or work opportunities are restricted, staff shall document:
   a. The opportunities that have been limited;
   b. The duration of the limitation; and
   c. The reasons for such limitations.

3. Inmates shall be assigned to involuntary protective custody status only until an alternative means of separation from likely abusers can be arranged, consistent with the inmate’s classification/risk and housing and programming needs. Temporary assignment shall not exceed thirty (30) days without extension by the Warden.

4. If an inmate is assigned to involuntary protective custody status pursuant to paragraph (a) of this section, staff shall clearly document:
   a. The basis for staff’s concern for the inmate’s safety; and
   b. The reason why no alternative means of separation can be arranged.

5. At a minimum, staff shall afford each inmate on involuntary protective custody a status review every thirty (30) days. The purpose of the review is to determine whether there is a continuing need for the inmate’s separation from the general population and to verify no other less restrictive housing options can be identified. Each facility with protective custody status inmates shall maintain an operational memorandum that includes documentation requirements, hearing procedures and identify staff who will direct the review.
   a. The inmate may appeal the findings of the review/decision of the Protective Custody Hearing Board through the Administrative Remedy process (See DOC policy 1.3.E.2 Administrative Remedy for Inmates).

B. Reporting to Inmates

1. Following an investigation into an inmate’s allegation he/she suffered sexual abuse or sexual harassment in a DOC facility, SIU staff or staff designated by the Warden, will inform the inmate as to results of the investigation into the allegation. Information shared with the inmate shall not jeopardize the legitimate penological interests of the DOC.
1. Sexual abuse and sexual harassment victim notifications shall be documented in the PREA investigation packet and scanned into COMS under Offenses in custody: / scanned prea information.

b. In addition, sexual abuse victim notifications shall also include a written notice to the alleged victim (See Attachment 6: Notice of PREA Investigation Determination form).

2. If SIU did not conduct the investigation, SIU will request the relevant information/results of the investigation from the respective investigative agency (usually DCI).

3. If the incident involves a staff member committing sexual abuse against an inmate, staff will inform the inmate whenever:
   a. The staff member is no longer assigned to a post on the inmate’s unit.
   b. The staff member is no longer employed at the facility where the inmate is housed.
   c. The staff member has been indicted on a charge related to sexual abuse within the facility.
   d. The staff member has been convicted of a charge related to sexual abuse within the facility.

4. In the case of sexual abuse involving a staff member, DOC policy 1.1.C.13 Screening of Staff Volunteers and Contractors for Prior Sexual Abuse shall apply.

5. If another inmate committed the sexual abuse against an inmate, and the victim is housed in the same facility as the abuser, staff shall inform the victim whenever:
   a. Staff learns the alleged abuser has been indicted on a charge related to sexual abuse within the facility.
   b. Staff learns the alleged abuser has been convicted on a charge related to sexual abuse within the facility.

6. All such notifications shall be conducted in a timely manner and documented in the SIU PREA investigation packet by the Special Investigations Unit.

C. Protection Against Retaliation

1. At the completion of the investigation, the Special Investigations Unit will complete the initial protection measures and contact the PREA Compliance Manager for information and follow-up. All such initial monitoring and status checks will be documented on the COMS Reportable Incident Recording (See Attachment 2) by the Special Investigations Unit.

   a. The monitoring shall begin immediately after an allegation of sexual abuse or staff on inmate sexual harassment incidents are made and will terminate if the allegation is determined by investigation to be unfounded by the PREA Compliance Manager.

   b. Special Investigations Unit shall investigate and response to all reports of retaliation.

      1) The Special Investigations Unit investigator will document the retaliation investigation on a Special Investigations Incident Report (See Attachment 7: Special Investigations Unit: Incident Report).
2) The Special Investigations Unit investigator shall provide a copy of the retaliation investigation to the PREA Compliance Manager for inclusion in the retaliation status checklist.

2. For a minimum of 90 days following the report of the alleged sexual abuse or staff on inmate sexual harassment incidents, the facility PREA Compliance Manager shall monitor inmates or staff who report sexual abuse or staff on inmate sexual harassment. Monitoring shall be documented on the PREA Retaliation Status Checklist (See Attachment 3) and when monitoring is completed, the checklist will be added to the PREA Reportable Incident Packet.
   
   a. Reports of retaliation by either staff or inmates will be reported directly to the Special Investigations Unit for investigation.
   
   b. Staff shall take appropriate measures to protect inmates against retaliation, including:
      1) Changes in unit or facility housing assignments for victims or abusers;
      2) Removal of alleged staff or inmate abusers from contact with victims; and
      3) Providing victims information and free and confidential access to emotional support services

D. Disciplinary Sanctions for Inmates
   
   1. Inmates found guilty through an administrative finding or engaging in inmate-on-inmate sexual abuse or engaging in a consensual act are subject to disciplinary sanctions, pursuant to DOC policy 1.3.C.2 Inmate Discipline System and SDCL § 24-2-9.
   
   2. Sanctions will be commensurate with the nature and circumstances of the violation committed, the inmate’s disciplinary history, and sanctions imposed for comparable offenses committed by inmates with similar histories.
   
   3. The Disciplinary Hearing Officer or Unit Disciplinary Committee will consider whether an inmate’s mental disabilities or mental illness may have contributed to his/her behavior, and if so, consult with Behavioral Health Services about an appropriate response. Behavioral Health staff may administer a Behavioral Health assessment to help determine the inmate’s level of functioning.
   
   4. If therapy, counseling or other interventions designed to address and correct underlying reasons or motivations for sexual abuse are available, Behavioral Health Services may recommend the inmate participate in such interventions.
   
   5. For the purpose of disciplinary action, a report of sexual abuse made in good faith by an inmate which is based upon a reasonable belief the alleged conduct occurred, shall not constitute false reporting of an incident and shall not result in the inmate being charged with Offense in Custody L-42.
   
   6. An inmate report of sexual abuse made in bad faith or containing falsified information or untruths be responded to with disciplinary action.

E. Disciplinary Sanctions for Staff, Volunteers or Contractors
   
   1. If a person employed by the state or person employed within a correctional facility engages in an act of sexual penetration with an inmate who is in custody and under the custodial, supervisory or disciplinary authority of the person (See SDCL § 24-1-26.1), the person is guilty of a Class 6 felony, which is punishable by a maximum term of
imprisonment of up to two (2) years in the state penitentiary or a fine of four thousand dollars ($4000) or both (See SDCL § 22-6-1).

2. Staff who commit sexual abuse of sexual harassment may be considered to be in violation of DOC policy 1.1.C.10 Staff Anti-Harassment and Discrimination Policy, DOC policy 1.1.C.1 Staff Code of Ethics and DOC policy 1.1.C.2 Staff Supervision of Offenders, in addition to other applicable state statutes and policies (BHR Handbook), and may be subject to disciplinary action, up to and including termination of employment.

a. Termination shall be the presumptive disciplinary sanction for staff found to have engaged in sexual abuse of an inmate or engaged in sexual contact with an inmate.

3. Disciplinary sanctions for persons violating DOC policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse), shall be commensurate with the nature and circumstances of the acts committed, the person’s disciplinary history, and the sanctions imposed for comparable offenses by others with similar histories.

4. All terminations for violation or resignation in lieu of termination for committing sexual abuse of an inmate or having sexual contact with an inmate shall be reported to DCI and to any relevant licensing bodies, unless the activity is determined not to be criminal.

5. Any staff member or contractor or volunteer who is found to have engaged in sexual abuse or sexual harassment of an inmate is subject to the provisions of DOC policy 1.1.C.13 Screening of Staff Volunteers and Contractors for Prior Sexual Abuse.

V Related Directives:

SDCL §§ 22-6-1, 22-22-7.6, 22-22-26, 23A-35B-4 and 24-1-26.1.

DOC policy 1.1.A.3 – Staff Reporting Information to DOC Administration and Office of Risk Management
DOC policy 1.1.C.1 – Staff Code of Ethics
DOC policy 1.1.C.2 – Staff Supervision of Offenders
DOC policy 1.1.C.3 – Staff Reporting Abuse or Neglect
DOC policy 1.1.C.10 – Staff Anti-Harassment and Discrimination Policy
DOC policy 1.1.C.13 – Screening of Staff Volunteers and Contractors for Prior Sexual Abuse
DOC policy 1.3.A.5 – Searches - Adult Institutions
DOC policy 1.3.C.2 – Inmate Discipline System
DOC policy 1.3.D.1 – Disciplinary Housing
DOC policy 1.3.E.2 – Administrative Remedy for Inmates
DOC policy 1.3.E.5 – PREA Compliance with Prison Rape Elimination Act Standards
DOC policy 1.4.B.3 – Sex Offender Management Program
DOC policy 1.4.B.9 – Sexual Behavior Issue Review
DOC policy 1.4.E.1 – Health Care Services for Offenders
DOC policy 1.4.E.8 – Blood-Borne Pathogens and Infectious Disease Management
DOC policy 1.4.E.10 – Medical Services Copayments
DOH policy P-F-06 – Response to Sexual Abuse
DOH policy P-G-04 – Therapeutic Relationship, Forensic Information, and Disciplinary Actions
Inmate Living Guide
VI Revision Log:

**September 2014:** New policy.

**April 2014:** Deleted reference to Special Security and Replaced with Special Investigations Unit.

**April 2016:** Added definition of “Inmate”. Added “with consent from the victim” and Added “equipped to administer” in Section 1 B. 2. a.1. Deleted “it is necessary to transport the inmate/victim to a hospital or emergency room” and Replaced with “the victim will be provided to opportunity to consent to the administration of” in Section 1 B. 2. b. 1. Added “If convicted, the defendant may be assessed the cost of the examination, as set by the physician, hospital or clinic” in Section 1 B. 3.

**Added** new 2. in Section 2 B. **Added** “evidence obtained through the telephone system” in Section 2 B. 1. **Deleted** “may be” and Replaced with “shall be” in Section 2 C. 1. c. **Added** “inmate with inmate” in Section 2 C. 2. d. Added “determined by staff to possibly include criminal conduct” in Section 2 D. 1. **Added** “approved” in Section 3.A.2. **Added** “and the inmate victim is in DOC custody/housed in a DOC facility” in Section 3 B. 4. **Added** “at a minimum” and Added “The purpose of the review is to determine whether there is a continuing need for separation from the general population. Each facility with protective custody status inmates shall maintain an operational memorandum that includes documentation requirements, hearing procedures and identify staff who will direct the review” in Section 3 B. 5. **Added** B. to Section 3 B. 5. **Added** “Behavioral Health staff shall be consulted as deemed necessary” in Section 3 D. 3. **Deleted** 5.in Section 3 D. **Added** “shall not result in the inmate being charged with Prohibited Acts L-46 or L-42 in Section 3. D. 5.

**April 2017:** Added “as provided to inmates of the same classification and housing assignment” in Section 3 A. 2. **Added** “consistent with the inmate’s classification and housing requirements” in Section 3 A. 3. **Added** 6. in Section 3 E.

**October 2018:** Minor language and structure revisions to policy.

**March 2020:** Deleted 5. regarding SIU reporting the findings and conclusion of the investigation in COMS in Section 2 C. **Added** “or sexual harassment” and **Added** a. and b. to Section 3 B. **Deleted** C. in Section 3 and **Replaced** with new Section C. **Updated** Attachments 2-6 and **Added** new Attachment 7.

**September 2021:** Deleted “start the Sexual Incident Report: Investigator form” and **Replaced** “create a Reportable Incident Recording in COMS” and **Added** “While the investigation is on-going, the status of the incident will show as "Pending" until the investigator has reached a determination.” in Section 2 A 2. **Updated** DOC policy 1.1.A.3 title in Section 2 A 4 a. **Added** “5. The Special Investigations Unit will give a monthly update on all pending investigations during the SI Review meeting.” In Section 2 C and **Reformatted** number of subsequent subsections. **Added** “Reportable” and “Recording (See Attachment 2)” in Section 2 C 6. **Added** “COMS Reportable Incident Inquiry is used to track these results.” in Section 2 C 6 a. **Added** “and scanned into COMS under Offenses in custody: / scanned prea information” in Section 3 B 1 a. **Deleted** “appropriate staff” and **Replaced** with “the PREA Compliance Manager” and **Deleted** “PREA Sexual Incident Report Form – Investigation” and **Replaced** with “COMS Reportable Incident Recording” in Section 3 C 1. **Added** “of sexual abuse or staff on inmate sexual harassment incidents are” and “by the PREA Compliance Manager” in Section 3 C 1 a. **Added** “or staff on inmate sexual harassment incidents” and “when monitoring is completed, the checklist will be added to the PREA Reportable Incident Packet” in Section 3 C 2. **Reformatted** Section 3 C 2 c to b as the letter b was skipped. **Deleted** “L-46 or” in Section 3 D 5. **Removed** M:\drive as location for attachments and **Replaced** with PolicyTech.

**Deleted** Attachment 2 “PREA Sexual Incident Report Form: Investigator” and **Replaced** with Attachment 2 “COMS Reportable Incident Recording”. **Updated** Attachments 3, 4 and 6.
Attachment 1: PREA Sexual Incident Checklist: Officer in Charge

The PREA Sexual Incident Checklist: Officer in Charge form is located in PolicyTech.
Attachment 2: COMS Reportable Incident Recording

The **COMS Reportable Incident Recording** is located in COMS.
### RETALIATION STATUS CHECKLIST

<table>
<thead>
<tr>
<th>Facility PREA Compliance Manager</th>
<th>Date</th>
</tr>
</thead>
</table>

#### Decision Check:

- **Is the unit subject to a complaint regarding the potential for retaliaion by the incident?**
  - Yes
  - No

- **Is the unit subject to a complaint regarding the potential for retaliation by the incident?**
  - Yes
  - No

- **Is there a split between the unit subject to a complaint regarding the potential for retaliation by the incident?**
  - Yes
  - No

#### Summary of Status Check:

- **Date:**

---

### PREA COMPLAINT SUMMARY

<table>
<thead>
<tr>
<th>Facility PREA Compliance Manager</th>
<th>Date</th>
</tr>
</thead>
</table>

#### Decision Check:

- **Is the unit subject to a complaint regarding the potential for retaliation by the incident?**
  - Yes
  - No

- **Is the unit subject to a complaint regarding the potential for retaliation by the incident?**
  - Yes
  - No

- **Is there a split between the unit subject to a complaint regarding the potential for retaliation by the incident?**
  - Yes
  - No

#### Summary of Status Check:

- **Date:**

---

### PREA RELATED FACTORS

<table>
<thead>
<tr>
<th>Facility PREA Compliance Manager</th>
<th>Date</th>
</tr>
</thead>
</table>

#### Decision Check:

- **Is the unit subject to a complaint regarding the potential for retaliation by the incident?**
  - Yes
  - No

- **Is the unit subject to a complaint regarding the potential for retaliation by the incident?**
  - Yes
  - No

- **Is there a split between the unit subject to a complaint regarding the potential for retaliation by the incident?**
  - Yes
  - No

#### Summary of Status Check:

- **Date:**

---

The **PREA Retaliation Status Checklist** form is located in PolicyTech.
Attachment 4: PREA Sexual Abuse Victim Preference Statement

The *PREA Sexual Abuse Victim Preference Statement* form is located in PolicyTech.

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**SEXUAL ABUSE VICTIM PREFERENCE STATEMENT**

South Dakota Department of Corrections
Special Investigations Office

Inmate Name: Last /First

Inmate ID

Please initial next to the items below to indicate you understand:

- I have informed Department of Corrections (DOC) staff that I have been the victim of an act of sexual abuse.
- I am aware that a victim advocate or staff counselor will provide me with information that may assist me in deciding whether to participate in the criminal investigation.
- I have been offered the opportunity to consult with victim advocate, mental health staff, or other person(s) of my choosing before making the following decision:
  - At this time, I have decided not to provide additional information or participate in the investigation and prosecution of the suspect.
- I understand that the investigation may not be able to be completed without my participation. Because the allegation will not have a complete investigation, it may be considered an unsubstantiated case.
- DOC Staff have informed me of the following:
  - I understand the DOC may not take any actions; such as: housing transfer requests, separation or monitoring requests, or other administrative actions based solely upon an unsubstantiated allegation.
  - I further understand that I may change my mind and provide information for this investigation at a later time. In the event, however, I understand that the delay may affect the investigative findings and successful prosecution of the suspect.
  - The case may still be referred to the Division of Criminal Investigation for review.
  - I understand my rights as a crime victim under the DOC Policies & Procedures and South Dakota law, including my right to consult a victim advocate or staff counselor.

I make this decision freely and voluntarily.

Inmate Signature

Date

Witnessed by

Date

Title

Revised 07/30/2021
Attachment 5: Sexual Incident Protocol and Reference Book

The book is available in facility control rooms.
Attachment 6: Notice of PREA Investigation Determination

The Notice of PREA Investigation Determination form is located in PolicyTech.

Notice of PREA Investigation Determination
From the Special Investigations Office

Inmate: ___________________________ ID# ___________________________

This notice is to inform you that the allegation of __________________________
SEXUAL INCIDENT TYPE
you made (or made in your behalf) on __________________________ was determined to be:
INCIDENT DATE

☐ Substantiated: This means there was evidence or information that the allegation did happen.
   *Staff will contact you with additional information about the case and to follow-up on how you are doing.

☐ Unsubstantiated: This means there is not enough evidence or information to make a determination.
   *Based upon the information available to staff at the time, there was not information to say that the alleged incident did or did not happen.

☐ Unfounded: This means there was evidence or information that the allegation did not happen.
   *Unfounded means there is evidence/information that this allegation did not happen. If it was determined that this allegation was made in ‘bad faith’ an institutional rule violation may be written.

_________________________                                  ___________________________
PREA INVESTIGATOR                                              DATE

_________________________                                  ___________________________
INMATE SIGNATURE                                               DATE

NOTICE: If you believe there was a procedural or policy error or omission in this investigation and determination you may file an Administrative Remedy (AR) with your Unit Staff. You do not need to go through the Informal Resolution step for this type of procedure. In the AR you must identify the procedural or policy error or omission.

Original: To inmate                                           Copy: To Investigators file
Attachment 7: PREA Special Investigations Unit Incident Report

The *PREA Special Investigations Unit Incident Report* form is located in PolicyTech.