

Access to emergency medical and mental health services







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The National PREA Resource Center

The mission of the PRC is to assist adult prisons and jails, juvenile facilities, lockups, community corrections and tribal facilities in their efforts to eliminate sexual abuse by increasing their capacity for prevention, detection, monitoring, responses to incidents and services to victims and their families.



Logistics

Technical Support

- Please contact the ZoomPro Webinar support line at (888 -799-9666)—select "2" when prompted to get support with technical difficulties.
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Logistics

Submitting Questions

- To submit a question during the Webinar, use the Q&A feature on your webinar toolbar, as seen below.
- Presenters will address the questions at the end of the presentation.







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COVID-19 Disclaimer

This webinar is designed to provide guidance related to compliance with **Standard 115.82** in general and will not specifically address concerns or answer questions related to COVID -19.

The PREA Resource Center (PRC) recognizes that coming into compliance or maintaining compliance with this standard, and others, during the COVID -19 crisis presents specific challenges that you may not have faced before. If you have questions related to compliance during this crisis, please direct them to the PRC via "Contact Us", and they will be shared with the PREA Management Office (PMO).

Or, you may contact the PMO directly at PREACompliance@usdoj.gov.



Medical & Mental Health Standards (Past, Present & Future)

- 115.81 Medical and mental health screenings; history of sexual abuse
- 115.82 Access to emergency medical and mental health services
- 115.83 Ongoing medical and mental health care for sexual abuse victims and abusers

115.81 – the Past Sexual Abuse.

This standard *looks backward in time* to determine if an inmate/resident/detainee was a victim of abuse or a perpetrator of abuse. Certain steps must happen to address what you learn.

115.82 – the Present Sexual Abuse (Acute sexual assault).

This standard *looks at the present* and addresses a current sexual assault that has happened in a facility. Certain steps must happen to protect the victim.

115.83 – the Future after Sexual Abuse in a Facility.

This standard *looks to the future and ongoing services* that must be provided to a victim of sexual abuse while incarcerated.



Standard Requirements

- (a) Inmate victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment.
- (b) If no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, security staff first responders shall take preliminary steps to protect the victim pursuant to § 115.62 and shall immediately notify the appropriate medical and mental health practitioners.

Standard Requirements

- (c) Inmate victims of sexual abuse while incarcerated shall be offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care , where medically appropriate.
- (d) Treatment services **shall** be provided 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.



Purpose of the Standard

- To ensure that a victim of sexual abuse in a facility is provided, at no cost, unimpeded, unconditional, and timely emergency medical treatment and crisis intervention services following a sexual assault.
 - The appropriate medical treatment is determined solely by medical and mental health professionals according to their professional judgement.
 - Additionally, the victim must be provided timely information and access to emergency contraception and sexually transmitted infections prophylaxis, where medically appropriate.



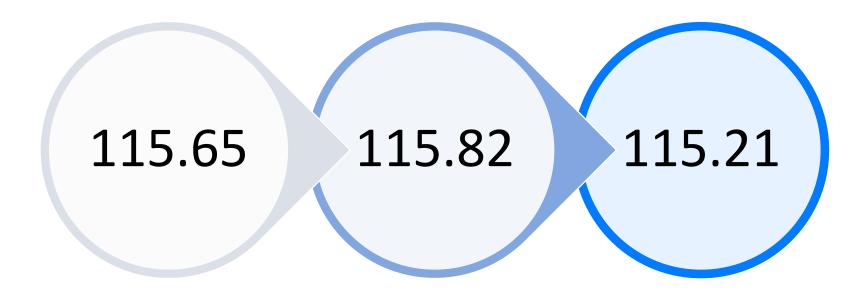
- Implement a procedure and response plan that ensures that victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services.
 - Timely. Occurs at a favorable or useful time; occurs when it is needed.
 - Unimpeded means that agencies must not impose administrative hurdles or security processes that could delay access to these critical services.



- The exact nature and scope of the medical treatment and crisis intervention services must be determined solely by the medical and mental health professionals according to their professional judgement and the standard of care in the community.
- This is the concept of *Medical Autonomy*
 - **EXAMPLE:** If the facility has on-site medical personnel to provide emergency treatment, the treatment decisions rest **solely** with the medical personnel and not facility administration. **Facility administration must not put any pressure on medical professionals to sway treatment or services one way or another .**



- Standards 115.65, 115.82 and 115.21 are interrelated
- Implementation must consider all three standards





Access to emergency medical and mental health services

Implementation

• Develop and implement a strong, coordinated facility plan to provide an effective and timely response when an incident of sexual abuse occurs. The agency's coordinated response plan under Standard 115.65 should be the roadmap to ensure that all required steps occur to protect and treat the victim.



- Review Standard 115.21 that requires the victim of a sexual assault be offered forensic medical examinations by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible, or other qualified medical practitioners.
- The forensic medical examination should be **voluntary**.
- NOTE: A forensic medical examination is not a medical procedure . It is a procedure for collecting evidence . As such, agencies should ensure that victims receive necessary emergency medical services and not rely on the forensic medical examination as the sole "medical" response to an incident of sexual abuse.



Access to emergency medical and mental health services

- Ensure that victims of sexual abuse are offered timely information about and timely access to emergency contraception and sexually transmitted infections (STI) prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate.
- The term "timely access" underscores the time-sensitive nature of emergency contraception and STI prophylaxis, treatments which use drugs that have a finite window of efficacy. The drugs can be effective up to 120 hours after the sexual assault; however, the medications are most effective when taken as soon as possible after the assault and preferably within 72 hours , so time is of the essence to seek treatment for the victim.



Access to emergency medical and mental health services

- Provide treatment services to the victim free of charge no matter whether the victim names the abuser or cooperates with the investigation.
- Treatment services encompass the provision of medical drugs.



Access to emergency medical and mental health services

Challenges

- Accessing SANE/SAFE services in some areas can be difficult and the forensic exams may have to be performed by other qualified medical personnel.
- The facility should exhaust all means to provide SANE/SAFE services to victims, as these programs have highly specialized staff who have received training in forensic exams for sexual assault victims which helps ensure the successful prosecution of any potential criminal cases. Additionally, these individuals are intensively trained in the sensitive handling of sexual assault victims.



Access to emergency medical and mental health services

Challenges

- Ensuring the victim receives timely services after an incident of sexual abuse. The timely collection of DNA evidence, emergency contraception and STI prophylaxis requires a well-organized process to ensure the victim receives care immediately.
- Because it is critical for a victim to receive timely emergency medical care, the facility must be diligent in getting the medical services quickly during all the activity surrounding an incident. Timely access to treatment is essential for the victim and timely SANE/SAFE exams are critical for subsequent criminal prosecutions .



Best Practices

- Implement a robust coordinated response plan activated when incidents of sexual abuse occur. Mock drills with staff is one way to ensure that all involved know their responsibilities, chain of command, and specific steps in the protocol.
- Mock drills or table -top exercise scenarios are an effective way to trouble shoot deficiencies in the response plan before an actual incident.



Best Practices

- Develop a good relationship with local SANE/SAFE programs and victim advocacy groups in the community . Invite these groups to the table when developing the coordinated response plan to ensure that the plan is comprehensive.
- Providing a victim advocate prior to, during, and after the forensic exam is a critical piece that helps ensure the victim is not re-traumatized during this process. A comprehensive response plan will ensure that the victim advocate is present to provide support services to the victim.
- While a victim advocate is important to all victims, it is critically important if the victim is a **juvenile** for whom the forensic process after a sexual assault may be a foreign, scary process.
- Well-trained facility staff should provide **comfort to a victim** in the interim before the victim advocate arrives.

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Auditing this standard

- Auditors will look at a variety of evidence to determine compliance and will:
 - Review **medical records** of the victim
 - Interview medical and mental health staff
 - Interview Inmates/Residents/Detainees who reported sexual abuse
 - Review the facility coordinated response plan (115.65)



Audit issues

- Determining whether victims received timely, unimpeded emergency medical and mental health services based on professional judgment and the prevailing standard of care. The auditor will pay special attention to the facility's coordinated response plan to ensure that it includes all the required protections for a victim of sexual assault.
- Auditors will review any **agreements and/or correspondence** between the facility and SANE/SAFE programs and victim advocates to determine if a process is in place to provide services to victims and if the agreement is signed, dated, and current.



Audit issues

- Assessing whether information about and access to emergency contraception and sexually transmitted infections prophylaxis was offered and/or provided to victims in a timely manner.
- To make this determination, auditors will review victim files, medical files, treatment records, mental health files, and investigation files . Where possible, the auditor will interview inmates who have reported sexual abuse to determine whether they had appropriate access to emergency medical services.



Standard Variations: Lockups - 115.182

- The only requirement for lockups, where detainees are held for very short periods of time, is to provide **timely, unimpeded access to emergency medical treatment that is free** to the detainee and not conditioned on naming the abuser or cooperating with the investigation.
- Due to the short-term nature of lockup detention, facilities are **not** required to provide emergency contraception or STI prophylaxis, but the lockup would transfer the detainee to an appropriate emergency medical provider, which would be expected to provide such care as appropriate.



Resources

- PREA Essentials on the National PREA Resource Center Webpage: https://www.prearesourcecenter.org/training -technical-assistance/PREA-essentials
- Archived PREA 101 Webinars:
 - Adult Prisons https://www.prearesourcecenter.org/training -and-technical-assistance/webinars/884/prea -101-webinar-series-adult-prisons
 - Jails and Lockups https://www.prearesourcecenter.org/training and-technical-assistance/webinars/885/prea 101-webinar series-juvenile-agencies
 - Community Corrections https://www.prearesourcecenter.org/training and-technical-assistance/webinars/887/prea 101-webinar series-community corrections
 - Juvenile Agencies https://www.prearesourcecenter.org/training and-technical-assistance/webinars/885/prea 101-webinar series-juvenile-agencies



Access to emergency medical and mental health services

Resources

- PREA Resources for Health Care Providers
 - National Commission on Correctional Health Care. Multiple video presentations on a variety of relevant topics - http://www.ncchc.org/prea -resources
- Center for Disease Control (CDC)
 - Sexual Assault and Abuse and STDs https://www.cdc.gov/std/tg2015/sexual assault.htm
 - PEP (post-exposure prophylaxis) for HIV https://www.cdc.gov/hiv/basics/pep.html
- American Congress of Obstetricians and Gynecologists



Resources

- Always check the following sources for excellent training on PREA:
 - National Institute of Corrections http://nicic.gov/training/prea
 - End Silence: The Project on Addressing Prison Rape - <u>https://www.wcl.american.edu/impact/initiatives</u> -<u>programs/endsilence/</u>



Questions & Answers





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In this section of the library you will find sample PREA-related policies and PREA policy development guides.

See all Policy & Practice articles >

RESOURCES



In this section of the library you will find tools such as training materials, handbooks, policy development toolkits, and a list of resources for survivors.

See all Resources articles +



In this section of the library you will find federally funded and academic reports and articles on a range of PREA-related topics.

See all Research articles >

STANDARDS



In this section of the library you will find the federal PREA standards and information about the development. implementation, compliance

with, and enforcement of the standards.

See all Standards articles +

The PREA Resource Center (PRC) is working to address sexual safety in confinement, and to assist state and local jurisdictions with implementation of the Department of Justice national PREA standards. Visit the library for research and guidance on implementation of the standards; the Training and Technical Assistance section of the website to learn about the PRC's four strategies for assisting the field with PREA implementation; and sign up for upcoming webinars here.

Need Help?

The PREA Resource Center provides training and technical assistance to adult and juvenile corrections and law enforcement agencies seeking to prevent, detect, and respond to sexual abuse in confinement.

REQUEST ASSISTANCE >

Resources for survivors and their families are available here.



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Name and position/title of person making request:		
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State:	- None -	
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Point of contact for the jurisdiction/agency:		
Statement of Problem:		
	//	
Describe, as specifically as possible, the condition or issue for which the TTA is requested.		
Previous Efforts:		
Have there been any previous attempts to address the condition or Issue for which the TTA is requested? If so, what action(s) were taken and what were the results?		
Training and Technical Assistance:		
Describe what type of training or technical assistance you would like to receive.		
Targeted Audience/Recipients:		



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For more information about the National PREA Resource Center, visit www.prearesourcecenter.org.

To ask a question, please visit our Contact Us page.



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Power Hour: Chat with a PREA Expert!



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This project was supported by Grant No. 2019 -RP-BX-K001 awarded by the Bureau of Justice Assistance. The Bureau of Justice Assistance is a component of the Office of Justice Programs, which also includes the Bureau of Justice Statistics, the National Institute of Justice, the Office of Juvenile Justice and Delinquency Prevention, the Office for Victims of Crime, and the Office of Sex Offender Sentencing, Monitoring, Apprehending, Registering, and Tracking. The opinions, findings, and conclusions or recommendations expressed in this publication/program/exhibition are those of the author(s) and do not necessarily reflect the views of the Department of Justice or grant making component.

