

## INTRODUCTION:

### ¶ 125 Monitoring Reports:

The Monitor will conduct an on-site inspection and issue a Monitoring Report for Edna Mahan six months after the baseline site visit, and then every six months thereafter. A draft Monitoring Report will be provided to NJDOC and DOJ in draft form for comment at least 30 days prior to its issuance. NJDOC and DOJ will provide comments, if any, to the Monitor within 15 days of receipt of the draft Report. The Monitor will consider the responses of NJDOC and DOJ and make appropriate changes, if any, before issuing the final Monitoring Report.

#### Requirements:

- ¶ 125 a. Within two months of the Effective Date, the Monitor will conduct a baseline site visit of Edna Mahan to become familiar with Edna Mahan and this Agreement.
- ¶ 125 b. The Monitor will conduct an on-site inspection and issue a Monitoring Report for Edna Mahan six months after the baseline site visit, and then every six months thereafter. A draft Monitoring Report will be provided to NJDOC and DOJ in draft form for comment at least 30 days prior to its issuance. NJDOC and DOJ will provide comments, if any, to the Monitor within 15 days of receipt of the draft Report. The Monitor will consider the responses of NJDOC and DOJ and make appropriate changes, if any, before issuing the final Monitoring Report.
- ¶ 125 c. The Monitoring Reports will describe the steps taken by Edna Mahan to implement this Agreement and evaluate the extent to which Edna Mahan has complied with each substantive provision of the Agreement, as set forth in the numbered Paragraphs herein, beginning with Paragraph 10 and ending at Paragraph 111.
- ¶ 125 d. Each Monitoring Report will evaluate the status of compliance for each relevant provision of the Agreement using the following standards: (1) Substantial Compliance; (2) Partial Compliance; and (3) Non-compliance.
- ¶ 125 e. The Monitor will review a sufficient number of pertinent documents and interview a sufficient number of staff and prisoners to accurately assess current conditions. The provision of documents and scheduling of interviews shall be set up through the Agreement Coordinator.
- ¶ 125 f. Each Monitoring Report will describe the steps taken by each member of the monitoring team to analyze conditions and assess compliance, including documents reviewed and individuals interviewed, and the factual basis for each of the Monitor's findings.
- ¶ 125 g. Each Monitoring Report will contain the Monitor's independent verification of representations from Edna Mahan regarding progress toward compliance, and examination of supporting documentation.
- ¶ 125 h. Each Monitoring Report will provide specific, non-binding recommendations, if applicable, for each of the provisions in the Agreement outlining proposed actions for at least the next six months for Edna Mahan to complete toward achieving compliance with the particular provision.

### III. SUBSTANTIVE PROVISIONS:

#### A. III. SUBSTANTIVE PROVISIONS: General Policies and Procedures

NJDOC and Edna Mahan shall develop and implement policies, procedures, and practices at Edna Mahan to ensure that prisoners are protected from harm due to sexual abuse and sexual harassment. Accordingly, and specifically:

- ¶ 10 During the first nine (9) months following the Effective Date, NJDOC and Edna Mahan will ensure the policies and procedures related to the topics specified below are drafted and/or revised in accordance with this Agreement and to incorporate gender-responsive strategies, as applicable.
- ¶ 10 a. Sexual Assault, Sexual Abuse, and Sexual Harassment;
  - ¶ 10 b. Prisoner Supervision;
  - ¶ 10 c. Camera Management;
  - ¶ 10 d. Staff/Prisoner Over-Familiarity;
  - ¶ 10 e. Reporting Incidents or Allegations of Sexual Abuse or Sexual Harassment;
  - ¶ 10 f. Prisoner Education;
  - ¶ 10 g. Cross-gender searches and viewing;
  - ¶ 10 h. Protective Custody;
  - ¶ 10 i. Prevention of Retaliation;
  - ¶ 10 j. Response to Allegations of Sexual Abuse or Sexual Harassment;
  - ¶ 10 k. Referrals and Investigations of Allegations of Sexual Abuse or Sexual Harassment;
  - ¶ 10 l. Staff Reporting of Personal Relationships.

#### Requirements:

- ¶ 10 NJDOC and Edna Mahan shall provide any policies and procedures developed or revised in accordance with this Agreement to the Monitor for comment and approval to accomplish the timeframes in this Agreement.
- ¶ 10 The Monitor will provide feedback on these policies and procedures promptly to Edna Mahan, but at all times within thirty (30) days
- ¶ 17 To the extent that a Party to this Agreement requires an extension on the timeframes set forth in this Section, the Party may request an extension, which will not be unreasonably denied by the other Party.

- ¶ 42. Policies and procedures at Edna Mahan shall require that contractors and volunteers who have contact with prisoners but are not directly supervised by NJDOC or Edna Mahan employees comply with Edna Mahan's sexual abuse and sexual harassment policies and procedures.
- ¶ 45 To the extent that revisions are made to policies or procedures, or new policies or procedures are developed to comply with this Agreement, NJDOC and Edna Mahan will work with the Monitor in drafting new training materials and/or revising current training materials to ensure the training materials are current.

**Monitor's Measure of Compliance re A. General Policies and Procedures ¶ 10:**

- Level 1 and Level 3 Policy on Sexual Assault, Sexual Abuse, and Sexual Harassment drafted and/or revised by May 24, 2022
- Level 1 and Level 3 Policy on Prisoner Supervision drafted and/or revised by May 24, 2022
- Level 1 and Level 3 Policy on Camera Management drafted and/or revised by May 24, 2022
- Level 1 and Level 3 Policy on Staff/Prisoner Over-Familiarity drafted and/or revised by May 24, 2022
- Level 1 and Level 3 Policy on Reporting Incidents or Allegations of Sexual Abuse or Sexual Harassment drafted and/or revised by May 24, 2022
- Level 1 and Level 3 Policy on Prisoner Education drafted and/or revised by May 24, 2022
- Level 1 and Level 3 Policy on Cross-gender searches and viewing drafted and/or revised by May 24, 2022
- Level 1 and Level 3 Policy on Protective Custody drafted and/or revised by May 24, 2022
- Level 1 and Level 3 Policy on Prevention of Retaliation drafted and/or revised by May 24, 2022
- Level 1 and Level 3 Policy on Response to Allegations of Sexual Abuse or Sexual Harassment drafted and/or revised by May 24, 2022
- Level 1 and Level 3 Policy on Referrals and Investigations of Allegations of Sexual Abuse or Sexual Harassment drafted and/or revised by May 24, 2022
- Level 1 and Level 3 Policy on Staff Reporting of Personal Relationships drafted and/or revised by May 24, 2022
- Any memos, written directives from the Commissioner, Deputy Commissioner and/or Administrator that addresses procedures, and practices at Edna Mahan to ensure that prisoners are protected from harm due to sexual abuse and sexual harassment

**Steps taken by NJDOC and EMCF towards implementation A. General Policies and Procedures ¶ 10:**

**8/24/25 Status Report**

Level 1 policies: SID IMP #14 and SID IMP #35 were officially adopted by the New Jersey Department of Corrections (NJDOC) after approval by the Federal Monitor, the Department of Justice (DOJ), and NJDOC. All other related Level 1 and 3 policies have been thoroughly revised and officially adopted by the New Jersey Department of Corrections (NJDOC) after approval by the Federal Monitor, the Department of Justice (DOJ), and NJDOC.

**Monitor's Finding of Compliance re A. General Policies and Procedures ¶ 10:**

**[X] Substantial Compliance**

☐ Partial Compliance

☐ Non-compliance

☐ N/A not required until [ date ]

☐ N/A monitor granted an extension until [ date ]

**Monitor's Discussion re A. General Policies and Procedures ¶ 10:**

As of February 24, 2024, New Jersey Department of Corrections (NJDOC) had revised, finalized and adopted the following Level 1 policies:

- ADM.010.004 - Staff/Incarcerated Person Over Familiarity
- CUS.001.CRP.01 - Camera Review Procedures
- CUS.001.SEA.001 - Searches of Incarcerated Persons and Correctional Facilities
- PCS.001.008 - Prevention, Detection and Response of Sexual Abuse and Harassment
- SID IMP #14
- SID IMP #35
- SID IMP #48
- ADM.019.003 - Close Custody Units
- CUS.001.011 – Policy Statement - Searches of Incarcerated Persons and Correctional Facilities
- IMM.001.004 - Zero Tolerance Policy: Prison Sexual Abuse and Sexual Harassment
- IMM.004.RHU.03 - Amenities and Privileges Two-Level Program
- ADM.019.003.ADJU - Adjustment Unit
- ADM.019.003.EMCT - Emergency Confinement

- CUS.001.BWC.011 – Body Worn Cameras

Additionally, as of August 23, 2024 the following Level 3 policies (those specific to Edna Mahan) were revised and updated

- IMP #2 South, North, and Dormitory Officers (replaced the Max Housing Unit Officer)
- IMP # 2A South North Hall Control Officers (replaced the Limited Privileges Unit)
- IMP # 3 EMCF Satellite Entrance Control Officer
- IMP # 3A EMCF Satellite General Assignment Officer
- IMP #3B EMCF Satellite Unit Housing Officer
- IMP #15 C-Cottage Unit Officers (replaced Residential Treatment Unit)

During this reporting period, NJDOC updated the following policies that refer to or relate to cross-gender strip searches to specify that such searches may take place only in emergent rather than exigent circumstances. The definition of “exigent circumstance” – “any set of temporary and unforeseen circumstances that require immediate action to combat a threat to the security or institutional order of a facility” – was determined to be too broad to describe the limited situations in which a cross-gender strip search may occur. Accordingly, policies were updated to reflect that cross-gender strip searches may only occur in an “emergent circumstance,” defined as “a serious, unexpected, and dangerous situation requiring immediate action.”

- CUS.001.SEA.001 - Searches of Incarcerated Persons and Correctional Facilities
- PCS.001.008 - Prevention, Detection and Response of Sexual Abuse and Harassment
- CUS.001.SEA.001 - Searches of Incarcerated Persons and Correctional Facilities
- IMP # 3 EMCF Satellite Entrance Control Officer
- IMP # 3A EMCF Satellite General Assignment Officer
- IMP #3B EMCF Satellite Unit Housing Officer
- IMP #15 C-Cottage Unit Officers

**Recommendations re A. General Policies and Procedures ¶ 10:**

No recommendations.

**A. General Policies and Procedures**

¶ 11 Within one year of the Effective Date, all policies and procedures specified to be drafted and/or revised to incorporate and align them with the provisions in this Agreement will be adopted by Edna Mahan.

Requirements:

- ¶ 11 Edna Mahan will work with the Monitor to prioritize policies and procedures to accomplish the timeframes in this Agreement.
- ¶ 12 Prior to adoption, Edna Mahan will provide a copy of the policy or procedure to DOJ for review, comment, and approval, with any disputes to be resolved by the Court. DOJ will not unreasonably refuse to approve submitted policies or procedures.
- ¶ 12 DOJ will provide feedback on these policies and procedures promptly to Edna Mahan, but at all times within thirty (30) days so that NJDOC can satisfy mandated timeframes. Edna Mahan will address all comments or make any changes requested by DOJ within thirty (30) days after receiving the comments and resubmit the policies and procedures to DOJ for review and approval, as necessary. DOJ will respond within thirty (30) days.
- ¶ 17 To the extent that a Party to this Agreement requires an extension on the timeframes set forth in this Section, the Party may request an extension, which will not be unreasonably denied by the other Party.

**Monitor's Measure of Compliance re A. General Policies and Procedures ¶ 11:**

- Level 3 Policy on Sexual Assault, Sexual Abuse, and Sexual Harassment signed by Edna Mahan Administrator by August 24, 2022
- Level 3 Policy on Prisoner Supervision signed by Edna Mahan Administrator by August 24, 2022
- Level 3 Policy on Camera Management signed by Edna Mahan Administrator by August 24, 2022
- Level 3 Policy on Staff/Prisoner Over-Familiarity signed by Edna Mahan Administrator by August 24, 2022
- Level 3 Policy Reporting Incidents or Allegations of Sexual Abuse or Sexual Harassment signed by Edna Mahan Administrator by August 24, 2022
- Level 3 Policy on Prisoner Education signed by Edna Mahan Administrator by August 24, 2022
- Level 3 Policy on Cross-gender searches and viewing signed by Edna Mahan Administrator by August 24, 2022
- Level 3 Policy on Protective Custody signed by Edna Mahan Administrator by August 24, 2022
- Level 3 Policy on Prevention of Retaliation signed by Edna Mahan Administrator by August 24, 2022
- Level 3 Policy on Response to Allegations of Sexual Abuse or Sexual Harassment signed by Edna Mahan Administrator by August 24, 2022

- Level 3 Policy on Referrals and Investigations of Allegations of Sexual Abuse or Sexual Harassment signed by Edna Mahan Administrator by August 24, 2022
- Level 3 Policy on Staff Reporting of Personal Relationships signed by Edna Mahan Administrator by August 24, 2022
- Any memos, written directives from the Commissioner, Deputy Commissioner and/or Administrator that addresses procedures, and practices at Edna Mahan to ensure that prisoners are protected from harm due to sexual abuse and sexual harassment
- Random review of policies during onsite visit

**Steps taken by NJDOC and EMCF towards implementation A. General Policies and Procedures ¶ 11:**

**8/24/25 Status Report**

Level 1 policies: SID IMP #14 and SID IMP #35 were officially adopted by the New Jersey Department of Corrections (NJDOC) after approval by the Federal Monitor, the Department of Justice (DOJ), and NJDOC. All other related Level 1 and 3 policies have been thoroughly revised and officially adopted by the New Jersey Department of Corrections (NJDOC) after approval by the Federal Monitor, the Department of Justice (DOJ), and NJDOC.

**Monitor's Finding of Compliance re A. General Policies and Procedures ¶ 11:**

**☒ Substantial Compliance**

- ☐ Partial Compliance  
☐ Non-compliance  
☐ N/A not required  
☐ N/A monitor granted an extension until [ date ]

**Monitor's Discussion re A. General Policies and Procedures ¶ 11:**

Effective February 24, 2024, Edna Mahan adopted the 14 Level 1 policies listed in the above paragraph. Additionally, as of August 23, 2024, Edna Mahan finalized and adopted six (6) Level 3 policies (those specific to Edna Mahan and listed in the above section).

**Recommendations re A. General Policies and Procedures ¶ 11:**

No recommendations.

**A. General Policies and Procedures**

¶ 13 No later than ninety (90) days after DOJ's approval of each policy and procedure (except as otherwise stated in the Agreement), Edna Mahan will create a staff training plan that addresses the training requirements of each policy or procedure revised.

Requirements:

¶ 13 Each training plan will specify (i) staff to be trained and (ii) the date(s) of training planned. Each staff training plan will be provided to both DOJ and the Monitor.

¶ 17 To the extent that a Party to this Agreement requires an extension on the timeframes set forth in this Section, the Party may request an extension, which will not be unreasonably denied by the other Party.

**Monitor's Measure of Compliance re A. General Policies and Procedures ¶ 13:**

- Training Plan developed for Policy on Sexual Assault, Sexual Abuse, and Sexual Harassment no later than 90 days after DOJ's approval of policy
- Training Plan developed for Policy on Prisoner Supervision no later than 90 days after DOJ's approval of policy
- Training Plan developed for Policy on Camera Management no later than 90 days after DOJ's approval of policy
- Training Plan developed for Policy on Staff/Prisoner Over-Familiarity no later than 90 days after DOJ's approval of policy
- Training Plan developed for Policy on Reporting Incidents or Allegations of Sexual Abuse or Sexual Harassment no later than 90 days after DOJ's approval of policy
- Training Plan developed for Policy on Prisoner Education no later than 90 days after DOJ's approval of policy
- Training Plan developed for Policy on Cross-gender searches and viewing no later than 90 days after DOJ's approval of policy
- Training Plan developed for Policy on Protective Custody no later than 90 days after DOJ's approval of policy
- Training Plan developed for Policy on Prevention of Retaliation no later than 90 days after DOJ's approval of policy
- Training Plan developed for Policy on Response to Allegations of Sexual Abuse or Sexual Harassment no later than 90 days after DOJ's approval of policy
- Training Plan developed for Policy on Referrals and Investigations of Allegations of Sexual Abuse or Sexual Harassment no later than 90 days after DOJ's approval of policy
- Training Plan developed for Policy on Staff Reporting of Personal Relationships no later than 90 days after DOJ's approval of policy



**Steps taken by NJDOC and EMCF towards implementation A. General Policies and Procedures ¶ 13:**

**8/24/25 Status Report**

The training curriculum aimed at providing EMCF staff (custody, civilian, contracted staff and volunteers) knowledge and updates to revised Level 1 and Level 3 policies was previously developed in consultation with expert consultants from The Moss Group and approved by the Federal Monitor and DOJ.

**Monitor's Finding of Compliance re A. General Policies and Procedures ¶ 13:**

**[X] Substantial Compliance**

- ☐ Partial Compliance
- ☐ Non-compliance
- ☐ N/A not required until [ date ]
- ☐ N/A monitor granted an extension until [ date ]

**Monitor's Discussion re A. General Policies and Procedures ¶ 13:**

NJDOC developed training for all EMCF staff, contract staff, and volunteers specific to the revised Level 1 and Level 3 policies listed above. Non-custody staff, volunteers, and contract staff received the training during the last reporting period. Custody staff received the training specific to them during this reporting period.

**Recommendations re A. General Policies and Procedures ¶ 13:**

The NJDOC continues to deliver the training to the staff per the training plan.

**A. General Policies and Procedures**

¶ 14 Unless otherwise agreed to by the Parties, all policies and procedures specified in Paragraph 10 will be fully implemented upon completion of the staff training plan, with a goal of all training being completed within eighteen (18) months or sooner of DOJ's approval of the policy or procedure (except as otherwise stated in the Agreement).

Requirements:

¶ 17 To the extent that a Party to this Agreement requires an extension on the timeframes set forth in this Section, the Party may request an extension, which will not be unreasonably denied by the other Party.

**Monitor's Measure of Compliance re A. General Policies and Procedures ¶ 14:**

- Training completed for all EMCF staff on Policy on Sexual Assault, Sexual Abuse, and Sexual Harassment no later than 18 months after DOJ's approval of policy
- Training completed for all EMCF staff on Policy on Prisoner Supervision no later than 18 months after DOJ's approval of policy
- Training completed for all EMCF staff on Policy on Camera Management no later than 18 months after DOJ's approval of policy
- Training completed for all EMCF staff on Policy on Staff/Prisoner Over-Familiarity no later than 18 months after DOJ's approval of policy
- Training completed for all EMCF staff on Reporting Incidents or Allegations of Sexual Abuse or Sexual Harassment no later than 18 months after DOJ's approval of policy
- Training completed for all EMCF staff on Prisoner Education no later than 18 months after DOJ's approval of policy
- Training completed for all EMCF staff on gender searches and viewing no later than 18 months after DOJ's approval of policy
- Training completed for all EMCF staff on Protective Custody no later than 18 months after DOJ's approval of policy
- Training completed for all EMCF staff on Prevention of Retaliation no later than 18 months after DOJ's approval of policy
- Training completed for all EMCF staff on Response to Allegations of Sexual Abuse or Sexual Harassment no later than 18 months after DOJ's approval of policy
- Training completed for all EMCF staff on Referrals and Investigations of Allegations of Sexual Abuse or Sexual Harassment no later than 18 months after DOJ's approval of policy
- Training completed for all EMCF staff on Staff Reporting of Personal Relationships no later than 18 months after DOJ's approval of policy

**Steps taken by NJDOC and EMCF towards implementation A. General Policies and Procedures ¶ 14:**

**8/24/25 Status Report**

NJDOC's training plan was previously approved by the Federal Monitor on July 29, 2024 and encompasses a robust training curriculum aimed at providing EMCF staff (custody, civilian, contracted staff and volunteers) knowledge and updates pertaining to all previously listed Level 1 and Level 3 policies. The curriculum was developed in three (3) sections and utilizes AI generated animation to convey content, along with opportunities for true and false quizzes, and question and answer periods. To date, all civilian staff have received the policy training. To date, all civilian staff have received the policy training. The EMCF Training Department commenced with Sections 1, 2 and 3 training for custody staff in April 2025 and as of the close of the reporting period has trained 292 of 303 custody staff. The Training Department has been vigilant in attempting to schedule and complete all staff training but is faced with staff being out for various reasons (vacation time, sick time, extended leaves, disciplinary leaves, etc.). As staff return from leaves, they are scheduled to attend policy training.

**Monitor's Finding of Compliance re A. General Policies and Procedures ¶ 14:**

**[X] Substantial Compliance**

- ☐ Partial Compliance
- ☐ Non-compliance
- ☐ N/A not required until [ date ]
- ☐ N/A monitor granted an extension until [ date ]

**Monitor's Discussion re A. General Policies and Procedures ¶ 14:**

NJDOC developed training for all EMCF staff, contract staff, and volunteers specific to the revised Level 1 and Level 3 policies listed above. Non-custody staff, volunteers, and contract staff received the training during the last reporting period. Custody staff received the training specific to them during this reporting period. This meets the requirement that training be completed within eighteen (18) months or sooner approval of the policy or procedure

**Recommendations re A. General Policies and Procedures ¶ 14:**

No recommendation.

**A. General Policies and Procedures**

¶ 15 Edna Mahan will annually review its policies and procedures, revising them as it deems necessary. Any revisions to the policies and procedures will be submitted to DOJ for approval in accordance with Paragraph 12.

Requirements:

¶ 12 Prior to adoption, Edna Mahan will provide a copy of the policy or procedure to DOJ for review, comment, and approval, with any disputes to be resolved by the Court. DOJ will not unreasonably refuse to approve submitted policies or procedures. DOJ will provide feedback on these policies and procedures promptly to Edna Mahan, but at all times within thirty (30) days so that NJDOC can satisfy mandated timeframes. Edna Mahan will address all comments or make any changes requested by DOJ within thirty (30) days after receiving the comments and resubmit the policies and procedures to DOJ for review and approval, as necessary. DOJ will respond within thirty (30) days.

¶ 17 To the extent that a Party to this Agreement requires an extension on the timeframes set forth in this Section, the Party may request an extension, which will not be unreasonably denied by the other Party.

*Note: See paragraph 29*

**Monitor's Measure of Compliance re A. General Policies and Procedures ¶ 15:**

- List of all EMCF policies submitted to Monitor
- Documentation that all policies reviewed annually, beginning 2022 (Other than policies specified in Paragraph 10)
- List of all EMCF post orders (procedures)
- Documentation that all post orders reviewed annually, beginning 2022

**Steps taken by NJDOC and EMCF towards implementation re A. General Policies and Procedures ¶ 15:**

**8/24/25 Status Report**

NJDOC complies with Paragraph 15 and has reviewed all policies applicable to Paragraph 10 annually. Applicable policy revisions have been submitted to the Federal Monitor and DOJ. Pursuant to counsel's discussion and agreement, minor revisions to adopted policies that do not substantively alter the policy's meaning, scope, purpose, etc., are not required to be submitted for review or approval.

**Monitor's Finding of Compliance re A. General Policies and Procedures ¶ 15:**

**[X] Substantial Compliance**

- ☐ Partial Compliance
- ☐ Non-compliance
- ☐ N/A not required until [ date ]
- ☐ N/A monitor granted an extension until [ date ]

**Monitor's Discussion re A. General Policies and Procedures ¶ 15:**

On November 23, 2024, NJDOC updated the following policies that refer to or relate to cross-gender strip searches to specify that such searches may take place only in emergent rather than exigent circumstances. The definition of “exigent circumstance” – “any set of temporary and unforeseen circumstances that require immediate action to combat a threat to the security or institutional order of a facility” – was determined to be too broad to describe the limited situations in which a cross-gender strip search may occur. Accordingly, policies were updated to reflect that cross-gender strip searches may only occur in an “emergent circumstance,” defined as “a serious, unexpected, and dangerous situation requiring immediate action.”

- CUS.001.SEA.001 - Searches of Incarcerated Persons and Correctional Facilities
- PCS.001.008 - Prevention, Detection and Response of Sexual Abuse and Harassment
- CUS.001.SEA.001 - Searches of Incarcerated Persons and Correctional Facilities
- IMP # 3 EMCF Satellite Entrance Control Officer
- IMP # 3A EMCF Satellite General Assignment Officer
- IMP #3B EMCF Satellite Unit Housing Officer
- IMP #15 C-Cottage Unit Officers

Additionally, the following policies were reviewed and/or updated, as noted:

- ADM.010.004 - Staff/Incarcerated Person Over Familiarity – this policy has been reviewed by all applicable departments prior to August 24, 2025. Revisions were determined to be needed and are underway.
- CUS.001.CRP.01 - Camera Review Procedures – reviewed June 2025, no revisions made
- SID IMP #14 – revised April 2025
- SID IMP #35 – revised May 2025
- SID IMP #48 - reviewed April 2025, no revisions made
- ADM.019.003 - Close Custody Units – revised May 2025

- IMM.001.004 - Zero Tolerance Policy: Prison Sexual Abuse and Sexual Harassment - reviewed May 2025, no revisions made
- IMM.004.RHU.03 - Amenities and Privileges Two-Level Program – revised October 2024
- ADM.019.003.ADJU - Adjustment Unit - revised June 2025
- ADM.019.003.EMCT - Emergency Confinement - revised June 2025
- CUS.001.BWC.011 – Body Worn Cameras - revised March 2025

And on August 23, 2024 the following Level 3 policies were updated

- EMCF.PO.01 South, North, and Dormitory Officers (replaced the Max Housing Unit Officer) - revised November 2024
- EMCF.PO.02 South North Hall Control Officers (replaced the Limited Privileges Unit) - revised November 2024

**Recommendations re A. General Policies and Procedures ¶ 15:**

No recommendation.

**A. General Policies and Procedures**

- ¶ 16 NJDOC and Edna Mahan shall comply with Edna Mahan's Internal Management Procedure Titled Zero Tolerance Policy: Prison Sexual Assault, mandating zero tolerance toward all forms of sexual abuse and sexual harassment, and any revision to or replacement of that policy.

Requirements:

**Monitor's Measure of Compliance re A. General Policies and Procedures ¶ 16:**

- Agency Level 1 policies mandating zero tolerance
- Edna Mahan Level 3 policies mandating zero tolerance
- Training schedules for staff attending PREA training at Edna Mahan
- PREA Training Curriculum for staff
- Any memos, written directives from the Commissioner, Deputy Commissioner and/or Administrator that direct PREA policy compliance and zero tolerance
- Interviews with various officials regarding their knowledge and roles in implementing the PREA policy
- Focus group meetings with staff regarding their knowledge and roles in implementing the PREA policy
- Focus group meetings with prisoners regarding their knowledge to be safe from all forms of sexual abuse and sexual harassment
- On Site Tour impressions-posters advertising PREA and "PREA phone line" ensuring phone lines work to report an allegation, etc.

**Steps taken by NJDOC and EMCF towards implementation re A. General Policies and Procedures ¶ 16:**

**8/24/25 Status Report**

NJDOC continued during the reporting period training EMCF staff on revisions made to both the Zero Tolerance Policy: Prison Sexual Abuse and Sexual Harassment IMM.001.004 and Prevention, Detection and Response to Sexual Abuse and Sexual Harassment PCS.001.008.

The Institutional PREA Compliance Manager (IPCM) at Edna Mahan Correctional Facility (EMCF) continues to share monthly sexual safety newsletters with all staff. These short newsletters are shared via email, in paper format and televised on institutional monitors. Topics shared this reporting period include:

- General PREA updates, inclusive of an advisement of the decrease of PREA allegations made in the past 12 months
- Education on the difference between violations of PREA and job performance/professionalism
- The importance of confidentiality and examples of unintentional violations
- Retaliation
- Education on how staff can anchor their duties to safety, dignity and respect

During the reporting period, 299 custody staff, 26 civilian staff, 21 contractor staff, and 17 EMCF volunteers received PREA training.

**Monitor's Finding of Compliance re A. General Policies and Procedures ¶ 16:**

**[X] Substantial Compliance**

☐ Partial Compliance

☐ Non-compliance

☐ N/A not required until [ date ]

☐ N/A monitor granted an extension until [ date ]

**Monitor's Discussion re A. General Policies and Procedures ¶ 16:**

Both New Jersey Department of Corrections (NJDOC) Policy Statement IMM.001.004 Zero Tolerance Policy: Prison Sexual Assault and NJDOC Policy 001.008 Prevention, Detection and Response of Sexual Abuse and Harassment states, "It is the policy of the NJDOC to maintain zero tolerance toward all forms of incarcerated person sexual abuse and incarcerated person sexual harassment. The NJDOC will respond to, investigate, and support the prosecution of sexual abuse and sexual harassment within the correctional system and externally in partnership with state and local authorities." NJDOC IMM.001.004 was revised on December 1, 2023, and NJDOC Policy 001.008 was revised on November 21, 2024.

Every year, NJDOC provides Non-Uniform Staff Training (NUST), which includes one hour of PREA Training. Additionally, Custody Staff receive their annual training, which provides one hour of PREA Training. The Monitor's Associate reviewed the training records for this reporting period and verified that this PREA training continues.

The Monitor reviewed the PREA video, script, and facilitator guide used during the PREA training. The curriculum includes information on NJDOC and Edna Mahan's zero-tolerance policy for sexual abuse and sexual harassment; how to fulfill staff responsibilities under its sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures; the right of incarcerated persons to be free from sexual abuse and sexual harassment; the right of incarcerated persons and employees to be free from retaliation for reporting sexual abuse and sexual harassment; the dynamics of sexual abuse and sexual harassment in confinement; the common reactions of sexual abuse and sexual harassment victims; how to respond to sexual abuse and sexual harassment; signs of threatened and actual sexual abuse; how to avoid inappropriate relationships with incarcerated persons; and how to communicate effectively and professionally with incarcerated persons.

During the compliance interviews in the past three years, the Monitor and her Associate spoke with various staff and officials, including volunteers and contract staff, regarding their knowledge and roles in implementing the PREA policy. Everyone we spoke to was very aware of the importance of maintaining zero tolerance toward all forms of sexual abuse and sexual harassment of any incarcerated persons. During the compliance visits, the Monitor and her Associate met with several incarcerated persons, asking



if they knew about their right to be safe from all forms of sexual abuse and sexual harassment. Each of these individuals confirmed they were aware of this right.

The Institutional PREA Compliance Manager (IPCM) at EMCF continues to share monthly sexual safety newsletters with all staff. During this reporting period, the topics she discussed included Risk Management, Staff improperly entering a shower or toilet area unannounced and without justification, staff using sexually explicit, profane, vulgar, degrading, or racially insensitive or offensive language, staff located in areas other than their assigned post, window blocks, confidentiality, and PREA, LEP, taking the initial report of a PREA allegation, PREA Standard 41 (which requires that all IPs are assessed for the risk of victimization and abusiveness, communication, consistency, intervene, authority, and updated PREA information.

Lastly, during all compliance visits, the Monitor and her Associate noticed posters and flyers throughout the facility mandating zero tolerance toward all forms of sexual abuse and sexual harassment and providing methods of reporting any incident of such.

**Recommendations re A. General Policies and Procedures ¶ 16:**

No recommendation.

**C. Camera Management**

¶ 26 NJDOC has contracted with an expert who has conducted a review of the Edna Mahan Camera Plan, including a review of each camera's placement. As a result of that review, cameras are strategically placed to maximize supervision while protecting privacy. Edna Mahan will develop and implement camera management policies and procedures in accordance with this Agreement.

**Requirements:**

¶ 10 During the first nine (9) months following the Effective Date, NJDOC and Edna Mahan will ensure the policies and procedures related to the topics specified below are drafted and/or revised in accordance with this Agreement and to incorporate gender-responsive strategies, as applicable. NJDOC and Edna Mahan shall provide any policies and procedures developed or revised in accordance with this Agreement to the Monitor for comment and approval to accomplish the timeframes in this Agreement. The Monitor will provide feedback on these policies and procedures promptly to Edna Mahan, but at all times within thirty (30) days:

¶ 10 c Camera Management

¶ 27 Video surveillance may be used to supplement, but must not be used to replace, rounds by correctional officers

¶ 29 Edna Mahan shall ensure substantial video coverage of all of the primary areas frequented by prisoners. These areas consist of housing areas, entrances to shower and toilet areas, congregate activity areas (dining hall, yards, chapel), visiting rooms, entry and exits including vehicle access points and housing unit entry, stairways and stairwells, congregate areas of prisoner living units, and hallways. Video coverage need not be contemporaneously monitored  
The Camera management policies and procedures will include the locations where cameras have been placed

**Monitor's Measure of Compliance re C. Camera Management ¶ 26:**

- Level 1 and Level 3 Policy on Camera Management drafted and/or revised by May 24, 2022
- Level 3 Policy on Camera Management signed by Edna Mahan Administrator by August 24, 2022
- Any memos, written directives from the Commissioner, Deputy Commissioner and/or Administrator that addresses procedures, and practices at Edna Mahan regarding camera management
- Random review of policies during onsite visit

**Steps taken by NJDOC and EMCF towards implementation C. Camera Management ¶ 26:**

**8/24/25 Status Report**

NJDOC continues to maintain compliance with Level I/III Internal Management Procedures #CUS.001.BWC.01, titled “Use of Body Worn Cameras (BWC)” and #CUS.001.CRP.01, which covers “Camera Review Procedures.”.

**Monitor’s Finding of Compliance re C. Camera Management ¶ 26:**

**☒ Substantial Compliance**

☐ Partial Compliance

☐ Non-compliance

☐ N/A not required until [ date ]

☐ N/A monitor granted an extension until [ date ]

**Monitor’s Discussion re C. Camera Management ¶ 26:**

On December 21, 2023, the Division of Operations revised Level 1/3 Internal Management Procedure # CUS.001.CRP.01, titled “Camera Review Procedures”.

Additionally, on February 23, 2024, the Division of Operations revised Level 1/3 Internal Management Procedure #CUS.001.BWC.01, titled “Use of Body Worn Cameras (BWC).

**Recommendations re C. Camera Management ¶ 26:**

No recommendation

**C. Camera Management**

- ¶ 28 All video shall be retained for at least 30 days, unless an unusual occurrence such as an alleged assault or sexual abuse, or display of contraband, occurs in an area surveilled, in which case the video shall be preserved until the matter is fully investigated and prosecuted or dismissed by authority of the Commissioner, or at least five years, whichever is longer.

Requirements:

- ¶ 25 Video surveillance may be used to supplement, but must not be used to replace, rounds by correctional officers.

**Monitor's Measure of Compliance re C. Camera Management ¶ 28:**

- Level 1 and Level 3 Policy on Camera Management drafted and/or revised by May 24, 2022 includes requirement that all video shall be retained for at least 30 days, unless an unusual occurrence such as an alleged assault or sexual abuse, or display of contraband, occurs in an area surveilled, in which case the video shall be preserved until the matter is fully investigated and prosecuted or dismissed by authority of the Commissioner, or at least five years, whichever is longer
- Level 3 Policy on Camera Management signed by Edna Mahan Administrator by August 24, 2022 includes requirement that all video shall be retained for at least 30 days, unless an unusual occurrence such as an alleged assault or sexual abuse, or display of contraband, occurs in an area surveilled, in which case the video shall be preserved until the matter is fully investigated and prosecuted or dismissed by authority of the Commissioner, or at least five years, whichever is longer
- Any memos, written directives from the Commissioner, Deputy Commissioner and/or Administrator that addresses the requirement that all video shall be retained for at least 30 days, unless an unusual occurrence such as an alleged assault or sexual abuse, or display of contraband, occurs in an area surveilled, in which case the video shall be preserved until the matter is fully investigated and prosecuted or dismissed by authority of the Commissioner, or at least five years, whichever is longer
- Random review of policies during onsite visit
- Interview with staff and leadership team at EMCF about the requirement that all videos shall be retained for at least 30 days during onsite visit

**Steps taken by NJDOC and EMCF towards implementation C. Camera Management ¶ 28:**

**8/24/25 Status Report**

NJDOC maintains compliance with CUS.001.CRP.01 Camera Review Procedures, which mandates all video downloads are retained for a minimum of 90 days and are available for review upon request. Data retention schedules ensure video footage preserved for a minimum of 30 days or longer if incidents occur.

The EMCF Training Department commenced with training in early January 2025 which contained review of revisions made to policies CUS.001.BWC.01 Body Worn Cameras, Level 3 Custody Directive 124 Policy Use of Body Worn Cameras (BWC), and CUS.001.CRP.01 Camera Review Procedures.

**Monitor's Finding of Compliance re C. Camera Management ¶ 28:**

**[X] Substantial Compliance**

- ☐ Partial Compliance
- ☐ Non-compliance
- ☐ N/A not required until [ date ]
- ☐ N/A monitor granted an extension until [ date ]

**Monitor's Discussion re C. Camera Management ¶ 28:**

NJDOC Division of Operations Internal Management Procedure 1/3 #CUS.001.CRP.01, titled "Camera Review Procedures," states, "All fixed camera videos shall be retained for at least 30 days. In the case of an unusual occurrence— including but not limited to an alleged assault, sexual abuse or harassment, or a display of contraband—all existing video surveillance that is relevant to the occurrence shall be preserved by SID. All evidence shall be preserved by SID in conformity with Attorney General Guidelines and case law, including, but not limited to, logging evidence to maintain the chain of custody. Evidence may be destroyed only after the matter is fully investigated and prosecuted or dismissed by authority of the Commissioner, or at least five (5) years, or when legally permissible, whichever is longer.

Additionally, NJDOC Division of Operations Internal Management Procedure I/3 #CUS.001.CRP.01 titled "Camera Review Procedures" states, "All BWC videos are retained for at least 185 days. Any video that is tagged with a use of force is automatically

saved for a minimum of three (3) years. Any videos tagged with either Code 66 (suicide/attempted suicide) or Officer Injury are retained until manually deleted.” This policy was revised on December 21, 2023.

The camera system at EMCF routinely retains video footage for at least 30 days, and depending upon the type of camera system, footage can be retained for up to eight months. If there is an active investigation, the video coverage of that incident would be retained “indefinitely.” Video from the body-worn cameras (BWC) is also routinely retained for at least 30 days and can be “tagged,” in which case it, too, can be retained indefinitely.

**Recommendations re C. Camera Management ¶ 28:**

No recommendation

**C. Camera Management**

¶ 29 Camera management policies and procedures, including the locations where cameras have been placed, will be reviewed by Edna Mahan at least annually to ensure that they are serving their goal of maximizing supervision. To the extent that any changes to the Camera Management policies and procedures, or to a camera location, need to be made, they will be made within 30 days of the completion of the annual review. If a change cannot be made within 30 days, the reason for exceeding 30 days will be documented and notice of the proposed change and reason for exceeding 30 days will be provided to DOJ. NJDOC and Edna Mahan will also provide to DOJ confirmation of completed change once it occurs.

Requirements:

- ¶ 15 Edna Mahan will annually review its policies and procedures, revising them as it deems necessary. Any revisions to the policies and procedures will be submitted to DOJ for approval in accordance with paragraph 12
- ¶ 25 Video surveillance may be used to supplement, but must not be used to replace, rounds by correctional officers
- ¶ 29 To the extent that any changes to the Camera Management policies and procedures, or to a camera location, need to be made, they will be made within 30 days of the completion of the annual review
- ¶ 29 If a change cannot be made within 30 days, the reason for exceeding 30 days will be documented and notice of the proposed change and reason for exceeding 30 days will be provided to DOJ
- ¶ 29 NJDOC and Edna Mahan will also provide to DOJ confirmation of completed change once it occurs

**Monitor's Measure of Compliance re C. Camera Management ¶ 29:**

- Level 3 Policy on Camera Management drafted and/or revised by May 24, 2022, includes expectation that Camera management policies and procedures will be reviewed at least annually.
- Written report of annual review
- Documentation that changes recommended by annual review have been completed within 30 days of the review
- Monitor will review PREA incident reports, prisoner grievance investigations and PREA investigations conducted by NJDOC Special Investigations. These reviews will determine if the video surveillance system is being used appropriately, consistent with the requirement to provide maximum supervision.

**Steps taken by NJDOC and EMCF towards implementation C. Camera Management ¶ 29:**

**8/24/25 Status Report**

EMCF remains compliant with CUS.001.CRP.01 Camera Review Procedures which requires weekly video reviews totaling at least 20 hours per month, with 5 hours in "live-time." Supervisors document and address any issues found. Video is kept for at least 90 days and can be reviewed upon request. At EMCF, the Media Technician and Custody representative perform regular inspections and document camera conditions. These tours are documented and reported to EMCF leadership. Fifteen (15) new cameras were installed in various locations throughout EMCF during this reporting period.

**Monitor's Finding of Compliance re C. Camera Management ¶ 29:**

**[X] Substantial Compliance**

- ☐ Partial Compliance
- ☐ Non-compliance
- ☐ N/A not required until [ date ]
- ☐ N/A monitor granted an extension until [ date ]

**Monitor's Discussion re C. Camera Management ¶ 29:**

On February 19, 2025, a Camera Review Committee conducted a thorough camera tour of EMCF. The committee included Amelia Renshaw, EMCF IPCM; EMCF Major Ilg; and Brittany Holley, EMCF Media Tech.

In addition to the annual camera location review, Edna Mahan Media Tech performs regular weekly comprehensive camera inspections with a representative from Custody. These inspections take an entire day, as each camera is inspected and checked for angle placement, feed, and recorded footage. Additionally, Assistant Superintendent Renshaw conducts weekly tours of the entire EMCF campus, including the Satellite Building. Part of this tour involves reviewing the camera placement. These tours are documented and submitted to the EMCF leadership team monthly.

The Monitor and the DOJ received copies of the Camera Review audit report on February 26, 2025. EMCF has 1045 camera views, and three types of cameras are utilized for maximum footage and camera angles: Johnson Control, standalone, and New Jersey Business Systems. Johnson Control cameras are placed on the corners of buildings. Many outdoor cameras have been



reconfigured to include motion detection and audible alarms, serving to notify Center Control of any potential breaches to the perimeter.

Based on concerns identified by the Monitor and the DOJ during a past compliance visit (September 2024), the Camera Committee prioritized the Food Service A area. The building is equipped with both Johnson Control cameras and standalone cameras. The request is currently under review with the Capital Planning Unit. In the meantime, Edna installed four (4) additional wireless cameras on June 18, 2025, and has plans to install an additional four (4) wired cameras in the food service area. The plan is to replace these cameras with Johnson Control cameras when they are approved/received. EMCF submitted a formal request to the NJDOC Capital Planning Construction Unit (CPCU) to install Johnson Control cameras in the kitchen area in February 2025 but has not received a response. A follow-up email was sent to the CPCU on August 12, 2025; awaiting a response.

#### **Recommendations re C. Camera Management ¶ 29:**

It is recommended that EMCF continue to review the placement of the cameras annually to ensure that they are serving their goal of maximizing supervision. Additionally, it is recommended that any changes to the Camera Management policies and procedures or to a camera location needed to be made will be made within 30 days of the completion of the annual review.

**D. Staffing**

- ¶ 30 Within four months of the Effective Date, Edna Mahan shall develop a new staffing plan, designating the necessary security and custody posts to be staffed at Edna Mahan, based on gender-responsive principles, that provides for adequate security staffing levels, in accordance with the PREA requirements delineated in 28 C.F.R. § 115.13(a), to protect prisoners from sexual abuse and to achieve compliance with this Agreement on the timelines set out in this Agreement. Edna Mahan's staffing plan shall be subject to review and approval by DOJ, which approval shall not be unreasonably withheld. The staffing plan will be reassessed annually by Edna Mahan in accordance with Paragraph 34 of this Agreement.

Requirements:

- ¶ 31 The Edna Mahan staffing plan shall designate gender-restricted posts at Edna Mahan, through a process that ensures that any such restriction complies with Title VII of the Civil Rights Act of 1964, as amended, 42 U.S.C. §§ 2000e, et seq., and make efforts to ensure that the requirements are met for bona-fide occupational qualifications.
- ¶ 34 For the annual reassessment of the staffing plan, NJDOC and Edna Mahan, in consultation with the Department-wide PREA Coordinator and Edna Mahan's PREA Compliance Manager, shall assess, determine, and document whether adjustments are needed to the Edna Mahan staffing plan, and implement such adjustments. The annual reassessment will include documentation of the following information:
- a. An evaluation of existing staffing levels and need for adjustments;
  - b. A listing of each post and position needed;
  - c. The number of hours needed for each post and position;
  - d. A listing of staff, by gender, working overtime at Edna Mahan and the amount of overtime worked by each staff member;
  - e. A listing of supervisors by gender working overtime at Edna Mahan; and
  - f. Edna Mahan's assessment of its ability to comply with the staffing plan.
- ¶ 17 To the extent that a Party to this Agreement requires an extension on the timeframes set forth in this Section, the Party may request an extension, which will not be unreasonably denied by the other Party.

**Monitor's Measure of Compliance re D. Staffing ¶ 30:**

- Staffing plan developed by December 24, 2021
- Staffing plan included specifics of the security and custody posts and adequate security staffing levels
- Staffing plan designates gender responsive posts

**Steps taken by NJDOC and EMCF towards implementation D. Staffing ¶ 30:**

**8/24/25 Status Report**

A staffing plan annual review and assessment was submitted to the Federal Monitor and DOJ on February 24, 2025. Through collaboration with the Moss Group, the plan submitted was compliant with PREA standards. In order to maintain compliance with the terms of this Agreement, NJDOC will submit a reassessed staffing plan every 12 months.

In response to ongoing staffing shortages, the National Institute of Corrections (NIC) offered a virtual, hands-on training program to help correctional agencies conduct structured staffing analyses for custodial line officers and first-line supervisors. Over a five-month period (March – July 2025), selected agencies—including the NJDOC—formed a five-member Staffing Analysis Implementation Team (SAIT) from one designated facility. NJDOC selected Edna Mahan Correctional Facility (EMCF). The team included Administrator Fusaro, Major Karpew, Lt. Hubert, Lt. Montero, and Lt. Krok. The team participated in eight (8) two-hour virtual sessions and completed practical intersession assignments with coaching from NIC. The program covered pre-planning, live instruction, practical exercises, and report development, and the team analyzed facility, staffing, population, and agency data to identify staffing deficiencies. A final staffing analysis report, with a focus on EMCF, but applicable across the agency, was presented at the final meeting on July 14, 2025.

Activities performed throughout the five (5) month program include:

- Establishment of a five-member SAIT team
- Completion of eight, two-hour virtual sessions over four months
- Completion of practical assignments between sessions
- Analyzation of facility, staffing, population, and agency data to identify inefficiencies
- Completion of a staffing analysis of custodial line officers and first-line supervisors
- Production of a final staffing analysis report

**Monitor's Finding of Compliance re D. Staffing ¶ 30:**

**☒ Substantial Compliance**

☐ Partial Compliance

☐ Non-compliance

☐ N/A not required until [ date ]

☐ N/A monitor granted an extension until [ date ]

**Monitor's Discussion re D. Staffing ¶ 30:**

The Monitor received a staffing plan on February 25, 2022. On February 24, 2023, the Monitor and the DOJ received an updated annual staffing plan dated February 15, 2023. On February 22, 2024, the Monitor and the DOJ received an updated annual staffing plan dated February 21, 2024. And on February 24, 2025, the Monitor and the DOJ received a third annual staffing plan update.

**Recommendations re D. Staffing ¶ 30:**

Continue to conduct annual reassessments of Edna Mahan's staffing plan.

**D. Staffing**

¶ 32 Edna Mahan will take steps to staff the facility based on the staffing plan within one fiscal year of the completion of each staffing plan. NJDOC intends to seek amendment to the consent order in the matter of Csizmadia v. Fauver, Civ. No. 88-786, to enable compliance with this provision. In circumstances where the staffing plan is not complied with, Edna Mahan shall document and justify all deviations from the plan

Requirements:

**Monitor's Measure of Compliance re D. Staffing ¶ 32:**

- Documentation that EMCF has taken steps to staff the facility based on the staffing plan by January 1, 2023.
- Documentation that NJDOC has tried to amend the consent order in the matter of Csizmadia v. Fauver, Civ. No. 88-786.
- Documentation that EMCF justifies all deviations from the staffing plan, when the staffing plan is not complied with

**Steps taken by NJDOC and EMCF towards implementation D. Staffing ¶ 32**

**8/24/25 Status Report**

NJDOC's efforts to revise the Csizmadia Consent Order are currently awaiting resolution. Upon reaching an agreement or, if relevant, upon obtaining a court decision, NJDOC will provide the pertinent information to both the DOJ and the Federal Monitor.

**Monitor's Finding of Compliance re D. Staffing ¶ 32:**

**[X] Substantial Compliance** - The Monitor concluded that Substantial Compliance was achieved solely based on a paragraph stating that "Edna Mahan will **take steps** to staff the facility according to the staffing plan." NJDOC and EMCF have taken significant steps in recruiting and assigning staff to EMCF. However, the Monitor continues to be concerned that EMCF may not be capable of staffing the facility to the levels outlined in the plan.

☐ Partial Compliance

☐ Non-compliance

☐ N/A not required until [ date ]

☐ N/A monitor granted an extension until [ date ]

**Monitor's Discussion re D. Staffing ¶ 32:**

Edna Mahan and NJDOC has taken take steps to staff the facility based on the staffing plan and, when the staffing plan is not complied with, Edna Mahan documents and justifies all deviations from the plan on a quarterly basis. And, in spite of their best efforts, EMCF continues to loss staff faster than they gain staff. During this reporting period, EMCF lost two (2) female officers and gained only one (1). And lost a total of 6 male officers and gained only two (2); for a total net loss of five (5) officers. The primary challenge in meeting the requirement to staff the facility according to the staffing plan lies in recruiting and retaining staff, which remains an ongoing issue for both NJDOC and Edna Mahan.

NJDOC has taken steps to seek an amendment to the consent order in the matter of *Csizmadia v. Fauver*, Civ. No. 88-786. To provide context, below are excerpts taken from a motion to modify this consent order, filed by the Acting Attorney General on December 1, 2021:

*The Csizmadia Consent Order arose from two interrelated cases. The first case, Gertrude Csizmadia, et al v. William Fauver, Civil Action No. 88-786, was filed on February 11, 1988. The Consent Order limits the number of gender-restricted posts to assignments that entail routine strip searches. Strip and cavity searches of prisoners by opposite gender correctional officers are permissible only under emergent circumstances. To allow for staffing flexibility and compliance with relief staffing requirements, the Csizmadia Consent Order allowed for twenty percent of "special assignment posts" to be gender restricted.*

*Rule 60(b)(5) permits relief from an order if: (1) a significant change in law; (2) a significant change in factual conditions; (3) that "a decree proves to be unworkable because of unforeseen obstacles" or (4) that enforcement of the decree is detrimental to the public interest. The department petitioned that all four of the above apply.*

There has been no decision on this matter since the motion was made in 2021.

On January 2, 2025, the Monitor and the DOJ received a "Collapsed Post Report" for the fourth quarter (October, November, and December) of 2024. On April 1, 2025, the Monitor and the DOJ received a "Collapsed Post Report" for the first quarter (January, February, and March) of 2025. This report documents and justifies deviations from the current staffing plan.

The Monitor recognizes the challenges NJDOC and Edna Mahan face in both recruiting and retaining staff, a difficulty that reflects a broader, nationwide issue. The agency has invested significant time and resources into recruitment efforts, which has resulted in larger cadet classes over the last two academy sessions.

However, many barriers to successful hiring and retention are tied to bureaucratic processes outside of NJDOC's control—such as the Physical Ability Test mandated by the Police Training Commission, an issue previously discussed in the compliance narrative report. During this reporting period, NJDOC once again prioritized assigning academy graduates to EMCF. Despite these efforts and the addition of new staff, concerns remain that EMCF will not be able to reach the staffing levels outlined in its plan without substantial systemic changes.

**Recommendations re D. Staffing ¶ 32:**

NJDOC continues to look for ways to ensure Edna Mahan is staffed to its required staffing level.

**D. Staffing**

¶ 33 NJDOC and Edna Mahan shall develop and implement a plan to recruit and retain women correctional officers at Edna Mahan in a manner that complies with Title VII of the Civil Rights Act of 1964, as amended, 42 U.S.C. §§ 2000e, et seq. Edna Mahan's recruitment and retention plan shall be subject to review and approval by DOJ, which approval shall not be unreasonably withheld.

Requirements:

¶ 32 Demonstration that NJDOC has taken steps to implement the staffing plan within one fiscal year of its completion

**Monitor's Measure of Compliance re D. Staffing ¶ 33:**

- Recruitment and Retention plan developed and submitted to DOJ and Monitor by April 11, 2022
- Recruitment and Retention plan implemented by December 24, 2022
- Quarterly staffing update, which identifies list of staff hired at EMCF by gender (as required by ¶ 35)
- Interview with NJDOC Assistant Commissioner for Human Resources/Labor
- Interview with NJDOC Assistant Commissioner for Women's Services

**Steps taken by NJDOC and EMCF towards implementation D. Staffing ¶ 33:**

**8/24/2025 Status Report**

NJDOC continues to follow the Edna Mahan Correctional Facility Recruitment & Retention Plan for Women Correctional Officers. The Department continues to leverage various platforms such as social media, online recruiting sites (including Zip Recruiter, Indeed, and LinkedIn), and internal wellness programs to recruit and retain officers. The following activities took place throughout the reporting period:

**Advertising:**

- The Positive Solutions advertising campaign commenced in June of 2025, and it is making a significant positive impact on our recruitment efforts, resulting in 2,680 unduplicated female leads since its launch.
- The NJDOC maintains a dedicated recruitment website (<http://www.JoinNJDOC.gov>), featuring real-time recruitment information, the NJDOC hiring process, qualification information, salary and benefits information, career opportunities and a photo carousel. Additionally, the website features a *Women of NJDOC* section under the diversity tab.



**Recruitment:**

- The NJDOC Division of Training, Recruitment, and Professional Development is working on building out a comprehensive automated email system to keep perspective candidates informed and engaged in the recruitment process which allows the recruiting staff to provide a more personal experience for the candidates through phone and email communications. This approach will assist in the reduction of candidates who fall out of the process.
- In 2025, the salary received while enrolled in the Academy has increased to \$48,000; upon Academy graduation the salary increases to \$53,200. The salary increases will continue to be posted on the recruiting website as a recruitment tool.
- EMCF Administrator Bryan Fusaro and several EMCF Custody Staff members were present at the Training Academy in July 2025 to speak with Class 258, including those who were assigned to EMCF. The class was provided details about EMCF, the goals, mission, and values of the Administrative Team, and the expectations of being a Correctional Police Officer at the state's only women's facility. The overall feedback was positive.
- The NJDOC Division of Training, Recruitment, and Professional Development continues to utilize a female supervisor to act as the Women in Law Enforcement liaison. This supervisor has been tasked with networking with organizations which promote women in the law enforcement field. These organizations include National Organization of Black Women in Law Enforcement, New Jersey Women in Law Enforcement, and the National Association of Women Law Enforcement Executives.
- The NJDOC will continue to conduct a residential optional academy for future classes on a permanent basis. Trainees have the option to go home at the end of each training day in an effort to attract applicants that would be precluded from attending due to family or childcare obligations. Trainees will also have the option to change their non-residential status throughout the academy cycle, if necessary.
- The NJDOC continues its equipment reimbursement program for academy trainees, with up to \$1,100 to assist with reducing financial barriers.
- The Final Assessment requirement has been removed from the Police Training Commission (PTC) required curriculum. After the Trainee successfully completes the Mid-Term Assessment, the physical requirement has been obtained.

**Mentoring and Retention:**

- The NJDOC offers flexible scheduling for applicants and recruits, with mentoring support to help them prepare for training.
- The Wellness Committee at EMCF organized numerous events to support officers and boost morale, such as the Super Bowl Pre-Game Party; Let's Restock the Pantries Food Drive; Wednesday Wellness Walks; Bring your Child to Work Day; and Public Employee Appreciation Week.

- The NJDOC appointed a woman supervisor as the Women in Law Enforcement liaison. This person works with groups that support women in law enforcement to help improve recruitment and retention.
- The NJDOC continues to work to obtain computer and email access for all custody staff. At the end of this project, each NJDOC officer will have the ability to log-on to DOCNET (NJDOC intranet), access policies, emails, and web related content. To date over 4,000 email addresses have been issued. This project is anticipated to be complete by the end of 2025.
- The NJDOC consulted with subject matter experts, The Moss Group, to offer various leadership activities with EMCF staff throughout the reporting period in an effort to engage leaders, improve communication and inspire. This included the use of the CoreStrengths Assessment Tool which provides individuals with a better understanding of what motivates them, how they deal with conflict, and how they interact with others in the workplace.
- Members of EMCF leadership continued to meet with assigned subject matter expert mentors throughout the reporting period. Staff are encouraged to utilize these meetings to problem-solve current issues and brainstorm ways to improve upon current systems.
- The NJDOC consulted with subject matter experts during the reporting period who developed the tool, “52 Tips: Operational Excellence for Working with Incarcerated Women.” This guide was designed for custody majors to actively lead, reflect, and implement practices that improve the daily operations of the facility by emphasizing three essential values: safety, dignity, and respect. The guide was used to implement an EMCF “Culture Campaign” which introduces monthly topics to custody staff focused on critical practice. The first topic, door security, introduced on August 8, 2025 challenges staff to look at how an everyday responsibility directly connects to the Department’s commitment to safety, dignity, and respect. Future topics will aim to transform daily operations through gender-responsive practice, such as safety and privacy in all areas of the facility, being respectful in vulnerable moments, and carrying out searches with dignity and respect.

**Social Media and Community Engagement:**

- The NJDOC is using social media to engage and attract women officers. Regular posts on platforms like Twitter, Facebook, Instagram, and YouTube help spread the word about job opportunities and support for women staff.

Academy Class #258 graduated on August 12, 2025. This class began with twenty-three (23) female candidates and graduated thirteen (13). Eight (8) male recruits and three (3) female recruits from this graduating class have been assigned to EMCF.

**Monitor's Finding of Compliance re D. Staffing ¶ 33:**

**[X] Substantial Compliance** - The Monitor determined that Substantial Compliance was met solely because Edna Mahan has taken steps to staff the facility in accordance with the staffing plan. While these efforts fulfill the technical requirement, the Monitor remains seriously concerned that the facility cannot achieve the staffing levels identified in the plan without significant internal and external reforms within the State of New Jersey. Since the Settlement Agreement began, Edna Mahan has experienced a net loss of 28 female officers, with 52 departures and only 24 new hires. Unless bureaucratic barriers—such as the Police Training Commission's current Physical Ability Test requirements for female applicants—are addressed, NJDOC is unlikely to recruit, retain, or train a sufficient number of women correctional officers to meet the staffing plan.

☐ Partial Compliance

☐ Non-compliance

☐ N/A not required until [ date ]

☐ N/A monitor granted an extension until [ date ]

**Monitor's Discussion re D. Staffing ¶ 33:**

The Monitor and the DOJ received a Recruitment and Retention plan dated August 24, 2022. On February 20, 2025, the Monitor and the DOJ received an update on the implementation of each strategy. NJDOC continues to follow the Edna Mahan Correctional Facility Recruitment & Retention Plan for Women Correctional Officers. NJDOC has identified the extensive activities they have undertaken in their status report, as written above. These activities include advertising, recruiting, mentoring, retention, social media, and community engagement.

Additionally, Academy Class #258 graduated during this past reporting period and NJDOC continues to make assignments to EMCF a priority. Three (3) female recruits and eight (8) male recruits from this graduating class have been assigned to EMCF (but outside of this reporting period).

However, despite all the efforts of NJDOCC/EMCF, they have not been able to recruit and retain women correctional officers at EMCF. In fact, since August 24, 2021, the date of the Settlement Agreement, Edna Mahan has lost 52 female officers and gained only 24, resulting in a net loss of 28 female staff since the beginning of the Settlement Agreement.

Unless and until bureaucratic changes are made at the Police Training Commission (such as adjusting the current requirements for the Physical Ability Test for female applicants), the NJDOC may never be able to recruit, retain, or train enough women correctional officers to staff the facility according to the staffing plan. In recent compliance reports, the Monitor has

recommended that the NJDOC collaborate with the Police Training Commission to modify the requirements to reflect reasonable physical standards for female applicants. This obviously has not been able to happen. The Monitor recommends that NJDOC and the Police Training Commission continue to focus on this issue.

**Recommendations re D. Staffing ¶ 33:**

Continue implementing the strategies identified in the “Recruitment and Retention Plan for Women Correctional Officers.”

The decision to modify the requirements to reflect reasonable physical requirements for female applicants be reviewed at a higher level than NJDOC and the Police Training Commission.

**D. Staffing**

- ¶ 34 For the annual reassessment of the staffing plan, NJDOC and Edna Mahan, in consultation with the Department-wide PREA Coordinator and Edna Mahan's PREA Compliance Manager, shall assess, determine, and document whether adjustments are needed to the Edna Mahan staffing plan, and implement such adjustments. The annual reassessment will include documentation of the following information:
- a. An evaluation of existing staffing levels and need for adjustments;
  - b. A listing of each post and position needed;
  - c. The number of hours needed for each post and position;
  - d. A listing of staff, by gender, working overtime at Edna Mahan and the amount of overtime worked by each staff member;
  - e. A listing of supervisors by gender working overtime at Edna Mahan; and
  - f. Edna Mahan's assessment of its ability to comply with the staffing plan.

Requirements:

**Monitor's Measure of Compliance re D. Staffing ¶ 34:**

Documentation that staffing plan reassessed submitted to Monitor February 25, 2023 (or one year after the completion of the staffing plan required in paragraph 30);

- a. The staffing plan includes the following:
- b. An evaluation of existing staffing levels and need for adjustments;
- c. A listing of each post and position needed;
- d. The number of hours needed for each post and position;
- e. A listing of staff, by gender, working overtime at Edna Mahan and the amount of overtime worked by each staff member;
- f. A listing of supervisors by gender working overtime at Edna Mahan; and
- g. Edna Mahan's assessment of its ability to comply with the staffing plan.

**Steps taken by NJDOC and EMCf towards implementation D. Staffing ¶ 34:**

**8/24/25 Status Report**

NJDOC will conduct an annual reassessment of the EMCf staffing plan according to the terms of this Agreement.

**Monitor's Finding of Compliance re D. Staffing ¶ 34:**

**[X] Substantial Compliance**

- ☐ Partial Compliance
- ☐ Non-compliance
- ☐ N/A not required until
- ☐ N/A monitor granted an extension until [ date ]

**Monitor's Discussion re D. Staffing ¶ 34:**

On February 20, 2025, the Monitor and the DOJ received an updated annual staffing plan dated February 20, 2025. The document included evaluating existing staffing levels and needs for adjustment, listing each post and position needed, and the number of hours needed for each post and position. The plan also included listing all custody staff on each shift, a listing of staff, by gender, working overtime at Edna Mahan and the amount of overtime worked by each staff member, and a listing of supervisors by gender working overtime at EMCF.

On January 2, 2025, the Monitor and the DOJ received a "Collapsed Post Report" for the fourth quarter (October, November, and December) of 2024. On April 1, 2025, the Monitor and the DOJ received a "Collapsed Post Report" for the first quarter (January, February, and March) of 2025.

During this reporting period, EMCF gained three (3) new officers and had eight (8) officers leave (retire, transfer, etc.). There was a graduating Academy class during this reporting period, and eleven (11) new officers from that class will have been assigned to EMCF, but outside of this reporting period. These eleven cadets will be included in the next reporting period.

**Recommendations re D. Staffing ¶ 34:**

Continue to conduct annual reassessments of EMCF's staffing plan.

**D. Staffing**

- ¶ 35 Quarterly, Edna Mahan will provide a Staffing Update to the Monitor and DOJ and shall include the following information:
- a. A listing of staff hired at Edna Mahan, by gender and positions filled; and
  - b. A listing of staff who ended their employment at Edna Mahan, including gender, position, and reason for separation.

Requirements:

**Monitor's Measure of Compliance re D. Staffing ¶ 35:**

Quarterly staffing reports from EMCF, submitted on January 5, 2022 (for October, November, and December 2021)

**Steps taken by NJDOC and EMCF towards implementation D. Staffing ¶ 35:**

**8/24/25 Status Report**

During this reporting period, the Monitor received two Staffing Updates. The first covered January, February, and March 2025 and the second covered April, May, and June 2025. Each update provided details on new hires and staff departures at Edna Mahan, including information on gender, positions, and reasons for separation.

Data from the submitted Quarterly Staffing Updates show that during the months of January – March 2025:

- EMCF has received through new hire, promotion, or transfer: 16 new staff (12 females);
- Zero (0) staff members transferred to another agency;
- Two (2) staff members (0 female) retired;
- Zero (0) staff members were removed;
- One (1) staff member (0 female) resigned;
- Two (2) staff members (0 female) transferred to another facility.

Data from the submitted Quarterly Staffing Updates show that during the months of April – June 2025:

- EMCF has received through new hire, promotion, or transfer: 4 new staff (2 females);
- One (1) staff member (0 female) transferred to another agency;
- Three (3) staff members (0 female) retired;
- Zero (0) staff members were removed;
- Three (3) staff members (3 female) resigned;
- One (1) staff member (0 female) transferred to another facility.

**Monitor's Finding of Compliance re D. Staffing ¶ 35:**

**☒ Substantial Compliance**

☐ Partial Compliance

☐ Non-compliance

☐ N/A not required until [ date ]

☐ N/A monitor granted an extension until [ date ]

**Monitor's Discussion re D. Staffing ¶ 35:**

The Monitor received two Staffing Updates during this reporting period. The first included data from February, March, and April 2025; the second was for May, June, and July 2025. Both staffing updates included a list of staff hired at Edna Mahan by gender and position, as well as a listing of staff who ended their employment at Edna Mahan, including their gender, position, and reason for separation.

**Recommendations re D. Staffing ¶ 35:**

Continue to provide quarterly Staffing Update to Monitor and DOJ throughout the Settlement Agreement.



**D. Staffing**

¶ 36 NJDOC shall continue to employ an upper-level, Department-wide PREA Coordinator with sufficient time and authority to develop, implement, and oversee its efforts to comply with the PREA standards at Edna Mahan and all of its facilities.

Requirements:

- ¶ 38 NJDOC and Edna Mahan shall ensure that Edna Mahan's PREA Compliance Manager continues to report directly to the Administrator of Edna Mahan with dotted-line reporting to the Department-wide PREA Coordinator. Dotted-line reporting refers to a relationship between an employee and a secondary supervisor who may provide additional oversight and guidance to the employee in the execution of his or her work.
- ¶ 41 NJDOC's PREA Coordinator shall document semi-annual review meetings with the Edna Mahan PREA Compliance Manager, and other supervisors as appropriate, to discuss the Edna Mahan PREA Compliance Manager's activities and job responsibilities during the relevant period.

**Monitor's Measure of Compliance re D. Staffing ¶ 36:**

- NJDOC hires full time Agency PREA Coordinator
- Job description for NJDOC PREA Coordinator
- Interview with NJDOC PREA Coordinator

**Steps taken by NJDOC and EMCF towards implementation D. Staffing ¶ 36:**

**8/24/25 Status Report**

NJDOC continues to employ Ms. Capra as the full-time Agency PREA Coordinator. Ms. Capra has sufficient time and authority to develop, implement, and oversee NJDOC's efforts to comply with the PREA standards at Edna Mahan and all of its facilities.

**Monitor's Finding of Compliance re D. Staffing ¶ 36:**

**[X] Substantial Compliance**

- [ ] Partial Compliance
- [ ] Non-compliance
- [ ] N/A not required until [ date ]
- [ ] N/A monitor granted an extension until [ date ]

**Monitor's Discussion re D. Staffing ¶ 36:**

Sandra Capra, the NJDOC Agency PREA Coordinator, began employment on October 22, 2022. Thus, this paragraph requirement was completed during the third reporting period of this Settlement Agreement. Having someone in this position with sufficient time and authority to develop, implement, and oversee NJDOC's efforts to comply with the PREA standards continues to be very positive.

**Recommendations re D. Staffing ¶ 36:**

No recommendations

**D. Staffing**

¶ 37 NJDOC and Edna Mahan shall designate a full-time (40 hours/week) PREA Compliance Manager who has no other duties within NJDOC or Edna Mahan and who is assigned to oversee PREA compliance at Edna Mahan. This individual will have sufficient authority to coordinate Edna Mahan's efforts to comply with the PREA standards.

Requirements:

¶ 38 NJDOC and Edna Mahan shall ensure that Edna Mahan's PREA Compliance Manager continues to report directly to the Administrator of Edna Mahan with dotted-line reporting to the Department-wide PREA Coordinator. Dotted-line reporting refers to a relationship between an employee and a secondary supervisor who may provide additional oversight and guidance to the employee in the execution of his or her work.

**Monitor's Measure of Compliance re D. Staffing ¶ 37:**

- NJDOC hires full-time EMCF PREA Compliance Manager
- Job description for EMCF PREA Compliance Manager
- Interview with EMCF PREA Compliance Manager

**Steps taken by NJDOC and EMCF towards implementation D. Staffing ¶ 37:**

**2/24/25 Status Report**

NJDOC continues to employ Ms. Renshaw as the full-time PREA Compliance Manager at EMCF. Ms. Renshaw has no other duties within NJDOC or Edna Mahan and is assigned to oversee PREA compliance at Edna Mahan. She has sufficient authority to coordinate Edna Mahan's efforts to comply with PREA standards.

**Monitor's Finding of Compliance re D. Staffing ¶ 37:**

**[X] Substantial Compliance**

[ ] Partial Compliance

[ ] Non-compliance

[ ] N/A not required until [ date ]

[ ] N/A monitor granted an extension until [ date ]

**Monitor's Discussion re D. Staffing ¶ 37:**

On March 28, 2022, Amelia Renshaw was officially appointed as Assistant Superintendent (AS), solely responsible for serving as the PREA Compliance Manager for EMCF. This fulfilled the paragraph's requirement during the Settlement Agreement's second

reporting period. Assistant Superintendent Renshaw is part of Edna Mahan's leadership team and reports directly to the EMCF Administrator. She also maintains a "dotted-line" reporting connection with the Department-wide PREA Coordinator, meaning she receives additional oversight and guidance from this secondary supervisor in carrying out her duties.

Ms. Renshaw continues to work hard as the PREA Compliance Manager, and this full-time position has positively impacted Edna Mahan. The August 4, 2025, meeting minutes with the NJDOC PREA Coordinator and the EMCF Institutional PREA Compliance Manager note that "Overall, IPCM Renshaw continues to display an excellent basis of knowledge of her duties, and PREA standards. She continues to demonstrate not only a willingness to follow policies and procedures as they pertain to compliance with PREA standards but also exhibits an acute thoroughness with regard to thought-provoking questions and discussions. She shows extraordinary initiative when it comes to handling any issue that may arise or when there is a need for change. She is innovative, yet practical, in her approach to handling matters and addressing any situations that may arise. She works well internally with EMCF staff as well as with the Agency PREA Coordinator (APC) and PREA Compliance Unit (PCU) staff, and other departments within the NJDOC. Her efforts at carrying out her duties and responsibilities are to be commended.

Overall, IPCM Renshaw exhibits the utmost professionalism and competence in her role as IPCM at EMCF. She is respectful and respected by both staff and IPs. She has kept up an efficient database and excel spreadsheet tracking system for all PREA allegations and determinations, which is up to date. She continues to be organized and diligent in maintaining all necessary documentation and is able to provide that information easily upon request. IPCM Renshaw continues to update the Lowenstein Sander database (related to the Consent Decree) in addition to her own internal tracking system effectively and efficiently. She continues to be an extreme asset in her role as IPCM, as a member of the Administrative Team at EMCF, and as a partner to the APC and PCU staff. IPCM Renshaw is simply an invaluable asset to EMCF and the NJDOC, as well as to the APC and PREA Compliance Unit.

**Recommendations re D. Staffing ¶ 37:**

No recommendation

**D. Staffing**

¶ 39 NJDOC and Edna Mahan shall develop a job description for Edna Mahan's PREA Compliance Manager with expected responsibilities and submit this job description to the Monitor and DOJ for review.

Requirements:

¶ 38 NJDOC and Edna Mahan shall ensure that Edna Mahan's PREA Compliance Manager continues to report directly to the Administrator of Edna Mahan with dotted-line reporting to the Department-wide PREA Coordinator. Dotted-line reporting refers to a relationship between an employee and a secondary supervisor who may provide additional oversight and guidance to the employee in the execution of his or her work.

**Monitor's Measure of Compliance re D. Staffing ¶ 39:**

Job description for EMCF PREA Compliance Manager

**Steps taken by NJDOC and EMCF towards implementation D. Staffing ¶ 39:**

**8/24/25 Status Report**

This requirement has been satisfied.

**Monitor's Finding of Compliance re D. Staffing ¶ 39:**

**[X] Substantial Compliance**

☐ Partial Compliance

☐ Non-compliance

☐ N/A not required until [ date ]

☐ N/A monitor granted an extension until [ date ]

**Monitor's Discussion re D. Staffing ¶ 39:**

This requirement was met during the first reporting period. NJDOC and Edna Mahan developed a job description for Edna Mahan's PREA Compliance Manager, which includes expected responsibilities and direct supervision by the EMCF's Facility Administrator.

**Recommendations re D. Staffing ¶ 39:**

No recommendation

**D. Staffing**

¶ 40 NJDOC and Edna Mahan shall provide training to the Edna Mahan PREA Compliance Manager necessary to fulfill his or her duties.

Requirements:

¶ 38 NJDOC and Edna Mahan shall ensure that Edna Mahan's PREA Compliance Manager continues to report directly to the Administrator of Edna Mahan with dotted-line reporting to the Department-wide PREA Coordinator. Dotted-line reporting refers to a relationship between an employee and a secondary supervisor who may provide additional oversight and guidance to the employee in the execution of his or her work.

**Monitor's Measure of Compliance re D. Staffing ¶ 40:**

- Training Records for EMCF PREA Compliance manager
- Documented "on the job training" provided to EMCF PREA Compliance Manager
- Interview with EMCF PREA Compliance Manager

**NJDOC Discussion: Steps taken by NJDOC and EMCF towards implementation re D. Staffing ¶ 40:**

**8/24/25 Status Report**

The EMCF IPCM continues to receive required training which included a Departmental IPCM Training on December 20, 2024. The EMCF IPCM continues to meet bimonthly with a PREA subject matter expert from The Moss Group.

**Monitor's Finding of Compliance re D. Staffing ¶ 40:**

**[X] Substantial Compliance**

- ☐ Partial Compliance
- ☐ Non-compliance
- ☐ N/A not required until [ date ]
- ☐ N/A monitor granted an extension until [ date ]

**Monitor's Discussion re D. Staffing ¶ 40:**

When she began as the EMCF Institutional PREA Compliance Manager (IPCM), Assistant Superintendent Amelia Renshaw received a 20-page PREA Compliance Manager Reference Guide. This guide identifies the responsibilities of an Institutional PREA Compliance Manager and provides guidance on a variety of duties assigned to the IPCM. The Monitor reviewed this guide and found it very thorough.

During this reporting period, Ms. Renshaw participated in quarterly IPCM training with the PREA Compliance Unit and Making it Work: Supporting PREA Compliance Roles in Real-World Conditions training on 8/13/25. Additionally, Ms. Renshaw continues to meet bimonthly with a PREA subject matter expert from The Moss Group.

IPCM Renshaw has held this position for over three years and believes she receives enough training to fulfill her Facility PREA Compliance Manager duties successfully.

**Recommendations re D. Staffing ¶ 40:**

NJDOC and EMCF continue to provide the training necessary to fulfill her duties to the EMCF PREA Compliance.

**D. Staffing**

- ¶ 41 NJDOC's PREA Coordinator shall document semi-annual review meetings with the Edna Mahan PREA Compliance Manager, and other supervisors as appropriate, to discuss the Edna Mahan PREA Compliance Manager's activities and job responsibilities during the relevant period.

Requirements:

**Monitor's Measure of Compliance re D. Staffing ¶ 41:**

- Meeting minutes between NJDOC's PREA Coordinator and EMCF PREA Compliance Manager submitted to monitor, at least semi-annually, beginning 2022.

**NJDOC Discussion: Steps taken by NJDOC and EMCF towards implementation D. Staffing ¶ 41:**

**8/24/25 Status Report**

The NJDOC Agency PREA Coordinator and IPCM conducted a semi-annual review on August 4, 2025, as required by paragraph 41. The reports were provided to the DOJ and Federal Monitor.

**Monitor's Finding of Compliance re D. Staffing ¶ 41:**

**[X] Substantial Compliance**

- [ ] Partial Compliance  
[ ] Non-compliance  
[ ] N/A not required at this time  
[ ] N/A monitor granted an extension until [ date ]

**Monitor's Discussion re D. Staffing ¶ 41:**

On February 27, 2025 the Monitor and the DOJ received a copy of the meeting minutes held on October 23, 2024, between the NJDOC PREA Coordinator and Edna Mahan's PREA Compliance Manager. The following items were discussed during this meeting: PREA Education/Refreshers, PREA Risk Assessment/ "At-Risk" Log, Staff PREA Training Updates, Investigation Status, Incident Reviews, Facility Tours, Camera Audit and Analysis, Retaliation Monitoring, Notification Compliance, LEP Issues, PREA Physical Plant Upgrades, and Signage.

It is also noted that "that there continues to be open lines of communication between APC and IPCM Renshaw, with in-person visits, as well as frequent communications via e-mail and phone that consistently occur year- round between the parties. At all



prior meetings, the parties engage in pertinent exchanges of information for discussion and continued improvement in areas of concern and/or need at EMCF. IPCM Renshaw keeps the Agency PREA Coordinator apprised appropriately and in detail.

APC and IPCM Renshaw continue to work collaboratively in their respective roles with regard to the best interests of EMCF. APC Capra's tenure with the Department began in October 2022 and the relationship between the parties has continued to strengthen. IPCM Renshaw continues, as needed, to supply APC with historical information as to efforts of compliance at EMCF with the Consent Decree to date. The parties continue to confer on a multitude of issues that impact EMCF and work well with other staff at EMCF and department-wide, as well as outside stakeholders such as The Moss Group".

**Recommendations re D. Staffing ¶ 41:**

NJDOC's PREA Coordinator continues to hold and document semi-annual review meetings with the Edna Mahan PREA Compliance Manager.

**D. Staffing**

¶ 42 Policies and procedures at Edna Mahan shall require that contractors and volunteers who have contact with prisoners but are not directly supervised by NJDOC or Edna Mahan employees comply with Edna Mahan's sexual abuse and sexual harassment policies and procedures.

Requirements:

**Monitor's Measure of Compliance re D. Staffing ¶ 42:**

- Rosters of all volunteers who completed PREA training
- List of all EMCF volunteers who may have contact with prisoners, as of February 24, 2022.
- Training Curriculum utilized for PREA
- Interviews with at least two volunteers to confirm that required training took place
- Interviews with EMCF volunteer coordinator (Executive Assistant) to discuss process for how volunteers are trained
- Interviews with EMCF PREA Coordinator to discuss process for how volunteers are trained

**NJDOC Discussion: Steps taken by NJDOC and EMCF towards implementation re D. Staffing ¶ 42:**

**8/24/25 Status Report**

Volunteers continue to provide services in areas such as relapse prevention, clubs, chaplaincy, education and reentry services for the incarcerated population. All volunteers have received the mandatory PREA training.

**Monitor's Finding of Compliance re D. Staffing ¶ 42:**

**[X] Substantial Compliance**

[ ] Partial Compliance

[ ] Non-compliance

[ ] N/A not required until [ date ]

[ ] N/A monitor granted an extension until [ date ]

**Monitor's Discussion re D. Staffing ¶ 42:**

NJDOC 001.008 Prevention, Detection and Response of Sexual Abuse and Harassment states that new non-uniformed personnel receive PREA training as part of their Orientation at their respective facilities. In addition, all NJDOC employees, volunteers, and contractors receive at least bi-annual training on their duties and responsibilities under the Department's zero-tolerance policy.

This training includes training on all ten topics listed in §115.31 employee training standard, including the requirement to immediately report any incident or allegation of sexual abuse/sexual harassment to the nearest custody staff member or an on-duty custody supervisor if more appropriate.

All NJDOC employees (custody staff, non-uniformed staff, and civilian staff), contractors, and volunteers receive PREA-specific training on an annual basis. This training is to ensure that they know the current sexual abuse and sexual harassment policies and procedures. The training also focuses on critical issues regarding staff sexual misconduct and the prevention of prison sexual abuse, including the reporting of incidents, as well as first responder responsibilities.”

Additionally, NJDOC 001.008, Prevention, Detection, and Response of Sexual Abuse and Harassment, speaks to contractors and volunteers when identifying specific responsibilities, practices, and/or procedures that staff must follow. This policy was revised on November 21, 2024.

NJDOC Policy IMM.001.004 Zero Tolerance Policy: Prison Sexual Assault states, “Contractors and volunteers are provided information regarding conduct and consequences for violating the NJDOC zero tolerance for sexual abuse and sexual harassment policies.

Reports concerning a contract vendor employee’s unprofessional conduct shall be forwarded to the facility/institution/office site administrator for resolution and shall be reported to law enforcement agencies and to relevant licensing bodies, as appropriate.

The NJDOC reserves the right to terminate the services of a volunteer for violating the NJDOC zero tolerance for sexual abuse and sexual harassment policies. Additionally, any volunteers who engages in sexual abuse shall be prohibited from contact with Incarcerated Persons and shall be reported to law enforcement agencies and to relevant licensing bodies, as appropriate.” This Level 1/3 policy was revised on December 1, 2023, and replaced EMCF’s Level 3 Internal Management Procedure Custody Directive 73.

On August 29, 2025, the Monitor and the DOJ received a listing of the 56 volunteers currently volunteering at Edna Mahan, all of whom have taken PREA training. No volunteer is allowed inside EMCF until they have taken PREA and Undue Familiarity training. There is one volunteer who needs to receive the annual PREA refresher training. It is noted that this volunteer is not allowed to come into EMCF until they complete this annual training. There have been no instances of a volunteer not complying with Edna Mahan’s sexual abuse and sexual harassment policies and procedures during this reporting period.

Additionally, the Monitor spoke with two volunteers who verified that they received this training. Both volunteers knew of their responsibility to report if they learned about an allegation of sexual abuse or sexual harassment. Both volunteers remembered the confidentiality requirement and were adamant about “not saying anything to anyone else.”

The Monitor’s Associate held a focus group with contractors who provide medical and mental health services at Edna Mahan. Everyone in the focus group verified that they had received PREA training and were aware of the expectation to comply with Edna Mahan’s sexual abuse and sexual harassment policies and procedures.

**Recommendations re D. Staffing ¶ 42:**

No recommendation

**E. Training**

NJDOC and Edna Mahan shall ensure that all staff have the adequate knowledge, skill, and ability to prevent, detect, and respond to sexual abuse and sexual harassment at Edna Mahan, and to manage, interact, and communicate appropriately with women prisoners. Accordingly, and specifically:

- ¶ 43 Within six months of the Effective Date, NJDOC and Edna Mahan shall train or retrain all Edna Mahan staff who may have contact with prisoners on the following:
- a. Its zero-tolerance policy for sexual abuse and sexual harassment;
  - b. How to fulfill staff responsibilities under its sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures;
  - c. The right of prisoners to be free from sexual abuse and sexual harassment;
  - d. The right of prisoners and employees to be free from retaliation for reporting sexual abuse and sexual harassment;
  - e. The dynamics of sexual abuse and sexual harassment in confinement;
  - f. The common reactions of sexual abuse and sexual harassment victims;
  - g. How to respond to sexual abuse and sexual harassment, including:
    - i. How to respond professionally and in a victim-centered manner to individuals who report sexual abuse and sexual harassment;
    - ii. How and to whom to report allegations or suspicions of sexual abuse and sexual harassment, including how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities; and
    - iii. How to initiate appropriate first response to initial reports of recent allegations of sexual abuse, pursuant to 28 C.F.R. § 115.64.
  - h. Signs of threatened and actual sexual abuse;
  - i. How to avoid inappropriate relationships with prisoners;
  - j. Gender-responsive principles; and
  - k. How to communicate effectively and professionally with prisoners. This training shall emphasize that verbal abuse, including name calling and the use of sexually explicit, profane, vulgar, or degrading language, will not be tolerated.

Requirements:

**Monitor's Measure of Compliance re E. Training ¶ 43:**

- Rosters of completed PREA, Gender-Responsive, or other subjects noted above training by assigned EMCF staff by February 24, 2022.
- List of all EMCF staff who may have contact with prisoners, including staff who work at other facilities who may work overtime at EMCF (i.e., maintenance, kitchen) and staff assigned to supervise SMCF prisoners at outside locations on February 24, 2022.
- Training Curriculum utilized for PREA
- Training Curriculum utilized for Gender-Responsive
- Training Curriculum utilized to train on any other subjects noted above (not in PREA or Gender-Responsive curriculum)
- List of trainers providing training
- Interviews with staff to confirm that required training took place
- Interviews with trainers who provided training to confirm that required training took place
- Interviews with EMCF training Lieutenant and/or training staff to confirm that required training took place

**Steps taken by NJDOC and EMCF towards implementation E. Training ¶ 43:**

**8/24/25 Status Report**

All staff have received the required training as stipulated in this Agreement.

During the reporting period, Lt. Timothy Wright transitioned into the leadership role of the EMCF Training Department, in place of Lt. Jon Nikischer. Lt. Wright began attending RMS Meetings in April 2025 where he provided updates on training data and future training blocks.

The NJDOC consulted with subject matter expert, The Moss Group, during the reporting period who developed the tool, *"52 Tips: Operational Excellence for Working with Incarcerated Women."* This guide was designed for custody Majors to actively lead, reflect, and implement practices that improve the daily operations of the facility by emphasizing three essential values: safety, dignity, and respect. The guide was used to implement an EMCF "Culture Campaign" which introduces monthly topics to custody staff focused on critical practice. The first topic, door security, was introduced on August 8, 2025 challenges staff to look at how an everyday responsibility directly connects to the Department's commitment to safety, dignity, and respect. Future topics will aim to transform daily operations through gender-responsive practice, such as reinforcing the consistent use of respectful language by both staff and the incarcerated population, encouraging staff to use active listening skills to support communication and build trust, noticing patterns and reducing risk, and creating a space where IPs can report sexual misconduct or harassment in a private and anonymous matter.

**Monitor's Finding of Compliance re E. Training ¶ 43:**

☒ **Substantial Compliance**

☐ Partial Compliance

☐ Non-compliance

☐ N/A not required until [ date ]

☐ N/A monitor granted an extension until [ date ]

**Monitor's Discussion re E. Training ¶ 43:**

This requirement was met during February - May 2022, during the first and second reporting periods. The curriculum did include all the requirements noted above (a – k), except for “j” – gender-responsive principles. To accommodate the requirement under “j”, NJDOC and Edna Mahan provided a two-day gender-responsive training during the third reporting period. This paragraph has been satisfied.

**Recommendations re E. Training ¶ 43:**

No recommendation

**E. Training**

¶ 44 NJDOC and Edna Mahan shall provide refresher training every other year to all Edna Mahan staff to ensure that they know the current sexual abuse and sexual harassment policies and procedures. NJDOC and Edna Mahan shall require that staff demonstrate proficient knowledge of the policies and procedures to complete the training requirements.

Requirements:

¶ 45 To the extent that revisions are made to policies or procedures, or new policies or procedures are developed to comply with this Agreement, NJDOC and Edna Mahan will work with the Monitor in drafting new training materials and/or revising current training materials to ensure the training materials are current.

**Monitor's Measure of Compliance re E. Training ¶ 44:**

¶ 44

- EMCF Level 3 policy requiring refresher training every other year to all EMCF staff to ensure that they know the current sexual abuse and sexual harassment policies and procedures
- Refresher training curriculum utilized
- Documentation of staff receiving this training, and the date received
- Documentation of staff proficiency testing and who fails
- Interviews with staff regarding their knowledge of current sexual abuse and sexual harassment policies and procedures
- Interviews with trainers who provided training to confirm that required training took place
- Interviews with EMCF training Lieutenant and/or training staff to confirm that required training took place



**Steps taken by NJDOC and EMCF towards implementation re E. Training ¶ 44:****8/24/25 Status Report**

Policy PCS.001.008, "Prevention, Detection, Response to Sexual Assault and Harassment," finalized on 1/29/24 and revised on 11/21/24, mandates annual PREA-specific training for all NJDOC employees, including custody staff, non-uniformed staff, and civilian staff, as well as contractors and volunteers. This training ensures that personnel are knowledgeable about current sexual abuse and harassment policies and procedures, with a focus on preventing prison sexual abuse and addressing staff sexual misconduct. Key topics covered include incident reporting, first responder responsibilities, and prevention strategies.

Participation in the required PREA training is documented through employee signature or electronic verification, confirming proficient knowledge of the policies and procedures. A post-test was reviewed and approved by the Federal Monitor and has been utilized in training since January 2024. Training records are maintained at the Correctional Staff Training Academy to track compliance and ensure staff readiness.

**Monitor's Finding of Compliance re E. Training ¶ 44:****[X] Substantial Compliance**

☐ Partial Compliance

☐ Non-compliance

☐ N/A not required until [ date ]

☐ N/A monitor granted an extension until [ date ]

**Monitor's Discussion re E. Training ¶ 44:**

NJDOC 001.008 Prevention, Detection and Response of Sexual Abuse and Harassment states, New Non-Uniformed personnel receive PREA training as part of their Orientation at their respective facilities. In addition, all NJDOC employees, volunteers and contractors receive annual training on their duties and responsibilities under the Department's zero-tolerance policy. This training includes training on all ten topics listed in §115.31 employee training standard including the requirement to immediately report any incident or allegation of sexual abuse/sexual harassment to the nearest custody staff member, or an on-duty custody supervisor if more appropriate. This policy was revised on 11/21/24.

All NJDOC employees (custody staff, non-uniformed staff and civilian staff), contractors and volunteers receive PREA-specific training on an annual basis. This training is to ensure that they know the current sexual abuse and sexual harassment policies and procedures. The training

also focuses on key issues regarding staff sexual misconduct and the prevention of prison sexual abuse including the reporting of incidents, as well as first responder responsibilities.

The Settlement Agreement requires that NJDOC and Edna Mahan shall provide refresher training every other year to all Edna Mahan staff to ensure that they know the current sexual abuse and sexual harassment policies and procedures. However, per policy, NJDOC and Edna Mahan provide this refresher training every year.

In January 2024, a post-test was implemented into the training to demonstrate that staff has proficient knowledge of the PREA policies and procedures. If a staff member receives below the passing score of 70%, the institutional training staff remediates and re-tests, but no one has failed the post-test since EMCF has implemented it.

**Recommendations re E. Training ¶ 44:**

No recommendation

## **E. Training**

par. 45 To the extent that revisions are made to policies or procedures, or new policies or procedures are developed to comply with this Agreement, NJDOC and Edna Mahan will work with the Monitor in drafting new training materials and/or revising current training materials to ensure the training materials are current.

Requirements:

NJDOC and Edna Mahan implement the post-test to ensure staff demonstrate proficient knowledge of the policies and procedures to complete the training.

### **Steps taken by NJDOC and EMCF towards implementation re E. Training ¶ 45:**

#### **8/24/25 Status Report**

NJDOC continues to work with the Monitor, as well as its expert consultants, when drafting new training plans, curricula, and materials to ensure feedback is incorporated.

### **Monitor's Finding of Compliance re E. Training ¶ 45:**

#### **[X] Substantial Compliance:**

- ☐ Partial Compliance
- ☐ Non-compliance
- ☐ N/A not required until [ date ]
- ☐ N/A monitor granted an extension until [ date ]

### **Monitor's Discussion re E. Training ¶ 45:**

As noted in paragraph 10, as of February 24, 2024, NJDOC had revised, finalized, and adopted the following Level 1 policies:

- ADM.010.004 - Staff/Incarcerated Person Over Familiarity
- CUS.001.CRP.01 - Camera Review Procedures
- CUS.001.SEA.001 - Searches of Incarcerated Persons and Correctional Facilities
- PCS.001.008 - Prevention, Detection and Response of Sexual Abuse and Harassment
- SID IMP #14

- SID IMP #35
- SID IMP #48
- ADM.019.003 - Close Custody Units
- CUS.001.011 – Policy Statement - Searches of Incarcerated Persons and Correctional Facilities
- IMM.001.004 - Zero Tolerance Policy: Prison Sexual Abuse and Sexual Harassment
- IMM.004.RHU.03 - Amenities and Privileges Two-Level Program
- ADM.019.003.ADJU - Adjustment Unit
- ADM.019.003.EMCT - Emergency Confinement
- CUS.001.BWC.011 – Body Worn Cameras

And, as of August 23, 2024, the following Level 3 policies (those specific to Edna Mahan) were revised and updated

- IMP #2 South, North, and Dormitory Officers (replaced the Max Housing Unit Officer)
- IMP # 2A South North Hall Control Officers (replaced the Limited Privileges Unit)
- IMP # 3 EMCF Satellite Entrance Control Officer
- IMP # 3A EMCF Satellite General Assignment Officer
- IMP #3B EMCF Satellite Unit Housing Officer
- IMP #15 C-Cottage Unit Officers (replaced Residential Treatment Unit)

Lastly, on November 23, 2024, NJDOC updated the following policies that refer to or relate to cross-gender strip searches to specify that such searches may take place only in emergent rather than exigent circumstances. The definition of “exigent circumstance” – “any set of temporary and unforeseen circumstances that require immediate action to combat a threat to the security or institutional order of a facility” – was determined to be too broad to describe the limited situations in which a cross-gender strip search may occur. Accordingly, policies were updated to reflect that cross-gender strip searches may only occur in an “emergent circumstance,” defined as “a serious, unexpected, and dangerous situation requiring immediate action.”

- CUS.001.SEA.001 - Searches of Incarcerated Persons and Correctional Facilities
- PCS.001.008 - Prevention, Detection and Response of Sexual Abuse and Harassment
- CUS.001.SEA.001 - Searches of Incarcerated Persons and Correctional Facilities
- IMP # 3 EMCF Satellite Entrance Control Officer
- IMP # 3A EMCF Satellite General Assignment Officer
- IMP #3B EMCF Satellite Unit Housing Officer

- IMP #15 C-Cottage Unit Officers

NJDOC provided the Monitor with a draft training plan in July 2024. Based on the Monitor's feedback, NJDOC revised the training curriculum. The training is aimed at all EMCF staff, contract staff, and volunteers specific to the revised Level 1 and Level 3 policies listed above. The curriculum was developed in three (3) sections. Section 1 training was for all staff and was provided to volunteers, contract, and non-custody staff in January 2025. Sections 2 and 3 are specific to custody staff. During this reporting period, 291 of 303 custody staff completed all sections of the training. All remaining staff (scheduled vacations, sick leave, or extended leaves of absence) will be scheduled as they return.

**Recommendations re E. Training ¶ 45:**

Continue to work with the Monitor in drafting new training materials and/or revising current training materials to ensure they are current.

**E. Training**

¶ 46 NJDOC shall certify and maintain documentation showing that all active Edna Mahan staff have been trained.

Requirements:

¶ 45 To the extent that revisions are made to policies or procedures, or new policies or procedures are developed to comply with this Agreement, NJDOC and Edna Mahan will work with the Monitor in drafting new training materials and/or revising current training materials to ensure the training materials are current.

**Monitor's Measure of Compliance re E. Training ¶ 46:**

- EMCF Level 3 policy requiring that documentation be maintained to show that all active Edna Mahan staff have been trained.
- Training Records reviewed during On-Site visit
- Interviews with EMCF training Lieutenant and/or training staff to verify documentation is maintained showing that all EMCF staff have been trained.

**NJDOC Discussion: Steps taken by NJDOC and EMCF towards implementation re E. Training ¶ 46:**

**8/24/25 Status Report**

NJDOC continues to comply with the required training according to the timelines set forth in this Agreement.

**Monitor's Finding of Compliance re E. Training ¶ 46:**

**[X] Substantial Compliance**

[ ] Partial Compliance

[ ] Non-compliance

[ ] N/A not required until [ date ]

[ ] N/A monitor granted an extension until [ date ]

**Monitor's Discussion re E. Training ¶ 46:**

NJDOC Policy Statement 001.008, Prevention, Detection and Response of Sexual Abuse and Harassment, states, "Participation in requisite PREA training shall be documented through employee signature or electronic verification, noting that staff demonstrate proficient knowledge of the policies and procedures to complete the training requirements. Training records will be retained at the Correctional Staff Training Academy." Additionally, the policy talks about volunteers and contract staff when it states, "Training receipt forms are issued for signature to each contractor and volunteer that will have the potential to interact with

incarcerated persons. Copies of these signed receipt forms are to be maintained at each facility.” This policy was revised on November 21, 2024.

During this most recent compliance visit, the Monitor’s Associate met with the Training Lieutenant at Edna Mahan and verified that NJDOC and Edna Mahan maintain documentation showing that all active Edna Mahan staff have been trained. The Monitor has received those training records for various training courses the Settlement Agreement requires.

**Recommendations re E. Training ¶ 46:**

Continue to certify and maintain documentation showing that all active Edna Mahan staff have been trained.

**G. Prisoner's Right to Privacy at Edna Mahan**

NJDOC and Edna Mahan shall prevent officers from unnecessarily viewing Edna Mahan prisoners who are naked or performing bodily functions. Accordingly:

**¶ 54. Cross-Gender Searches**

- a. Edna Mahan shall comply with N.J.S.A. 30:1B-46 and NJDOC's policy to not conduct cross-gender strip searches or visual body cavity searches (meaning a search of the anal or genital opening) except in exigent circumstances or when performed by medical practitioners.
- b. Prisoners' access to regularly available programming or other out-of-cell opportunities shall not be restricted in order to comply with cross-gender search restrictions.
- c. Edna Mahan shall document all cross-gender strip searches, cross-gender visual body cavity searches, and cross-gender pat-down searches of women prisoners and shall document the exigent circumstances that warranted the search. To the extent any such searches were conducted, Edna Mahan shall provide this documentation to the Monitor and DOJ on a quarterly basis.
- d. NJDOC and Edna Mahan shall train security staff in how to conduct cross-gender pat-down searches, when required, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs.

Requirements:

**Monitor's Measure of Compliance re G. Prisoner's Right to Privacy at Edna Mahan ¶ 54:**

**¶ 54 a**

- Copy of N.J.S.A. 30:1B-46
- NJDOC Level 1 policy prohibiting cross-gender strip searches or visual body cavity searches, except in exigent circumstances or when performed by medical practitioners
- EMCF Level 3 policy prohibiting cross-gender strip searches or visual body cavity searches, except in exigent circumstances or when performed by medical practitioners



- CUS.001.011 Searches of Prisoners and Facilities) and Internal Management Procedure (CUS.001.SEA.001 Searches) which outline the department's rules regarding pat searches, strip searches and body cavity searches
- Training curriculum for staff stating that cross-gender strip searches or visual body cavity searches, except in exigent circumstances or when performed by medical practitioners are prohibited
- Documentation memo/training rosters confirming staff training stating that cross-gender strip searches or visual body cavity searches, except in exigent circumstances or when performed by medical practitioners are prohibited
- Quarterly notification, beginning January 5, 2022, for the last quarter of 2021, to Monitor of exigent circumstances that required a cross-gender strip search or visual body cavity
- Any memos, written directives from the Commissioner, Deputy Commissioner and/or Administrator that addresses procedures, and practices at Edna Mahan prohibiting cross-gender strip searches or visual body cavity searches, except in exigent circumstances or when performed by medical practitioners

**¶54 b**

- EMCF level 3 policy stating that prisoner's access to regularly available programming or other out-of-cell opportunities shall not be restricted in order to comply with cross-gender search restrictions
- Documentation memo/training rosters confirming staff were informed that prisoner's access to regularly available programming or other out-of-cell opportunities shall not be restricted in order to comply with cross-gender search restrictions
- Quarterly notification, beginning January 5, 2022, for the last quarter of 2021, documenting every time available programming or out-of-cell activities were restricted due to not being able to comply with cross-gender search restrictions
- Any memos, written directives from the Commissioner, Deputy Commissioner and/or Administrator that addresses procedures, and practices at Edna Mahan prohibiting prisoner's access to regularly available programming or other out-of-cell opportunities in order to comply with cross-gender search restrictions

**¶54 c**

- EMCF level 3 policy requiring that staff document all cross-gender strip searches, cross-gender visual body cavity searches, and cross-gender pat-down searches of women prisoners. And the same level 3 policy requires such documentation include the exigent circumstances that warranted the search
- Quarterly notification (beginning January 5, 2022) for the last quarter of 2021, of exigent circumstances that required a cross-gender strip search, visual body cavity search, or cross-gender pat-down search

¶54 d

- EMCF level 3 policy stating that all security staff shall be trained in how to conduct cross-gender pat-down searches in a professional and respectful manner and in the least intrusive manner possible. And plan to continue to provide this training
- Training records, schedules for training for all security staff, who have been trained, regarding proper methods to conduct cross gender pat down searches
- Copy of curriculum used for this training
- Any memos, written directives from the Commissioner, Deputy Commissioner and/or Administrator that addresses procedures, and practices at Edna Mahan in how to conduct cross-gender pat-down searches in a professional and respectful manner and in the least intrusive manner possible
- Interviews with staff during on site visit regarding their responsibilities to document all cross-gender strip searches, cross-gender visual body cavity searches, and cross-gender pat-down searches of women prisoners

**Steps taken by NJDOC and EMCF towards implementation G. Prisoner's Right to Privacy at Edna Mahan ¶ 54:**

**8/24/25 Status Report**

Policy PCS.001.008, "Prevention, Detection, Response to Sexual Assault and Harassment," established on February 1, 2024 and revised on November 21, 2024, outlines procedures regarding cross-gender viewing. During the reporting period, there were no instances of cross-gender searches. Quarterly reports confirming the absence of such searches have been duly submitted to both the Federal Monitor and the DOJ. Furthermore, consistent practices are upheld across EMCF and all NJDOC correctional facilities regarding transgender and intersex individuals. These individuals are given the option to request a search preference in accordance with N.J.P.L. 2019 c.409, which prohibits cross-gender strip searches in state correctional facilities. To ensure compliance, Gender Identity Search Preference ID Cards are issued to transgender or intersex incarcerated persons, indicating their approved search preference based on their gender identity.

**Monitor's Finding of Compliance re G. Prisoner's Right to Privacy at Edna Mahan ¶ 54:**

**[X] Substantial Compliance**

- ☐ Partial Compliance
- ☐ Non-compliance
- ☐ N/A not required until [ date ]
- ☐ N/A monitor granted an extension until [ date ]

**Monitor's Discussion re G. Prisoner's Right to Privacy at Edna Mahan ¶ 54:**

Part of the 2020 New Jersey Revised Statutes Title 30 – Institutions and Agencies, Section 30:1B-46 – Policy to limit cross gender searches and surveillance in State Correctional facilities, states, “The Commissioner of Corrections shall establish a policy to limit cross gender searches and surveillance in State correctional facilities. The policy shall:

- a. require a strip or body cavity search of a prisoner to be conducted by an officer of the same gender who is specially trained to conduct these searches;
- b. authorize an exception to the requirements in subsection a. of this section

NJDOC 001.008 Prevention, Detection and Response of Sexual Abuse and Harassment states, “NJDOC does not allow cross-gender strip searches or visual body cavity searches, except in emergent circumstances or when performed by medical practitioners. NJDOC has a policy on searches (CUS.001.011 Searches of Incarcerated persons and Facilities) and a corresponding confidential internal management procedure (CUS.001.SEA.001 Searches) which both outline in detail the department’s rules regarding pat searches, strip searches and body cavity searches.” This policy was revised on November 21, 2024.

Additionally, NJDOC CUS.001.SEA.001 Searches of Inmates and Facilities states, “except in emergent circumstances, pat searches shall only be conducted by female custody staff members upon female incarcerated persons, including persons whose Gender Identity Search Preference ID Card identifies them as having requested to be searched by female staff. All other incarcerated persons will be pat searched by any available staff member. Facilities must document all cross gender-pat searches conducted in emergent circumstances and will document the emergent circumstances that warranted the search. This Level 1/3 policy was revised on November 21, 2024.

On April 1, 2025, the Monitor and the DOJ received a copy of a letter from Assistant Superintendent IPCM Amelia Renshaw to the Edna Mahan Administrator stating, “Please be advised, upon review of data provided for the months of January, February, and March 2025 there were no exigent circumstances that required a cross-gender strip search or visual body cavity search.” And on July 1, 2025 the Monitor and the DOJ received a copy of a letter from Assistant Superintendent IPCM Amelia Renshaw to the Edna

Mahan Administrator stating, “Please be advised, upon review of data provided for the months of April, May, and June 2025 there were no exigent circumstances that required a cross-gender strip search or visual body cavity search.”

**Paragraph 54b:**

NJDOC CUS.001.SEA.001 Searches of Inmates and Facilities states, “Except in exigent circumstances, pat searches shall only be conducted by female custody staff members upon female incarcerated persons, including persons whose Gender Identity Search Preference ID Card identifies them as having requested to be searched by female staff. All other incarcerated persons will be pat searched by any available staff member. Facilities must document all cross-gender-pat searches conducted in exigent circumstances and will document the exigent circumstances that warranted the search. Facilities shall not restrict incarcerated persons’ access to regularly available programming or other out-of-cell opportunities in order to comply with this requirement.” This Level 1/3 policy was revised on July 1, 2023.

On October 1, 2024, the Monitor and the DOJ received a copy of a letter from Assistant Superintendent IPCM Amelia Renshaw to the Edna Mahan Administrator stating that “upon review of data provided for the months of July, August and September 2024, there were no instances of available programming or out of cell activities being restricted due to not being able to comply with cross-gender search restrictions.” And on January 2, 2025, the Monitor and the DOJ received a copy of a letter from Assistant Superintendent IPCM Amelia Renshaw to the Edna Mahan Administrator stating, “upon review of data provided for the months of October, November and December 2024, there were no instances of available programming or out of cell activities being restricted due to not being able to comply with cross-gender search restrictions.

**Paragraph 54c:**

NJDOC 001.008 Prevention, Detection and Response of Sexual Abuse and Harassment states, “All staff working in female facilities will be trained on conducting trauma-informed pat searches, to include cross-gender pat searches. If there is an emergent circumstance, custody staff shall conduct cross-gender pat-down searches of incarcerated persons in a professional and respectful manner and in the least intrusive manner possible, consistent with the security needs of all involved. Facilities are required to promptly record in the Custody Special Report, following the conclusion of any urgent situation, all cross-gender pat searches that were conducted under emergent circumstances. Additionally, they must detail the specific emergent circumstances that justified the search.” This policy was revised on November 21, 2024.

NJDOC CUS.001.SEA.001 Searches of Inmates and Facilities states, “Under non-emergent circumstances, a strip search shall be conducted by custody staff of the same gender identity as the incarcerated person and may include a scanning/testing device operator(s) of the same gender as the person. Under emergent circumstances, a strip search of an incarcerated person may be

conducted by custody staff and scanning/testing device operator(s) of the opposite gender or where performed by medical providers. Facilities must document all cross-gender strip searches conducted under emergent circumstances and will document the emergent circumstances that warranted the search”. This Level 1/3 policy was revised on November 21, 2024.

On April 1, 2025 the Monitor and the DOJ received a copy of a letter from Assistant Superintendent IPCM Amelia Renshaw to the Edna Mahan Administrator stating that, “upon review of data provided for the months of January, February, and March there were no exigent circumstances that required a cross gender strip search, visual body cavity search, or cross-gender pat-down search.” And on July 1, 2025 the Monitor and the DOJ received a copy of a letter from Assistant Superintendent IPCM Amelia Renshaw to the Edna Mahan Administrator stating, “Please be advised, upon review of data provided for the months of April, May, and June, 2025 there were no exigent circumstances that required a cross gender strip search, visual body cavity search, or cross-gender pat-down search.”

Lastly, the Monitor or her Associate has interviewed several custody staff and asked them specifically about their responsibilities to document all cross-gender strip searches, cross-gender visual body cavity searches, and cross-gender pat-down searches of female incarcerated persons. Without exception, every custody staff person we interviewed said they would never conduct cross-gender pat searches.

**Paragraph 54d:**

NJDOC Policy 001.008 Prevention, Detection and Response of Sexual Abuse and Harassment, revised on November 21, 2024, states, “All searches shall be performed in a professional, respectful and courteous manner, and in the least intrusive manner possible, consistent with the safety and security needs of all involved. All searches conducted in a female institution shall be conducted in a trauma-informed manner to maintain the dignity of the incarcerated person.”

NJDOC CUS.001.SEA.001 Searches of Inmates and Facilities states, “All searches shall be performed in a professional, respectful, and courteous manner, and in the least intrusive manner possible, consistent with the safety and security needs of all involved. All searches conducted in a female institution shall be conducted in a trauma-informed manner to maintain the dignity of the incarcerated person”. This Level 1/3 policy was revised on November 21, 2024.

**Recommendations re G. Prisoner’s Right to Privacy at Edna Mahan ¶ 54:**

No recommendations.

**G. Prisoner's Right to Privacy at Edna Mahan**

**¶ 55. Cross-Gender Viewing**

- a. NJDOC and Edna Mahan shall ensure that Edna Mahan prisoners are able to perform bodily functions—such as showering, bathing, and using the toilet— and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks.
- b. Edna Mahan shall require staff of the opposite gender to announce their presence when entering a prisoner housing unit, and before entering the shower or toilet areas, except in exigent circumstances.

Requirements:

**Monitor's Measure of Compliance re G. Prisoner's Right to Privacy at Edna Mahan ¶ 55:**

**¶ 55 a**

- EMCF level 3 policy stating that EMCF prisoners are able to perform bodily functions (noted above) without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incident to routing cell checks
- Training curriculum for training all nonmedical staff to the fact that prisoners are able to perform bodily functions (noted above) without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incident to routing cell checks
- Training records for all nonmedical staff documenting they were trained in the above
- Training Curriculum for prisoner education orientation ensuring they are told that prisoners can perform bodily functions (such as showering, bathing, using the toilet, changing clothing, etc.) without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incident to routing cell checks (per ¶47 & 48)
- Any memos, written directives from the Commissioner, Deputy Commissioner and/or Administrator that addresses procedures, and practices at Edna Mahan in how to ensure that prisoners are able to perform bodily functions (noted above) without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incident to routing cell checks
- Focus groups with EMCF prisoners during on site visit specific to prisoners being able to perform bodily functions without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia

- Interviews with staff during on site visit specific to prisoners being able to perform bodily functions without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia

**¶ 55 b:**

- NJDOC Level 1 and EMCF Level 3 policy requiring staff of the opposite gender to announce their presence when entering a prisoner housing unit, and before entering the shower or toilet areas, except in exigent circumstances
- Any memos, written directives from the Commissioner, Deputy Commissioner and/or Administrator that addresses procedures, and practices at Edna Mahan requiring staff of the opposite gender to announce their presence when entering a prisoner housing unit
- Interviews with staff during on site visit specific to the requirement that staff of the opposite gender announce their presence when entering a prisoner housing unit
- Observations made during on site visit

**Steps taken by NJDOC and EMCF towards implementation G. Prisoner's Right to Privacy at Edna Mahan ¶ 55:**

**8/24/25 Status Report**

The policy PCS.001.008, "Prevention, Detection, Response to Sexual Assault and Harassment," finalized on February 1, 2024 and revised on November 21, 2024, stipulates guidelines for gender announcements and restrictions regarding staff access to restrooms and shower facilities occupied by incarcerated persons of the opposite gender. According to the policy, all staff of the opposite gender must announce their presence when entering a housing unit. This announcement is mandatory whenever staff entering the unit change the gender composition from all same-gender staff to inclusion of opposite-gender staff. Upon entering the housing unit, opposite-gender staff are required to announce "male/female on the floor" or their name, ensuring awareness among incarcerated persons.

Level 3 IMPS specific to Edna Mahan that were previously approved and finalized require that when any staff enter an incarcerated person's housing unit, regardless of their gender, they must announce their presence, e.g., "male/female on unit" or "staff name on unit." Documentation of the announcement must be recorded in the logbook.

The policies also establish restrictions on staff access to restrooms and shower facilities occupied by incarcerated persons of the opposite gender. Staff members are prohibited from entering these facilities when occupied, except during safety and security tours and checks. This measure aims to safeguard privacy and security while maintaining appropriate staff oversight and supervision.

The South Hall Dormitory toilet stalls were fully installed in April 2025, inclusive of an ADA compliant stall. This concludes EMCF Administration's current efforts to eliminate unnecessary exposure in both the toilet and shower areas of the South Hall Dormitory.

The NJDOC consulted with subject matter expert, The Moss Group, during the reporting period who developed the tool, *"52 Tips: Operational Excellence for Working with Incarcerated Women."* This guide was designed for custody Majors to actively lead, reflect, and implement practices that improve the daily operations of the facility by emphasizing three essential values: safety, dignity, and respect. The guide was used to implement an EMCF "Culture Campaign" which introduces monthly topics to custody staff focused on critical practice. The first topic, door security, was introduced on August 8, 2025 challenges staff to look at how an everyday responsibility directly connects to the Department's commitment to safety, dignity, and respect. Future topics will aim to transform daily operations through gender-responsive practice, such as maintaining safety and privacy in all areas of the facility, being respectful in vulnerable moments, and carrying out searches with dignity and respect.

**Monitor's Discussion re G. Prisoner's Right to Privacy at Edna Mahan ¶ 55:**

☒ **Substantial Compliance**

☐ Partial Compliance

☐ Non-Compliance

☐ N/A not due until [ date ]

☐ N/A monitor granted an extension until [ date ]

**Monitor's Discussion re G. Prisoner's Right to Privacy at Edna Mahan ¶ 55:**

**Paragraph 55a:**

Part of the 2020 New Jersey Revised Statutes Title 30 – Institutions and Agencies, Section 30:1B-46 – Policy to limit cross gender searches and surveillance in State Correctional facilities, prohibits correctional police officers from viewing prisoners of the opposite gender who are nude or performing bodily functions except in an emergency or other extraordinary or unforeseen circumstances and requires a facility to install privacy panels in shower and toilet areas when possible

NJDOC Policy 001.008 Prevention, Detection and Response of Sexual Abuse and Harassment states "In order to accommodate the privacy interests of incarcerated persons, modesty barriers are provided in facility shower areas. Additionally, modesty



barriers/panels are provided for incarcerated persons' use while changing. Incarcerated persons are required to change prior to exiting the shower area". This policy was revised on November 21, 2024.

During past compliance visits, the Monitor was concerned about the lack of privacy in one area of South Hall (the old Reception area). Although there were shower curtains hung in the shower and toilet areas, in most instances, they were too short to cover private areas if an incarcerated person had to bend down or had gaps between the curtains that allowed the incarcerated person to be seen. There are incarcerated persons who are transgender and identify as males who might not have been able to perform bodily functions, such as showering, using the toilet, or change clothing without a nonmedical staff of the opposite gender identity viewing them. The shower situation had been resolved by adding permanent barriers in the shower area during the past reporting period. EMCF planned for the same system to be installed in the toilet areas, and the toilet barriers were expected to be installed during the last reporting period. Unfortunately, the vendor shipped the wrong material for the order. Thus, the final installation date of all toilet stalls was completed on April 22, 2025.

The Monitor or her Associate conducted focus groups with incarcerated persons currently living at Edna Mahan and asked them if they felt they were able to perform bodily functions without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia. Most of their responses indicated they were afforded this right. Some incarcerated persons raised concerns that they were no longer provided with robes, which afforded privacy when changing. The Monitor raised this concern to facility administrators, who explained that they are taking steps to acquire appropriate cover-ups for incarcerated persons.

Lastly, the Monitor or her Associate interviewed several correctional staff and asked them specifically about incarcerated persons being able to perform bodily functions without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia. Without exception, every correctional staff member interviewed was aware of this right of the incarcerated persons.

**Paragraph 55 b:**

Part of the 2020 New Jersey Revised Statutes Title 30 – Institutions and Agencies, Section 30:1B-46 – Policy to limit cross gender searches and surveillance in State Correctional facilities requires a verbal announcement to be made when correctional police officers or other employees of the opposite gender are in an area of the facility.

NJDOC 001.008 Prevention, Detection and Response of Sexual Abuse and Harassment policy states, "All Staff of the opposite gender must announce their presence when entering a housing unit. Opposite gender announcements are required whenever staff entering the unit change the makeup of the unit from all staff who are the same gender as the incarcerated persons to inclusion of opposite

gender staff. Upon entering the housing unit, opposite gender staff will announce "male/female on the floor" or staff name "on the floor." All staff are restricted from entering restrooms and shower facilities of incarcerated persons of the opposite gender when occupied except in safety and security tours and checks". This policy was revised on November 21, 2024.

NJDOC Policy CUS.001.SEA 001, Searches of Incarcerated Persons and Correctional Facilities, also states, "All Staff of the opposite gender must announce their presence when entering a housing unit. Opposite gender announcements are required whenever a staff member entering the unit has a different gender identity than the gender identity of any incarcerated person in the area. Upon entering the housing unit, opposite gender staff will announce "male/female on the floor" or staff name "on the floor." All staff are restricted from entering restrooms and shower facilities of incarcerated persons of the opposite gender when occupied except in exigent circumstances and when viewing is incidental to routine safety and security tours and checks". This policy was revised on November 21, 2024.

Each recently revised level 3 policy that gives direction to Housing Unit Officers includes a paragraph under the section of "Staff Announcements" that states, "When custody staff enter an incarcerated person housing unit, the custody staff person shall announce, for example, "male/female on unit" or "officer name "on unit". The custody staff person shall document in the logbook that the announcement was made. Non-custody staff shall announce their presence when entering an incarcerated person housing unit by stating, for example, "male/female on unit" or "staff name on unit." Additionally, these same level 3 policies say that "Opposite gender staff members are not allowed inside the shower area, except in exigent circumstances."

The Monitor and her Associate interviewed several staff members. They asked them specifically about their responsibilities to announce their presence when entering a housing unit and before entering the shower or toilet areas, except in exigent circumstances. Without exception, every staff member interviewed was aware of this expectation. However, it should be noted that some IPs reported that some female staff do not always announce their presence in the housing units, particularly in the South Hall Dorm area.

During this past compliance visit, the Monitor and her Associate observed staff calling out, "Staff on wing" and/or "cameras activated" every time a staff member entered a housing unit.

#### **Recommendations re G. Prisoner's Right to Privacy at Edna Mahan ¶ 55:**

No recommendations.

## **I. Protecting Prisoners and Staff from Retaliation**

- ¶ 64. NJDOC and Edna Mahan shall protect all Edna Mahan prisoners and staff who report allegations of sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other prisoners or staff and shall continue to designate Edna Mahan's PREA Compliance Manager with monitoring allegations of retaliation concerning prisoners.

Requirements:

- ¶ 59. NJDOC and Edna Mahan shall continue to provide a method for staff to privately report sexual abuse and sexual harassment of prisoners.

### **Monitor's Measure of Compliance re I. Protecting Prisoners and Staff from Retaliation ¶ 64:**

- NJDOC Policy Statement Number 001.008 "Prevention, Detection and Response of Sexual Abuse and Harassment"
- EMCF Level 3 policy regarding retaliation protection for staff and prisoners
- Completion of NJDOC PREA Retaliation Monitoring Form (FORM-PREA.AC Retaliation) by EMCF PREA Compliance Manager for prisoners or staff who reported the sexual abuse of prisoners
- Spreadsheet documenting all allegations of sexual abuse, sexual harassment, retaliation for reporting, and/or staff neglect or violation of responsibilities that may have contributed to these incidents
- Any memos, written directives from the Commissioner, Deputy Commissioner and/or Administrator that addresses procedures, and practices at Edna Mahan specific to the retaliation of staff or prisoners for reporting an allegation
- Interviews with NJDOC Assistant Commissioner for Women's Services, EMCF Administrator, PREA Compliance Manager, Special Investigations Principal, and her staff
- Interviews with staff specific to their rights of protection from retaliation of reporting allegations of sexual abuse or sexual harassment
- Focus group with prisoners specific to their rights of protection from retaliation of reporting allegations of sexual abuse or sexual harassment

**Steps taken by NJDOC and EMCF towards implementation re I. Protecting Prisoners and Staff from Retaliation ¶ 64:**

**8/24/25 Status Report**

Policy IMM.001.004, Zero Tolerance Policy: Prison Sexual Abuse and Sexual Harassment was finalized on 2/1/204 and reviewed with no changes in May 2025. Policy PCS.001.008, "Prevention, Detection, Response to Sexual Assault and Harassment," was finalized on 2/1/24 and revised on 11/21/2024. These policies prioritize protection measures and support services for individuals who report incidents. NJDOC and EMCF are committed to promptly addressing subtle retaliation, ensuring accountability for staff actions, and fostering comprehensive awareness among staff and incarcerated persons.

Under IMM.001.004, NJDOC implements various personalized protection measures to prevent potential retaliation. These measures include housing changes, continuous video surveillance, and separating alleged abusers from victims. Additionally, emotional support services are available to address concerns about retaliation.

PCS.001.008 further emphasizes safeguarding against retaliation and requires monitoring of potential retaliatory actions. Oversight falls under the Institutional PREA Compliance Manager (IPCM), who conducts regular status checks and paper reviews for at least 90 days post-allegation. Disciplinary action is taken against anyone found to retaliate. Anyone who retaliates against a staff member or an incarcerated person who has reported an allegation of sexual abuse/harassment shall be subject to disciplinary action.

Monitoring for potential retaliation extends to both the victim and the individual who reported the incident. Third-party reporting by incarcerated persons or staff who directly witness incidents is also considered.

To access emotional support services, incarcerated persons can use the \*PREA# number on the IP phone system, connecting them with SAFE Hunterdon. For staff members, confidential emotional support services are available through the 888-4BLUENJ (1.888.425.8365) hotline. Additionally, staff members have a confidential reporting route for allegations of sexual abuse or harassment.

The IPCM has integrated information on protection against retaliation, including subtle retaliation on forms and into incarcerated persons' PREA education and orientation. Staff receive monthly PREA updates covering various topics, including retaliation. A question specific to subtle retaliation has been included in the retaliation monitoring form.

Regular communication channels, such as newsletters on the kiosk from the IPCM for incarcerated persons and attending staff PREA trainings, facilitate discussions on retaliation prevention and awareness.

To enhance transparency, a tracking system for retaliation monitoring is in place, and incarcerated persons are notified of case closures and investigation outcomes. Additionally, a process has been established to report back to SAAC members on completed recommendations or corrective actions. Bulletin boards in housing units display information on sexual safety rights and emotional support services, consolidating resources in one accessible location.

EMCF Administration established “EMCF Community Connect”, a bi-annual voluntary orientation refresher session that will aim to educate the IP population on new policies and rules. Administration will also use this opportunity to review existing policies and rules with the IP population. This is in addition to monthly ILC/Administration and Women’s Services Advisory Board meetings.

NJDOC takes retaliation seriously and has enhanced communication to ensure everyone is informed.

The NJDOC consulted with subject matter expert, The Moss Group, during the reporting period who developed the tool, *“52 Tips: Operational Excellence for Working with Incarcerated Women.”* This guide was designed for custody Majors to actively lead, reflect, and implement practices that improve the daily operations of the facility by emphasizing three essential values: safety, dignity, and respect. The guide was used to implement an EMCF “Culture Campaign” which introduces monthly topics to custody staff focused on critical practice. The first topic, door security, was introduced on August 8, 2025 challenges staff to look at how an everyday responsibility directly connects to the Department’s commitment to safety, dignity, and respect. Future topics will aim to transform daily operations through gender-responsive practice, such as reinforcing the consistent use of respectful language by both staff and the incarcerated population, encouraging staff to use active listening skills to support communication and build trust, and creating a space where IPs can report sexual misconduct or harassment in a private and anonymous matter.

The NJDOC, in collaboration with subject matter expert, The Moss Group, developed an opportunity for select IPs to serve as PREA Orientation facilitators and educators within the orientation phase of incarceration. These peer leaders received training in PREA education, assisted with the creation of a newly revised PREA Orientation Manual, and will soon initiate a peer-led PREA Orientation for newly admitted IPs. These individuals have been trained and prepared to serve as one more resource to the incarcerated population to maintain sexual safety throughout their incarceration. These individuals have been fully trained in all areas of PREA, inclusive of what constitutes a PREA violation, examples of retaliation related to a PREA allegation, and the various mean to report alleged incidents. This is a newly established peer-led enhancement to the existing Orientation program.

The NJDOC consulted with subject matter experts to make improvements to the IP Orientation Manual. Revisions include:

- How to report an alleged PREA incident;
- How to contact the Special Investigations Division (SID);
- Programming and services offered by the Programming and Supportive Services unit;
- Services provided by the Classification unit;
- Changes to the Visit Program; and
- Wellness guidance and activities to complete independently.

**Monitor's Finding of Compliance re I. Protecting Prisoners and Staff from Retaliation ¶ 64:**

**[X] Substantial Compliance**

- ☐ Partial Compliance
- ☐ Non-compliance
- ☐ N/A not required until [ date ]
- ☐ N/A monitor granted an extension until [ date ]

**Monitor's Discussion re I. Protecting Prisoners and Staff from Retaliation ¶ 64:**

DOC 001.008 Prevention, Detection and Response of Sexual Abuse and Harassment states, "NJDOC protects all incarcerated persons and staff from retaliation for reporting sexual abuse, sexual harassment or for cooperating with investigations. The IPCM is responsible for monitoring retaliation of all PREA allegations." This policy was revised on November 21, 2024.

Additionally, NJDOC Policy IMM.001.004, titled, Zero Tolerance Policy: Prison Sexual Abuse and Sexual Harassment states "The NJDOC employs multiple protection measures against potential retaliation. Protection measures are utilized on an individualized basis. They include but are not limited to: housing changes or transfers for incarcerated person abusers, constant video surveillance with audio recording, removal of alleged staff or Incarcerated person abusers from contact with victims, and emotional support services for incarcerated Persons or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations.

The IPCM is responsible for retaliation monitoring at the facility-level. The correctional facility's IPCM shall, for at least 90 days following a report of sexual abuse/harassment monitor the conduct and treatment of incarcerated persons or staff who reported to see if there are any changes that may suggest possible retaliation and will act promptly to remedy any such retaliation. This monitoring will include review of any incarcerated person disciplinary reports, housing or program changes, or negative performance reviews or reassignments of staff. Such monitoring shall continue beyond 90 days if the initial monitoring indicates a

continuing need. In the case of incarcerated persons, this monitoring will also include periodic status checks. The monitoring obligation will terminate if the investigative outcome of the allegation is unfounded. However, if a staff person or incarcerated person expresses fear of retaliation, they must be monitored even if the allegation was unfounded.

Anyone who retaliates against a staff member or an incarcerated person who has reported an allegation of sexual abuse/harassment shall be subject to disciplinary action.” This Level 1/3 policy was revised on February 1, 2024. NJDOC and Edna Mahan staff maintain and have submitted a copy to DOJ and the Monitor, a spreadsheet documenting all allegations of sexual abuse, sexual harassment, retaliation for reporting, and/or staff neglect or violation of responsibilities that may have contributed to these incidents. During this reporting period (February 25 - August 24, 2025), there were 2 cases of alleged retaliation; one case was deemed unfounded, and the other was determined to be unsubstantiated.

The Monitor spoke with Assistant Superintendent Amelia Renshaw, the Edna Mahan PREA Compliance Manager, regarding how the facility protects incarcerated persons and staff who report allegations of sexual abuse or sexual harassment from retaliation. She reported she monitors possible retaliation, including subtle retaliation, by conducting four reviews with the person. Two reviews are in-person reviews, and two are “paper” reviews. This information is documented in the retaliation log. For staff, she monitors any unusual shift schedule changes or assignments that may cause suspicion. For incarcerated individuals, she monitors housing changes, grievances, infractions, and other relevant matters. She also noted that the 90-day monitoring period may be extended if circumstances warrant it. During this reporting period, one person asked to extend their monitoring past the routine 90-day monitoring period (this was an IP-on-IP case). The Monitor spoke with this person and asked why they felt their monitoring needed to be extended. She responded that she just felt safer knowing someone was monitoring her for retaliation.

The Monitor or her Associate interviewed approximately 60 staff members—including custody and non-custody personnel (both line staff and supervisors), Sergeants, Lieutenants, Majors, and administrators - asking each to define subtle retaliation. Every individual was able to provide an example and demonstrated awareness that such behavior is inappropriate. When asked directly, no staff reported witnessing or hearing of any incidents of retaliation during the current reporting period. Several employees emphasized that they “wouldn’t risk their job or pension by retaliating against an IP for reporting.”

The Monitor or her Associate conducted four focus groups with incarcerated individuals. Similar to the staff discussions, participants acknowledged that retaliation is unacceptable, yet many believed it still occurs. Each group was asked whether they had heard of anyone experiencing retaliation— even in subtle forms— for reporting sexual abuse or harassment within the past

six months. While some incarcerated persons expressed their view that retaliation continues to occur, none could offer a specific example of retaliation during that period.

The Monitor interviewed ten incarcerated individuals who had filed allegations of sexual assault against a staff member during this reporting period. Each person was asked to describe their experience with the reporting process, including whether they felt respected during both the report and the subsequent investigation, and whether they believed they had faced any retaliation for coming forward. Most participants reported feeling “heard” and stated that they were treated fairly and respectfully by the Special Investigations Division (SID) staff. With the exception of the two persons noted below, no one cited a specific example of being retaliated against for reporting the allegation.

The Monitor spoke with two incarcerated individuals who filed allegations of retaliation during this reporting period. Both of the allegations were investigated. One was deemed to be “unfounded” and the other was deemed to be “unsubstantiated.”

NJDOC and Edna Mahan have made significant efforts to prevent and address retaliation, including its more subtle forms. Their ongoing work to educate both staff and incarcerated individuals about retaliation, combined with active monitoring measures, is commendable. The continued filing of retaliation allegations demonstrates that incarcerated persons understand what constitutes retaliation, recognize their protection from all forms of it, and know how to report concerns. As with all allegations of sexual abuse or misconduct, every report of retaliation is thoroughly investigated. The Monitor finds that EMCF has established strong processes to investigate and respond to reported incidents. Nevertheless, the realities of prison culture mean that some incarcerated individuals will continue to feel they are experiencing retaliation, and some level of it is likely to persist. At this stage, the remaining priority is to ensure that staff are held accountable for any act of retaliation, and that staff members are continually educated that even subtle acts of retaliation, such as disparate rules enforcement, violate PREA.

#### **Recommendations re I. Protecting Prisoners and Staff from Retaliation ¶ 64:**

It is recommended that EMCF continue to concentrate on the issue of retaliation and hold any staff accountable for any act of retaliation.



**I. Protecting Prisoners and Staff from Retaliation**

- ¶ 65. NJDOC and Edna Mahan shall employ multiple protection measures, such as housing changes or transfers for alleged prisoner victims, removal of alleged staff abusers from contact with victims, and emotional support services for prisoners or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations.

Requirements:

- ¶ 59. NJDOC and Edna Mahan shall continue to provide a method for staff to privately report sexual abuse and sexual harassment of prisoners.

**Monitor's Measure of Compliance re I. Protecting Prisoners and Staff from Retaliation ¶ 65:**

- NJDOC Policy Statement Number 001.008 "Prevention, Detection and Response of Sexual Abuse and Harassment."
- EMCF Level 3 policy regarding retaliation protection for staff and prisoners
- Spreadsheet documenting all allegations of sexual abuse, sexual harassment, retaliation for reporting, and/or staff neglect or violation of responsibilities that may have contributed to these incidents. The spreadsheet should identify what steps were taken to protect the alleged victim (removal of alleged staff abusers from contact with victims, etc.)
- Review of Folder 115.67 (which maintains all PREA Retaliation Forms) on the New Jersey DOCNet I-Drive
- Documentation that information for emotional support services were provided to both staff and prisoners who fear retaliation for reporting (888-4BLUENJ hotline offering mental health resources to Corrections Staff)
- Any memos, written directives from the Commissioner, Deputy Commissioner and/or Administrator that addresses procedures, and practices at Edna Mahan specific to the retaliation of staff or prisoners for reporting an allegation
- Interview with EMCF Compliance Manager regarding protection measures from retaliation of reporting allegations of sexual abuse or sexual harassment
- Interviews with staff regarding protection measures from retaliation of reporting allegations of sexual abuse or sexual harassment
- Focus group with prisoners regarding protection measures from retaliation of reporting allegations of sexual abuse or sexual harassment

**Steps taken by NJDOC and EMCF towards implementation re I. Protecting Prisoners and Staff from Retaliation ¶ 65:**

**8/24/25 Status Report**

Policy IMM.001.004, Zero Tolerance Policy: Prison Sexual Abuse and Sexual Harassment was finalized on 2/1/204 and reviewed with no changes in May 2025. Policy PCS.001.008, "Prevention, Detection, Response to Sexual Assault and Harassment," was finalized on 2/1/24 and revised on 11/21/2024. Both policies prioritize protection measures and support services for those who report incidents.

Under IMM.001.004, NJDOC implements various individualized protection measures to prevent potential retaliation. These measures include housing changes, continuous video surveillance, and the separation of alleged abusers from victims. Additionally, emotional support services are available for individuals concerned about retaliation.

PCS.001.008 further underscores the importance of safeguarding against retaliation and mandates the monitoring of potential retaliatory actions. Oversight of this monitoring falls under the Institutional PREA Compliance Manager (IPCM), who conducts regular status checks and paper reviews for at least 90 days post-allegation. Disciplinary action is taken against anyone found to retaliate against individuals reporting incidents.

Monitoring for potential retaliation extends to both the victim and the individual who reported the incident. While staff members relaying reports from incarcerated persons are not included in this monitoring, third-party reporting by incarcerated persons or staff who directly witness incidents is considered.

To access emotional support services, incarcerated persons can utilize the \*PREA# number on the IP phone system, connecting them with SAFE Hunterdon, an agency offering trauma-informed services and resources for survivors of domestic violence and sexual assault.

For staff members, confidential emotional support services are available through the 888-4BLUENJ (1.888.425.8365) hotline, manned by corrections-trained experts. This hotline ensures confidentiality and provides mental health resources to corrections staff and their families.

EMCF Administration established "EMCF Community Connect," a bi-annual voluntary orientation refresher session aimed to educate the IP population on new policies and rules. Administration also uses this opportunity to review existing policies and rules with the IP population. This is in addition to monthly ILC/Administration and Women's Services Advisory Board meetings.

Additionally, staff members have a confidential reporting route for allegations of sexual abuse or harassment, with the option to contact an SID Investigator or the PREA Compliance Manager directly. This ensures confidentiality and independence from colleagues or immediate supervisors.

The NJDOC, in collaboration with subject matter expert The Moss Group, developed an opportunity for select IPs to serve as PREA Orientation facilitators and educators within the orientation phase of incarceration. These peer leaders have received training in PREA education, assisted with the creation of a newly revised PREA Orientation Manual, and will soon initiate a peer-led PREA Orientation for newly admitted IPs. These individuals may serve as one more resource to the incarcerated population to maintain sexual safety throughout their incarceration. These individuals have been fully trained in all areas of PREA, inclusive of what constitutes a PREA violation, examples of retaliation related to a PREA allegation, and the various mean to report alleged incidents. This is a newly established peer-led enhancement to the existing orientation program.

The NJDOC consulted with subject matter experts to make improvements to the IP Orientation Manual. Revisions include:

- How to report an alleged PREA incident;
- How to contact the Special Investigations Division (SID);
- Programming and services offered by the Programming and Supportive Services unit;
- Services provided by the Classification unit;
- Changes to the Visit Program; and
- Wellness guidance and activities to complete independently.

NJDOC's training plan was previously approved by the Federal Monitor on July 29, 2024 and encompasses a robust training curriculum aimed at providing EMCF staff (custody, civilian, contracted staff and volunteers) knowledge and updates pertaining to all previously listed Level 1 and Level 3 policies. The curriculum was developed in three (3) sections and utilizes AI generated animation to convey content, along with opportunities for true and false quizzes, and question and answer periods. To date, all civilian staff have received the policy training. The EMCF Training Department commenced with Sections 1, 2 and 3 training for custody staff in April 2025 and as of the close of the reporting period has trained 292 of 303 custody staff. The Training Department has been vigilant in attempting to schedule and complete all staff training but is faced with staff being out for various reasons (vacation time, sick time, extended leaves, disciplinary leaves, etc.). As staff return from leaves, they are scheduled to attend policy training.

**Monitor's Finding of Compliance re I. Protecting Prisoners and Staff from Retaliation ¶ 65:**

**[X] Substantial Compliance**

☐ Partial Compliance

☐ Non-compliance

☐ N/A not required until [ date ]

☐ N/A monitor granted an extension until [ date ]

**Monitor's Discussion re I. Protecting Prisoners and Staff from Retaliation ¶ 65:**

NJDOC 001.008 Prevention, Detection and Response of Sexual Abuse and Harassment states, "The NJDOC employs multiple protection measures against potential retaliation. Protection measures are utilized on an individualized basis. They include but are not limited to: housing changes or transfers for incarcerated person abusers, constant video surveillance with audio recording, removal of alleged staff or incarcerated person abusers from contact with victims, and emotional support services for incarcerated persons or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations. This policy was revised on November 21, 2024.

During the most recent onsite compliance visit, the Monitor's Associate reviewed the Completion of the NJDOC PREA Retaliation Monitoring Form (FORM-PREA.AC Retaliation), which the EMCF PREA Compliance Manager completed for individuals who reported allegations of sexual abuse or sexual harassment. The Associate also reviewed Folder 115.67 (which maintains all PREA Retaliation Forms) on the New Jersey DOCNet I-Drive.

The Monitor has received copies of an NJDOC newsletter titled "The Fact Finder," which is distributed to all staff. This monthly newsletter mentions the 888-4BLUENJ hotline, which offers mental health resources to Corrections Staff. This includes emotional support for staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations.

In terms of emotional support for incarcerated persons who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations, the Monitor reviewed a pamphlet that is made available to everyone who lives at Edna Mahan titled, "NJDOC PREA: External Emotional Support Services for Victims of Sexual Abuse." This pamphlet, which is available in both Spanish and English, notifies the incarcerated population that they have access to external sexual abuse and emotional support services. It also tells the incarcerated persons that they may access these services even if they do not wish to make a report of sexual abuse. It notifies users on how to access the services and provides the telephone system phone number \*PREA#. It also notes that calls to the PREA Emotional Support Line are free and confidential.

Additionally, the Monitor reviewed the revised (January 2024) Edna Mahan Incarcerated Persons' Handbook, which says the following:

NJDOC IPs have access to external sexual abuse and emotional support services. IPs may access these services even if they do not wish to make a report of sexual abuse. External sexual abuse services can be accessed via the IP telephone system by dialing:

\*PREA#

Calls to the PREA Emotional Support Services Line are free and confidential. However, the service provider will notify the NJDOC if an IP communicates a threat of imminent harm against self or others.

PREA Emotional Support services are provided by external sexual abuse victim advocates who can assist in crisis intervention, provide information and offer support to anyone who has questions or is looking for information about sexual violence.

If someone is not comfortable making a call from their housing unit, they can contact the IPCM or social worker to assist with privacy concerns. IPs at this correctional facility may also request external sexual abuse and emotional support services/information by writing to:

#### SEXUAL ABUSE EMOTIONAL SUPPORT SERVICES

SAFE in Hunterdon  
47 East Main Street  
Flemington, NJ 08822

#### SEXUAL ABUSE SURVIVOR INFORMATION PACKET

Just Detention International  
3325 Wilshire Blvd., Suite 340  
Los Angeles, CA 90010

The Monitor spoke with Assistant Superintendent Amelia Renshaw, who also serves as PREA Compliance Manager at Edna Mahan, about the facility's efforts to protect both staff and incarcerated individuals from retaliation after reports of sexual abuse or harassment. Ms. Renshaw described a structured monitoring process designed to detect both direct and subtle forms of retaliation. This process includes four reviews with the affected individual—two conducted in person and two completed as “paper” reviews—with all outcomes recorded in a retaliation log. For staff, she watches for unusual shift changes or reassignments that could signal retaliatory action, while for incarcerated individuals she reviews housing moves, grievances, disciplinary reports, and other relevant factors. She added that although monitoring typically spans 90 days, it can be extended if

circumstances warrant closer oversight. During this reporting period, one individual specifically requested an extension of monitoring beyond the standard 90-day timeframe.

The Monitor spoke with this IP and asked her why she requested an extension to her retaliation monitoring. She reported that after an IP against IP allegation, she requested her monitoring be extended because she felt that she needed continued protection. The IP reported that the additional monitoring was helpful.

**Recommendations re I. Protecting Prisoners and Staff from Retaliation ¶ 65:**

It is recommended that NJDOC and Edna Mahan continue to employ multiple protection measures against any form of retaliation and hold any staff accountable for any acts of retaliation.

**I. Protecting Prisoners and Staff from Retaliation**

¶ 66. Whenever NJDOC or Edna Mahan receive an allegation that an Edna Mahan staff member has engaged in sexual abuse or sexual harassment, Edna Mahan's PREA Compliance Manager and Administrator shall confer to determine whether the staff should be removed from positions of prisoner contact at Edna Mahan until an investigation is concluded. Edna Mahan's PREA Compliance Manager shall document the decision and forward the conclusion to the Department-wide PREA Coordinator.

Requirements:

¶ 59. NJDOC and Edna Mahan shall continue to provide a method for staff to privately report sexual abuse and sexual harassment of prisoners.

**Monitor's Measure of Compliance re I. Protecting Prisoners and Staff from Retaliation ¶ 66:**

- Spreadsheet documenting all allegations of sexual abuse, sexual harassment, retaliation for reporting, and/or staff neglect or violation of responsibilities that may have contributed to these incidents. The spreadsheet should identify what steps were taken to protect the alleged victim (removal of alleged staff abusers from contact with victims, etc.)
- Paragraph 109 notifications of an incident to DOJ and Monitor. The notifications note what steps were taken to protect the alleged victim (removal of alleged staff abusers from contact with victims, etc.)
- Monitor will review the documentation sent to NJDOC PREA Coordinator from EMCF PREA Compliance manager, during on site visit.
- Interview with EMCF Administrator regarding protection measures from retaliation of reporting allegations of sexual abuse or sexual harassment
- Interview with EMCF PREA Compliance Manager regarding protection measures from retaliation of reporting allegations of sexual abuse or sexual harassment
- Focus group with prisoners regarding protection measures from retaliation of reporting allegations of sexual abuse or sexual harassment

**Steps taken by NJDOC and EMCF towards implementation re I. Protecting Prisoners and Staff from Retaliation ¶ 66:**

**8/24/25 Status Report**

The information documented in prior status reports remains accurate. Policy PCS.001.008, "Prevention, Detection, Response to Sexual Assault and Harassment," was finalized on 2/1/24 and revised on 11/21/2024. Under this policy, when the NJDOC becomes aware of an incarcerated person facing a substantial risk of imminent sexual abuse, immediate action is taken to safeguard them

using various protection methods. These methods include housing changes or transfers for alleged incarcerated person abusers, constant video surveillance with audio recording, and/or removing alleged staff abusers from contact with victims. Additionally, the NJDOC commits to conducting thorough investigations and prosecuting individuals involved in such conduct as necessary. In cases where allegations of sexual abuse or harassment involving staff members arise, the Institutional PREA Compliance Manager (IPCM) and Administrator or their designee collaborate to determine whether the staff should be temporarily reassigned from positions involving incarcerated persons until the investigation is concluded. The IPCM then notifies the Agency PREA Coordinator of the temporary reassignment via email.

The NJDOC, in collaboration with subject matter expert The Moss Group, developed an opportunity for select IPs to serve as PREA Orientation facilitators and educators within the orientation phase of incarceration. These peer leaders have received training in PREA education, assisted with the creation of a newly revised PREA Orientation Manual, and will soon initiate a peer-led PREA Orientation for newly admitted IPs. These individuals may serve as one more resource to the incarcerated population to maintain sexual safety throughout their incarceration. These individuals have been fully trained in all areas of PREA, inclusive of what constitutes a PREA violation, examples of retaliation related to a PREA allegation, and the various mean to report alleged incidents. This is a newly established peer-led enhancement to the existing orientation program.

The NJDOC consulted with subject matter experts to make improvements to the IP Orientation Manual. Revisions include:

- How to report an alleged PREA incident;
- How to contact the Special Investigations Division (SID);
- Programming and services offered by the Programming and Supportive Services unit;
- Services provided by the Classification unit;
- Changes to the Visit Program; and
- Wellness guidance and activities to complete independently.

EMCF Administration established “EMCF Community Connect”, a bi-annual voluntary orientation refresher session aimed to educate the IP population on new policies and rules. Administration also uses this opportunity to review existing policies and rules with the IP population. This is in addition to monthly ILC/Administration and Women’s Services Advisory Board meetings.



NJDOC's training plan was previously approved by the Federal Monitor on July 29, 2024 and encompasses a robust training curriculum aimed at providing EMCF staff (custody, civilian, contracted staff and volunteers) knowledge and updates pertaining to all previously listed Level 1 and Level 3 policies. The curriculum was developed in three (3) sections and utilizes AI generated animation to convey content, along with opportunities for true and false quizzes, and question and answer periods. To date, all civilian staff have received the policy training. The EMCF Training Department commenced with Sections 1, 2 and 3 training for custody staff in April 2025 and as of the close of the reporting period has trained 292 of 303 custody staff. The Training Department has been vigilant in attempting to schedule and complete all staff training but is faced with staff being out for various reasons (vacation time, sick time, extended leaves, disciplinary leaves, etc.). As staff return from leaves, they are scheduled to attend policy training.

**Monitor's Finding of Compliance re I. Protecting Prisoners and Staff from Retaliation ¶ 66:**

**☒ Substantial Compliance**

☐ Partial Compliance

☐ Non-compliance

☐ N/A not required until [ date ]

☐ N/A monitor granted an extension until [ date ]

**Monitor's Discussion re I. Protecting Prisoners and Staff from Retaliation ¶ 66:**

NJDOC 001.008 Prevention, Detection and Response of Sexual Abuse and Harassment states, "Whenever NJDOC receives an allegation that a staff member(s) has engaged in sexual abuse or sexual harassment, the IPCM and Administrator or Administrator designee shall confer to determine whether the staff should be removed from positions of incarcerated person contact until an investigation is concluded. The IPCM shall forward the temporary reassignment notification via email to the Agency PREA Coordinator." This policy was revised on November 21, 2024.

NJDOC and Edna Mahan staff maintain and have submitted a copy to DOJ and the Monitor, a spreadsheet documenting all allegations of sexual abuse, sexual harassment, retaliation for reporting, and/or staff neglect or violation of responsibilities that may have contributed to these incidents. This spreadsheet also identifies whether the staff was removed from positions of prisoner contact at Edna Mahan until the investigation is complete. During this reporting period (February 25 – August 24, 2025), Edna Mahan had 10 allegations of sexual abuse or sexual harassment; Three (3) staff were reassigned. (six allegations of abuse, two staff not reassigned based on camera footage findings, and one allegation was against an unknown perpetrator). This does

not necessarily mean they were removed entirely from EMCF. They may have been moved to a different location in the facility to avoid having contact with the alleged victim.

Since August 24, 2021, NJDOC has notified the DOJ and the Monitor of any incident or allegations of sexual abuse or retaliation and injury requiring emergency medical attention related to an allegation of sexual abuse. The notices included the status of the housing assignment for the alleged victim and any restrictions on staff assignments.

The Monitor met with Edna Mahan Administrator Bryan Fusaro to discuss how he and the facility's PREA Compliance Manager decide whether staff accused of sexual abuse, sexual harassment, or retaliation should be removed from positions involving prisoner contact during an investigation. Administrator Fusaro explained that the decision is guided primarily by the seriousness of the allegation, with the safety of the alleged victim as his top priority. He has the authority to reassign the accused staff member away from the entire facility, a specific area (such as maximum security or the Satellite building), the victim's housing unit, or any role involving contact with an IP. He further noted that the stationery and body-worn camera footage is reviewed to help inform these decisions.

When the Administrator is absent, Associate Administrator Thompson is responsible for deciding whether a staff member should be removed from their position. She explained that her decision takes into account the overall circumstances of the allegation, such as its seriousness, the availability of camera footage for immediate review, and whether the staff member works in the same housing unit as the alleged victim. Above all, however, her foremost priority is ensuring the safety of the incarcerated person.

**Recommendations re I. Protecting Prisoners and Staff from Retaliation ¶ 66:**

No recommendation

**I. Protecting Prisoners and Staff from Retaliation**

¶ 67. NJDOC and Edna Mahan shall monitor all prisoners and staff who report sexual abuse or sexual harassment and prisoners who have been reported to have suffered or cooperated with sexual abuse or sexual harassment investigations from retaliation by other prisoners or staff for at least 90 days following a report of sexual abuse or sexual harassment, to see if there are changes that may suggest possible retaliation by prisoners or staff, including prisoner disciplinary reports, housing or program changes, and negative performance reviews or reassignments, and shall act promptly to remedy any such retaliation.

Requirements:

**Monitor's Measure of Compliance re I. Protecting Prisoners and Staff from Retaliation ¶ 67:**

- NJDOC Policy Statement Number 001.008 "Prevention, Detection and Response of Sexual Abuse and Harassment"
- EMCF Level 3 policy regarding retaliation protection for staff and prisoners
- Spreadsheet documenting all allegations of sexual abuse, sexual harassment, retaliation for reporting, and/or staff neglect or violation of responsibilities that may have contributed to these incidents. The spreadsheet should identify what steps were taken to protect the alleged victim (removal of alleged staff abusers from contact with victims, etc.)
- Semi-annual report (beginning April 5, 2022, for the last quarter of 2021 and first quarter of 2022), to the DOJ and Monitor identifying any staff or prisoner who had signs of retaliation, any person whose monitoring was extended beyond the 90 days, or any other individual who cooperates with an investigation that expressed a fear of retaliation
- Any memos, written directives from the Commissioner, Deputy Commissioner and/or Administrator that addresses procedures, and practices at Edna Mahan specific to the retaliation of staff or prisoners for reporting an allegation
- Review of Folder 115.67 (which maintains all PREA Retaliation Forms) on the New Jersey DOCNet I-Drive during on-site visit
- Review of retaliation tracking log maintained by EMCF PREA Compliance Manager during on-site visit
- Interview with EMCF Administrator regarding retaliation protection for staff and prisoners
- Interview with EMCF PREA Compliance Manager regarding retaliation protection for staff and prisoners

**Steps taken by NJDOC and EMCF towards implementation re I. Protecting Prisoners and Staff from Retaliation ¶ 67:**

**8/24/25 Status Report**

The information documented in the 8/24/24 status report remains accurate. Policy IMM.001.004, Zero Tolerance Policy: Prison Sexual Abuse and Sexual Harassment was finalized on 2/1/24 and reviewed with no changes in May 2025. Policy PCS.001.008, "Prevention, Detection, Response to Sexual Assault and Harassment," was finalized on 2/1/24 and revised on 11/21/2024. These policies prioritize protecting against and monitoring retaliation for reporting sexual abuse or harassment.

Under IMM.001.004, the Institutional PREA Compliance Manager (IPCM) is responsible for monitoring retaliation at the facility level. This involves monitoring the conduct and treatment of incarcerated persons or staff who report incidents for at least 90 days following a report to detect and promptly address any potential retaliation. Monitoring includes reviewing disciplinary reports, housing or program changes, and performance reviews. This monitoring continues beyond 90 days if necessary, especially if there are indications of ongoing retaliation. Even if the investigative outcome is unfounded, monitoring continues if there are fears of retaliation expressed by staff or incarcerated persons. Any retaliation against individuals reporting incidents is subject to disciplinary action, and emotional support services are available for those who fear retaliation (ex: SAFE Hunterdon for IPs and Staff, 4BlueNJ for staff).

Pursuant to PCS.001.008, the IPCM conducts retaliation monitoring for the victim and, if applicable, the individuals who reported the allegation. This monitoring includes face-to-face meetings and paper reviews conducted at least twice within 90 days post-allegation. All reviews are documented using the NJDOC PREA Retaliation Monitoring Form, with ongoing monitoring required if retaliation is found and cannot be resolved within the initial 90-day period.

The EMCF Institutional PREA Compliance Manager (IPCM) issued a PREA Newsletter to all incarcerated persons in November 2024 reviewing the definition of “retaliation”, inclusive of examples of retaliation and the difference between retaliation and rule enforcement.

The EMCF IPCM continues to communicate with IPs, during both the 90-day retaliation monitoring process and in instances of unfounded or unsubstantiated allegations, the difference between retaliation and the enforcement of rules and regulations.

The NJDOC, in collaboration with subject matter experts, developed an opportunity for select IPs to serve as PREA Orientation facilitators and educators within the orientation phase of incarceration. These peer leaders have received training in PREA education, assisted with the creation of a newly revised PREA Orientation Manual, and will soon initiate a peer-led PREA Orientation for newly admitted IPs. These individuals may serve as one more resource to the incarcerated population to maintain sexual safety throughout their incarceration. These individuals have been fully trained in all areas of PREA, inclusive of what constitutes a PREA violation, examples of retaliation related to a PREA allegation, and the various mean to report alleged incidents. This is a newly established peer-led enhancement to the existing orientation program.

The NJDOC consulted with subject matter experts to make improvements to the IP Orientation Manual. Revisions include:

- How to report an alleged PREA incident;
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EMCF Administration established “EMCF Community Connect”, a bi-annual voluntary orientation refresher session aimed to educate the IP population on new policies and rules. Administration also uses this opportunity to review existing policies and rules with the IP population. This is in addition to monthly ILC/Administration and Women’s Services Advisory Board meetings.

NJDOC’s training plan was previously approved by the Federal Monitor on July 29, 2024 and encompasses a robust training curriculum aimed at providing EMCF staff (custody, civilian, contracted staff and volunteers) knowledge and updates pertaining to all previously listed Level 1 and Level 3 policies. The curriculum was developed in three (3) sections and utilizes AI generated animation to convey content, along with opportunities for true and false quizzes, and question and answer periods. To date, all civilian staff have received the policy training. The EMCF Training Department commenced with Sections 1, 2 and 3 training for custody staff in April 2025 and as of the close of the reporting period has trained 292 of 303 custody staff. The Training Department has been vigilant in attempting to schedule and complete all staff training but is faced with staff being out for various reasons (vacation time, sick time, extended leaves, disciplinary leaves, etc.). As staff return from leaves, they are scheduled to attend policy training.

**Monitor’s Finding of Compliance re I. Protecting Prisoners and Staff from Retaliation ¶ 67:**

**[X] Substantial Compliance**

[ ] Partial Compliance

[ ] Non-compliance

[ ] N/A not required until [ date ]

[ ] N/A monitor granted an extension until [ date ]

**Monitor's Discussion re I. Protecting Prisoners and Staff from Retaliation ¶ 67:**

NJDOC 001.008 Prevention, Detection and Response of Sexual Abuse and Harassment states, " For at least 90 days following report of sexual abuse or sexual harassment allegation, the IPCM will monitor the conduct and treatment of the reporting incarcerated person or staff by way of periodic status checks. The IPCM will use the NJDOC PREA Retaliation Monitoring Form (FORM-PREA.AC Retaliation). The IPCM will provide a copy of this form to the incarcerated person and request that the incarcerated person sign it. A copy of the signed form, or documented refusal to sign, will be maintained by the IPCM and placed in Folder 115.67 on the DOCNet I-Drive.

Retaliation monitoring shall be an ongoing process for 90 days post allegation. NJDOC requires at least 2 face to face meetings and 2 paper reviews to be conducted within those 90 days. These must be done on separate instances, with one face to face and one paper review being in the first 45 days and one face to face and one paper review in the second 45 days. All four reviews must be conducted for each individual.

- Paper reviews include reviewing of disciplinary reports, program changes, housing changes, performance evaluations, staff reassignments and JPay inquiries/grievances.
- Each face to face meeting must have signature of staff or incarcerated person located on the 2nd page. Refusal of incarcerated persons to sign the form will be documented. IPCM signature is required at the end of the 90 days.
- If retaliation is found and cannot be corrected within the 90 days, continued monitoring is expected in 30 day intervals until the retaliation is addressed and resolved."

This policy was revised on November 21, 2024.

Additionally, NJDOC Policy IMM.001.004 Zero Tolerance Policy: Prison Sexual Assault states, "The IPCM is responsible for retaliation monitoring at the facility-level. The correctional facility's IPCM shall, for at least 90 days following a report of sexual abuse/harassment monitor the conduct and treatment of Incarcerated Persons or staff who reported to see if there are any changes that may suggest possible retaliation and will act promptly to remedy any such retaliation. This monitoring will include review of any Incarcerated Person disciplinary reports, housing or program changes, or negative performance reviews or reassignments of staff. Such monitoring shall continue beyond 90 days if the initial monitoring indicates a continuing need. In the case of Incarcerated Persons, this monitoring will also include periodic status checks. The monitoring obligation will terminate if the investigative outcome of the allegation is unfounded. However, if a staff person or Incarcerated Person expresses fear of retaliation, they must be monitored even if the allegation was unfounded.' This Level 1/3 policy, was revised on July 1, 2023.

During this most recent compliance visit, the Monitor's Associate reviewed the Completion of NJDOC PREA Retaliation Monitoring Form (FORM-PREA.AC Retaliation) completed by the current EMCF PREA Compliance Manager for incarcerated persons or staff who reported the sexual abuse of incarcerated persons. The Associate also reviewed Folder 115.67 (which maintains all PREA Retaliation Forms) on the New Jersey DOCNet I-Drive.

The Monitor discussed with Edna Mahan, Administrator Bryan Fusaro, how the facility safeguards individuals who assist in an investigation and voice concerns about retaliation. He explained the protective measures outlined in the policy. He added that any staff member accused of retaliating against an incarcerated person will be removed from roles involving contact with them. During this reporting period, there were two (2) allegations of retaliation; one was deemed to be unsubstantiated, and the other was deemed to be unfounded. Both staff members were removed from their positions during the investigation. The Monitor also interviewed Assistant Superintendent Amelia Renshaw, who serves as the PREA Compliance Manager at Edna Mahan, regarding the facility's efforts to protect individuals who participate in investigations and raise concerns about retaliation. She explained that monitoring is conducted to identify both obvious and subtle forms of retaliation, using a structured process that includes four reviews with the individual—two held in person and two completed through documentation. During her in-person meetings, Ms. Renshaw asks explicitly whether the incarcerated person has experienced more subtle forms of retaliation, such as selective rule enforcement. All findings are documented in the retaliation log. In addition, she reviews a range of indicators for incarcerated individuals, including housing moves, grievances, disciplinary reports, and excessive searches. For staff, she monitors unusual shift changes or job reassignments that could signal retaliatory behavior.

During this most recent compliance visit, the Monitor's Associate reviewed the retaliation tracking log maintained by the PREA Compliance Manager. As previously noted, one incarcerated person requested extensions of their retaliation monitoring during this reporting period.

**Recommendations re I. Protecting Prisoners and Staff from Retaliation ¶ 67:**

No recommendation

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**I. Protecting Prisoners and Staff from Retaliation**

¶ 68. If any other individual who cooperates with an investigation expresses a fear of retaliation, NJDOC and Edna Mahan shall take measures they deem appropriate to protect that individual against retaliation.

Requirements:

**Monitor's Measure of Compliance re I. Protecting Prisoners and Staff from Retaliation ¶ 68:**

¶ 67 & ¶ 68

- NJDOC Policy Statement Number 001.008 "Prevention, Detection and Response of Sexual Abuse and Harassment"
- EMCF Level 3 policy regarding retaliation protection for staff and prisoners
- Spreadsheet documenting all allegations of sexual abuse, sexual harassment, retaliation for reporting, and/or staff neglect or violation of responsibilities that may have contributed to these incidents. The spreadsheet should identify what steps were taken to protect the alleged victim (removal of alleged staff abusers from contact with victims, etc.)
- Semi-annual report (beginning April 5, 2022, for the last quarter of 2021 and the first quarter of 2022), to the DOJ and Monitor identifying any staff or prisoner who had signs of retaliation, any person whose monitoring was extended beyond the 90 days, or any other individual who cooperates with an investigation that expressed a fear of retaliation
- Any memos, written directives from the Commissioner, Deputy Commissioner and/or Administrator that addresses procedures, and practices at Edna Mahan specific to the retaliation of staff or prisoners for reporting an allegation
- Review of Folder 115.67 (which maintains all PREA Retaliation Forms) on the New Jersey DOCNet I-Drive during on-site visit
- Review of retaliation tracking log maintained by EMCF PREA Compliance Manager during on-site visit
- Interview with EMCF Administrator regarding specific measures they have taken to protect an individual against retaliation
- Interview with EMCF PREA Compliance Manager regarding specific measures they have taken to protect an individual against retaliation



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**Steps taken by NJDOC and EMCF towards implementation re I. Protecting Prisoners and Staff from Retaliation ¶ 68:**

**8/24/25 Status Report**

The information documented in the 8/24/24 status report remains accurate. Policy IMM.001.004, Zero Tolerance Policy: Prison Sexual Abuse and Sexual Harassment was finalized on 2/1/24 and reviewed with no changes in May 2025. Policy PCS.001.008, "Prevention, Detection, Response to Sexual Assault and Harassment," was finalized on 2/1/24 and revised on 11/21/2024. Both policies prioritize protection against and monitoring of retaliation for reporting sexual abuse or sexual harassment.

Under IMM.001.004, protection measures are utilized on an individualized basis. They include but are not limited to: housing changes or transfers for incarcerated person abusers, constant video surveillance with audio recording, removal of alleged staff or incarcerated person abusers from contact with victims, and emotional support services for incarcerated Persons or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations. The Institutional PREA Compliance Manager (IPCM) oversees retaliation monitoring, ensuring prompt action to address any signs of retaliation against individuals who report incidents. This monitoring continues for at least 90 days post-allegation and may extend beyond if necessary, with periodic status checks and documentation to ensure accountability.

Similarly, PCS.001.008 emphasizes the protection of all individuals from retaliation and mandates monitoring of any potential retaliatory actions. The IPCM is tasked with conducting thorough monitoring, including face-to-face meetings and paper reviews, to track any indicators of retaliation. Documentation and follow-up actions are essential to address and resolve instances of retaliation promptly and effectively.

The EMCF IPCM continues to communicate with IPs, during both the 90-day retaliation monitoring process and in instances of unfounded or unsubstantiated allegations, the difference between retaliation and the enforcement of rules and regulations. The NJDOC, in collaboration with subject matter experts, developed an opportunity for select IPs to serve as PREA Orientation facilitators and educators within the orientation phase of incarceration. These peer leaders have received training in PREA education, assisted with the creation of a newly revised PREA Orientation Manual, and will soon initiate a peer-led PREA Orientation for newly admitted IPs. These individuals may serve as one more resource to the incarcerated population to maintain sexual safety throughout their incarceration. These individuals have been fully trained in all areas of PREA, inclusive of what constitutes a PREA violation, examples of retaliation related to a PREA allegation, and the various mean to report alleged incidents. This is a newly established peer-led enhancement to the existing orientation program.

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The NJDOC consulted with subject matter experts to make improvements to the IP Orientation Manual. Revisions include:

- How to report an alleged PREA incident;
- How to contact the Special Investigations Division (SID);
- Programming and services offered by the Programming and Supportive Services unit;
- Services provided by the Classification unit;
- Changes to the Visit Program; and
- Wellness guidance and activities to complete independently.

EMCF Administration established “EMCF Community Connect,” a bi-annual voluntary orientation refresher session aimed to educate the IP population on new policies and rules. Administration also uses this opportunity to review existing policies and rules with the IP population. This is in addition to monthly ILC/Administration and Women’s Services Advisory Board meetings.

A comprehensive training curriculum was previously developed and approved to review all new revisions and updates within the specified agreement timelines. To date, all civilian staff have received the policy training. The EMCF Training Department commenced with Sections 1, 2 and 3 training for custody staff in April 2025 and as of the close of the reporting period has trained 292 of 303 custody staff. The Training Department has been vigilant in attempting to schedule and complete all staff training but is faced with staff being out for various reasons (vacation time, sick time, extended leaves, disciplinary leaves, etc.). As staff return from leaves, they are scheduled to attend policy training.

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**Monitor's Finding of Compliance re I. Protecting Prisoners and Staff from Retaliation ¶ 68:**

**[X] Substantial Compliance**

- ☐ Partial Compliance
- ☐ Non-compliance
- ☐ N/A not required until [ date ]
- ☐ N/A monitor granted an extension until [ date ]

**Monitor's Discussion re I. Protecting Prisoners and Staff from Retaliation ¶ 68:**

NJDOC 001.008 Prevention, Detection and Response of Sexual Abuse and Harassment states, "Any individual who cooperates with the investigation (including witnesses, perpetrators, staff, etc.) has the ability to express their concerns of retaliation and will be monitored for their potential retaliation using the same procedure noted above."

NJDOC and Edna Mahan staff maintain and have submitted a copy to DOJ and the Monitor, a spreadsheet documenting all allegations of sexual abuse, sexual harassment, and retaliation for reporting.

During this recent compliance visit, the Monitor's Associate reviewed the Completion of NJDOC PREA Retaliation Monitoring Form (FORM-PREA.AC Retaliation) completed by the current EMCF PREA Compliance Manager for incarcerated persons or staff who reported the sexual abuse. The Associate also reviewed Folder 115.67 (which maintains all PREA Retaliation Forms) on the New Jersey DOCNet I-Drive.

The Monitor spoke with Assistant Superintendent Amelia Renshaw, the PREA Compliance Manager at Edna Mahan, regarding the facility's approach to protecting individuals who assist in investigations and express concerns about retaliation. She explained that the primary strategy involves direct communication with the individual. If there are any signs that the person fears retaliation, the case is referred to the Special Investigations Division for further investigation. Assistant Superintendent Renshaw also noted that, throughout the monitoring period, she regularly asks the incarcerated individual whether they have experienced any subtle forms of retaliation, such as selective enforcement of rules.

During this most recent compliance visit, the Monitor's Associate reviewed the retaliation tracking log maintained by the EMCF PREA Compliance Manager. It should be noted that there were no cases where any individual who cooperated with an investigation expressed a fear of retaliation during this reporting period. There were two (2) cases where an individual who made

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an allegation of sexual abuse or sexual harassment felt they were retaliated against. One was determined to be “unsubstantiated”, and one was determined to be “unfounded”.

**Recommendations re I. Protecting Prisoners and Staff from Retaliation ¶ 68:**

No recommendation

**K. Referrals and Investigations**

NJDOC and Edna Mahan shall ensure that all allegations of sexual abuse and sexual harassment at Edna Mahan are promptly, thoroughly, and objectively investigated and appropriately referred for prosecutorial review, and that alleged victims are advised of the outcome of their allegations. Accordingly:

- ¶ 75 Edna Mahan investigators shall continue to investigate allegations of sexual abuse or sexual harassment, consistent with NJDOC policy and New Jersey law. Edna Mahan will continue to refer allegations of sexual abuse and sexual harassment to local prosecutors as appropriate.

Requirements:

- ¶ 76 The provisions in this section that provide deadlines for NJDOC or Edna Mahan's issuance of an investigative report following an allegation of sexual abuse or harassment apply only to administrative investigations undertaken solely by NJDOC or Edna Mahan, and do not apply to criminal investigations undertaken by the prosecutors in collaboration with NJDOC or Edna Mahan.

**Monitor's Measure of Compliance re K. Referrals and Investigations ¶ 75:**

- NJDOC Policy Statement Number 001.008 "Prevention, Detection and Response of Sexual Abuse and Harassment" specific to criminal and administrative agency investigations.
- Special Investigations Division Internal Management Procedures #035, "Investigation Procedures"
- Spreadsheet documenting all allegations of sexual abuse, sexual harassment, retaliation for reporting, and/or staff neglect or violation of responsibilities that may have contributed to these incidents. The spreadsheet identifies which investigations are undertaken by the prosecutors and which are investigation by NJDOC.
- Interview with EMCF PREA Compliance Manager regarding referring allegations of sexual abuse and sexual harassment to local prosecutors.
- Interview with EMCF Special Investigations Principle regarding referring allegations of sexual abuse and sexual harassment to local prosecutors.

**Steps taken by NJDOC and EMCF towards implementation re K. Referrals and Investigations ¶ 75:**

**8/24/25 Status Report**

The information documented in prior status reports remains accurate. Policy PCS.001.008, titled "Prevention, Detection, Response to Sexual Assault and Harassment," finalized on 2/1/24, along with SID IMP #035 Investigation Procedures, finalized on 12/21/23, include procedural information requiring that all allegations of sexual abuse or sexual harassment are promptly, thoroughly, and objectively investigated and, where applicable, investigations are referred to the relevant Prosecutor's Office. Additionally, incarcerated persons under the custody of the NJDOC are informed of the investigative findings following a PREA investigation in which they were complainants. Each facility's SID investigation report for PREA cases undergoes review by both the facility-level Sexual Abuse Advisory Council (SAAC) and the Central Office SAAC.

The Division of Women's Services, in collaboration with subject matter experts, The Moss Group, initiated a formal review of Policy PREA.001, titled, "Sexual Abuse Advisory Council (SAAC)." The intent of the review is to analyze the current process of a sexual abuse incident review, inclusive of both the facility-level and Central Office-level review, to ensure the NJDOC is conducting a thorough quality assurance review of identified needs. These needs may be inclusive of policy creation/revisions, procurement of additional equipment, staff training, and staff corrective action/discipline.

**Monitor's Finding of Compliance re K. Referrals and Investigations ¶ 75:**

**[X] Substantial Compliance**

- ☐ Partial Compliance
- ☐ Non-compliance
- ☐ N/A not required until [ date ]
- ☐ N/A monitor granted an extension until [ date ]

**Monitor's Discussion re K. Referrals and Investigations ¶ 75:**

Standard 115.22, NJDOC assigns to the SID the responsibility of investigating violations of the laws of the United States, the State of New Jersey, as well as violations of the New Jersey Administrative Code (10A), New Jersey Criminal Code Title 2C and NJDOC policies and procedures by incarcerated persons, staff, contractors, volunteers, and other individuals who visit NJDOC facilities. Investigations will occur in a prompt, thorough, and objective manner for all allegations, including third-party and anonymous reports.

NJDOC 001.008 Prevention, Detection and Response of Sexual Abuse and Harassment, states, “NJDOC assigns to the Special Investigations Division the responsibility of investigating violations of the laws of the United States, the State of New Jersey, as well as violations of the New Jersey Administrative Code (10A), New Jersey Criminal Code Title 2C and NJDOC policies and procedures by incarcerated persons, staff and other individuals who visit NJDOC facilities. In instances where an investigation that originated as a PREA allegation has been determined, through the investigative process, not to be PREA related, such cases will be referred to the Administration to address whether any other appropriate action should be taken. NJDOC’s Special Investigations Division, which is a division under the Office of the Commissioner, is responsible for investigating all allegations of sexual abuse. This policy was revised on November 21, 2024.

The Special Investigations Division Internal Management Procedures #035, “Investigation Procedures” states, “The New Jersey Department of Corrections (“NJDOC”) assigns the Special Investigations Division (“SID”) the responsibility of investigating violations of the laws of the State of New Jersey, as well as violations of the New Jersey Administrative Code (10A) and NJDOC policies and procedures by incarcerated persons, employees and other individuals who visit NJDOC facilities.”

Specific to “Investigation Procedures IMP #035 also states, “When an investigation appears to involve criminal conduct, notification should be made as soon as possible to the SID Assistant Commissioner or designee and the applicable County Prosecutor’s Office or the Attorney General’s Office of Public Integrity and Accountability. SID shall cooperate with any joint investigation undertaken with any outside law enforcement agency.” This revised Special Investigations Division Internal Management Procedures #035 was finalized initially on December 21, 2023.

NJDOC and Edna Mahan personnel have kept and provided the DOJ and the Monitor with a spreadsheet tracking all reports of sexual abuse, sexual harassment, retaliation for reporting, and staff misconduct or negligence related to these events. This document records the date local prosecutors were informed of each incident, the prosecutors' decision on who will conduct the investigation, and, if the Hunterdon County Prosecutor's Office declines to pursue criminal charges, the date the case is sent back to NJDOC for further investigation.

The Monitor interviewed the Assistant Commissioner (AC) of the Special Investigation Division (SID). She verified that the SID/Special Victim Unit adheres to the guidelines set by the Hunterdon County Prosecutor’s Office and the Attorney General regarding the referral of all sexual assault allegations to Hunterdon County, as well as allegations of criminal sexual contact where probable cause is established (per Hunterdon County’s policy).

**Recommendations re K. Referrals and Investigations ¶ 75:**

No recommendation



**K. Referrals and Investigations**

¶ 77 Edna Mahan shall investigate all allegations of sexual abuse or sexual harassment reasonably promptly, thoroughly, and objectively, including third party and anonymous reports. The departure of the alleged abuser or victim from the employment or control of Edna Mahan or NJDOC shall not provide a basis for terminating an investigation. Administrative investigations shall be completed regardless of the results of any criminal investigations and regardless of the subject's continued employment by NJDOC.

Requirements:

¶ 76 The provisions in this section that provide deadlines for NJDOC or Edna Mahan's issuance of an investigative report following an allegation of sexual abuse or harassment apply only to administrative investigations undertaken solely by NJDOC or Edna Mahan, and do not apply to criminal investigations undertaken by the prosecutors in collaboration with NJDOC or Edna Mahan.

**Monitor's Measure of Compliance re K. Referrals and Investigations ¶ 77:**

¶ 77/¶ 75 –

- NJDOC Policy Statement Number 001.008 "Prevention, Detection and Response of Sexual Abuse and Harassment" specific to criminal and administrative agency investigations
- Special Investigations Division Internal Management Procedures #014 – Procedures for Sexual Offenses
- Spreadsheet documenting all allegations of sexual abuse, sexual harassment, retaliation for reporting, and/or staff neglect or violation of responsibilities that may have contributed to these incidents. The spreadsheet identifies the time between the date of the notification of the allegation and the date of the completed investigation
- Interview with EMCF Special Investigations Principle and her staff

**Steps taken by NJDOC and EMCF towards implementation re K. Referrals and Investigations ¶ 77:**

**8/24/25 Status Report**

The information documented in prior status reports remain accurate. Policy PCS.001.008, titled "Prevention, Detection, Response to Sexual Assault and Harassment," finalized on 2/1/24 and revised on 11/21/24, along with SID IMP #035 "Investigation Procedures" finalized on 12/21/23, outline the investigative duties of the Special Investigations Division (SID) and its staff. The policy mandates that SID promptly, thoroughly, and impartially investigates all reports—whether verbal, written, or anonymous—of sexual abuse, misconduct, and harassment, without regard to the victim's or alleged perpetrator's employment status or location.

In the last reporting period, the DOC was rated partially compliant in this area due to shortcomings perceived in investigations, specifically, investigators using vague language in framing their questions and not asking appropriate follow-up questions. During this reporting period, these subjects were a major focus of discussions with SVU supervisors and investigators were provided with additional guidance in clarity and thoroughness. As a result, there has been significant improvement in witness interviews and the thoroughness of investigations as observed during the review of a few complex cases.

In one case, an IP made several additional allegations against staff when interviewed in the course of her alleged sexual abuse claim. That sparked an investigation into multiple separate claims, all of which were broken out and addressed individually in the investigation report. The monitor noted that the report was well organized, well written and thoroughly reviewed each allegation. In another case, a third party alleged an Officer had a relationship with an IP. This case was complex because the relationship was alleged to have occurred while the IP was incarcerated but also after she left DOC custody. The interview of the third-party claimant was thorough and delving. The investigator pursued all potential documentary and witness evidence. The monitor noted to DOC that the investigator in this case did a good job interviewing, researching and writing this case. The investigators in the cases mentioned here are not the same person, and this shows improvement is taking hold throughout SID and not just with one individual investigator.

**Monitor's Finding of Compliance re K. Referrals and Investigations ¶ 77:**

**☒ Substantial Compliance**

☐ Partial Compliance

☐ Non-compliance

☐ N/A not required until [ date ]

☐ N/A monitor granted an extension until [ date ]

**Monitor's Discussion re K. Referrals and Investigations ¶ 77:**

NJDOC 001.008 Prevention, Detection and Response of Sexual Abuse and Harassment, states, "NJDOC assigns to the Special Investigations Division the responsibility of investigating violations of the laws of the United States, the State of New Jersey, as well as violations of the New Jersey Administrative Code (10A), New Jersey Criminal Code Title 2C and NJDOC policies and procedures by incarcerated persons, staff and other individuals who visit NJDOC facilities. In instances where an investigation that originated as a PREA allegation has been determined, through the investigative process, not to be PREA related, such cases will be referred to Administration to address whether any other appropriate action should be taken. NJDOC's Special Investigations

Division, which is a division under the Office of the Commissioner, is responsible for investigating all allegations of sexual abuse. Investigations will occur in a prompt, thorough, and objective manner for all allegations, including third-party and anonymous reports.

The policy goes on to state, “The departure of the alleged abuser or victim from NJDOC employment or from an NJDOC facility does not provide a basis for terminating an investigation. Administrative investigations will be completed regardless of the results of any criminal investigations and regardless of the subject’s continued employment by NJDOC or residency at an NJDOC facility”.

This policy was revised on November 21, 2024.

The Special Investigations Division Internal Management Procedures #035, “Investigation Procedures” states, “The New Jersey Department of Corrections (“NJDOC”) assigns the Special Investigations Division (“SID”) the responsibility of investigating violations of the laws of the State of New Jersey, as well as violations of the New Jersey Administrative Code (10A) and NJDOC policies and procedures by incarcerated persons, employees and other individuals who visit NJDOC facilities.” This Special Investigations Division Internal Management Procedures #035 was finalized on December 21, 2023.

Additionally, the Special Investigations Division Internal Management Procedures #014, “Procedures for Sexual Abuse, PREA Retaliation and Sexual Harassment” was recently revised. It states, “The New Jersey Department of Corrections assigns SID the responsibility of investigating violations of the laws of the State of New Jersey, the New Jersey Administrative Code (10A) and NJ Department of Corrections policies and procedures that occur within its facilities. SID is tasked with investigating sexual abuse, sexual harassment and retaliation. Such alleged offenses must be objectively, thoroughly and expeditiously investigated in a professional, nonjudgmental manner.” This Special Investigations Division Internal Management Procedures #014 was finalized on December 21, 2023.

Special Investigations Division Internal Management Procedures (IMP) #035 states “The departure of an incarcerated person or staff member from NJDOC’s control or employment does not provide a basis to terminate an investigation. Investigators shall continue to investigate allegations consistent with NJ law and NJDOC policy and regardless of whether the incarcerated person or staff member has departed from NJDOC. This applies to all criminal investigations and administrative investigations. Special Investigations Division Internal Management Procedures (IMP) #014 states,” The departure of an incarcerated person or staff

member from DOC's control or employment does not provide a basis to terminate an investigation. Investigators shall continue to investigate sexual abuse, retaliation and sexual harassment consistent with NJ law and DOC policy regardless of whether the incarcerated person or staff member has departed from DOC employment or custody. "

NJDOC and Edna Mahan staff maintain and have submitted a copy to DOJ and the Monitor, a spreadsheet documenting all allegations of sexual abuse, sexual harassment, retaliation for reporting, and/or staff neglect or violation of responsibilities that may have contributed to these incidents. This spreadsheet identifies the date the local prosecutors were notified of an incident, the decision made by the prosecutors regarding who is going to investigate, and, if the Hunterdon County Prosecutors' Office chooses to file criminal charges, the date the criminal charges are completed, and the case is returned to NJDOC for administrative investigation.

The Monitor interviewed the Assistant Commissioner of the Special Investigations Division (SID), the SID Principal Investigator assigned to Edna Mahan, and the Principal Investigator from the Special Victims Unit (SVU). All three confirmed that the SID/SVU investigates every report of sexual abuse or sexual harassment, regardless of whether the alleged IP victim or perpetrator is still housed at Edna Mahan. They also emphasized that these investigations proceed independently of any criminal proceedings and continue even if the NJDOC no longer employs the alleged staff abuser.

#### **Recommendations re K. Referrals and Investigations ¶ 77:**

The Monitor, DOJ, and the DOC have discussed the need for all investigators to avoid asking summary questions of witnesses, such as "did you notice any PREA violations?" While certain investigators avoid this, other investigators would benefit from additional training.

**K. Referrals and Investigations**

¶ 78 Edna Mahan shall use investigators who have received special training in institutional sexual abuse. Specialized training shall include techniques for interviewing sexual abuse victims, proper use of *Miranda v. Arizona*, 384 U.S. 436 (1966), and *Garrity v. New Jersey*, 385 U.S. 493 (1967), warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. NJDOC shall maintain documentation that Edna Mahan investigators have completed the required specialized training in conducting sexual abuse investigations. Consistent with current practice, the Department-wide PREA Coordinator and Edna Mahan's PREA Compliance Manager shall not serve as investigators for sexual abuse investigations.

**Requirements:**

Consistent with current practice, the Department-wide PREA Coordinator and Edna Mahan's PREA Compliance Manager shall not serve as investigators for sexual abuse investigations.

**Monitor's Measure of Compliance re K. Referrals and Investigations ¶ 78:**

¶ 78/¶ 77/¶ 75 –

- NJDOC Policy Statement Number 001.008 "Prevention, Detection and Response of Sexual Abuse and Harassment" specific to criminal and administrative agency investigations
- List of EMCF Special Investigators and their resume/expertise
- Training curriculum to train investigative staff
- Documentation training to investigators on the Miranda and Garrity warnings
- Training rosters or documents showing the completion of the New Jersey Division of Criminal Justice Basic Course for Investigators
- Training rosters or documents showing the completion of all investigators specialized training

**Steps taken by NJDOC and EMCF towards implementation re K. Referrals and Investigations ¶ 78:**

**8/24/25 Status Report**

The information documented in prior status reports remains accurate. Policy PCS.001.008 Prevention, Detection, Response to Sexual Assault and Harassment was finalized on 2/1/24 and revised on 11/21/2024 and continues to be followed. The policy indicates that all SID investigators undergo the New Jersey Division of Criminal Justice Basic Course for Investigators, covering essential skills for unbiased and thorough investigations. Specialized training focuses on handling sexual abuse allegations in correctional settings, including understanding proper use of *Miranda v. Arizona*, 384 U.S. 436 (1966), and *Garrity v. New Jersey*, 385 U.S. 493 (1967) laws. Topics include victim interviewing techniques, evidence collection, crime scene preservation, and compliance with PREA standards. Documentation of completed training is maintained by the NJDOC Division of Training, Recruitment, and Professional Development.

**Monitor's Finding of Compliance re K. Referrals and Investigations ¶ 78:**

**[X] Substantial Compliance**

- ☐ Partial Compliance
- ☐ Non-compliance
- ☐ N/A not required until [ date ]
- ☐ N/A monitor granted an extension until [ date ]

**Monitor's Discussion re K. Referrals and Investigations ¶ 78:**

NJDOC 001.008 Prevention, Detection and Response of Sexual Abuse and Harassment states, "All SID investigators are required to complete the New Jersey Division of Criminal Justice Basic Course for Investigators. The specialized training provides information to help ensure that investigations are done thoroughly, competently, in an unbiased objective manner and using the most modern techniques and equipment possible".

The policy also states, "SID compiles and forwards verification documents to the NJDOC Division of Training, Recruitment, and Professional Development. This division maintains records of class attendance, which can be further analyzed to create an Individual Training Summary Report, confirming that agency investigators have successfully finished the necessary specialized training for conducting sexual abuse investigations. The Individual Training Summary Report minimally details the course description, event number, start date, end date and duration of the training. External training validation is expected to be sent to the NJDOC Division of Training, Recruitment, and Professional Development within 72 hours of completing the training. For internal trainings, the submission is made within 24 hours of completing the training".

Lastly, this policy states, "The Agency PREA Coordinator and Institutional PREA Compliance Managers shall not serve as investigators for sexual abuse investigations".

This policy was revised on November 21, 2024.

Special Investigations Division Internal Management Procedures #035, "Investigation Procedures," was revised on December 21, 2023. This IMP states, "All SID Investigators will be required to complete the New Jersey Division of Criminal Justice Basic Course for Investigators as a condition of their promotion to SID. The specialized training received by members of SID ensures that such investigations are done thoroughly, competently, in an unbiased, objective manner and

using the most modern techniques and equipment possible. Any lawful technique to perform an investigation may be used. SID shall attend continuous and ongoing training in areas relevant to its work, to include continued training in gender-responsive principles.” This Special Investigations Division Internal Management Procedures #035 was finalized on December 21, 2023.

The Monitor received verification that SID investigators assigned to EMCF, including SVU investigators, received the following special training as detailed below during the last reporting period, February 25 – August 24, 2025:

Name of Course	Hosted by	Date(s) of Training	Attending Staff
Updates or Miranda Procedures	Acadia Clear Online Course	Virtual Completed on or Before 3/20/25	SVU Senior Investigators EMCF Senior Investigators EMCF Principal Investigator
AG Symposium Series: Sexual Violence	NJ Office of the Attorney General	4/25/25	SVU Senior Investigators EMCF Senior Investigators SVU Principal Investigator
Effective Victim Interviewing: Helping Victims Retrieve and Disclose Memories of Sexual Assault	End Violence Against Women International	Virtual Completed on or Before 5/14/25	SVU Senior Investigators EMCF Senior Investigators SVU Principal Investigator EMCF Principal Investigator
Laboratory Analysis of Biological Evidence and the Role of DNA	End Violence Against Women International	Virtual Completed on or Before 7/25/25	SVU Senior Investigators EMCF Senior Investigators SVU Principal Investigator EMCF Principal Investigator

Laboratory Analysis of Biological Evidence and the Role of DNA in Sexual Assault Investigation	End Violence Against Women International	Virtual Completed on or Before 7/25/25	SVU Senior Investigators EMCF Senior Investigators SVU Principal Investigator EMCF Principal Investigator
NJ Statewide SAFE Kit Tracking System Training	N.J. Office of the Attorney General	7/21 & 7/28/25	SVU Senior Investigators  Compliance Unit Principal Investigator

The Assistant Commissioner of the Special Investigation Division, the SID Principal Investigator, the SVU Principal Investigator, NJDOC's PREA Coordinator, and Edna Mahan's PREA Compliance Manager all confirmed that neither the Department-wide PREA Coordinator nor Edna Mahan's PREA Compliance Manager is responsible for conducting sexual abuse investigations.

The Assistant Commissioner of the Special Investigation Division, the SID Principal Investigator, the SVU Principal Investigator, NJDOC's PREA Coordinator, and Edna Mahan's PREA Compliance Manager all confirmed that neither the Department-wide PREA Coordinator nor Edna Mahan's PREA Compliance Manager are responsible for conducting sexual abuse investigations.

#### Recommendations re K. Referrals and Investigations ¶ 78:

No recommendations



**K. Referrals and Investigations**

¶ 79 All NJDOC or Edna Mahan investigative staff must disclose any personal relationships with Edna Mahan staff who may be the subject of a current investigation and must recuse themselves from participating in an investigation involving any Edna Mahan staff member with whom they have a personal relationship. A “personal relationship” is any relationship that interferes with the investigator’s ability assess the facts of the investigation in an objective manner, including relationships with a family member, business partner, roommate, cohabitant, or person with whom they are involved in a dating or close social relationship.

Requirements:

A “personal relationship” is any relationship that interferes with the investigator’s ability assess the facts of the investigation in an objective manner, including relationships with a family member, business partner, roommate, cohabitant, or person with whom they are involved in a dating or close social relationship.

**Monitor’s Measure of Compliance re K. Referrals and Investigations ¶ 79:**

- Special Investigations Division Internal Management Procedures #048, “Staff Reporting of Personal Relationships”
- Semi-annual report (beginning April 5, 2022, for the last quarter of 2021 and first quarter of 2022) to the DOJ and Monitor including all incidents of an investigative staff recusing themselves from an investigation due to a personal relationship with EMCF staff who may be the subject of a current investigation
- Interview with EMCF Special Investigations Principle and her staff regarding staff recusing themselves from participating in an investigation involving anyone with whom they have a personal relationship

**Steps taken by NJDOC and EMCF towards implementation re K. Referrals and Investigations ¶ 79:**

**8/24/25 Status Report**

SID IMP #048 Staff Reporting of Personal Relationships, finalized on 12/21/23 indicates that all Special Investigations Division staff are required to recuse themselves from any investigation which implicates a relationship covered by this policy, whether or not the SID staff member currently supervises, exercise authority over, or works in the same facility as the person with whom s/he has the relationship. The revised policy also includes a complete definition of personal relationships. NJDOC continues to maintain compliance in this area.

**Monitor's Finding of Compliance re K. Referrals and Investigations ¶ 79:**

**[X] Substantial Compliance**

- ☐ Partial Compliance
- ☐ Non-compliance
- ☐ N/A not required until [ date ]
- ☐ N/A monitor granted an extension until [ date ]

**Monitor's Discussion re K. Referrals and Investigations ¶ 79:**

Special Investigations Division (SID) Internal Management Procedures (IMP) #048, "Staff Reporting of Personal Relationships," was finalized on December 21, 2023. This IMP states, "All Special Investigations Division staff are required to certify to the SID Assistant Commissioner or designee whether they do, or do not, currently supervise, exercise authority over or work in the same facility with any employee of the NJDOC, or its vendors/contracted employees, who is:

- a family member
- business partner
- roommate
- cohabitant
- person with whom the SID staff member is involved in a dating relationship
- person with whom the SID staff member has a personal relationship
- person with whom the SID staff member has a relationship that would interfere with the SID staff member's ability to assess the facts of an investigation in an objective manner.

The policy goes on to state, "All Special Investigations Division staff are required to recuse themselves from any investigation which involves a person with whom the staff member has a relationship covered by this policy, whether or not the SID staff member currently supervises, exercises authority over or works in the same facility as the person with whom the staff member has the relationship."

The IMP continues by outlining the procedures that require all investigators to sign the SID Form PRC-1 annually by January 31. If SID Form PRC-1 is answered affirmatively, this is a "positive certification." The SID staff member will provide the identity of the involved person and the type of relationship. The staff member shall also complete the State of New Jersey Department of Corrections Recusal form. Lastly, suppose a SID staff member is assigned a case with someone they know. In that case, the IMP

requires that the SID staff shall also complete the Recusal form in cases where a witness, subject, or target of an investigation is a family member, business partner (as defined above as a person in a professional relationship), roommate, cohabitant, person with whom the investigator is involved in a personal relationship, or is a person with whom the SID staff member has a relationship that would interfere with the staff member's ability to assess the facts of an investigation in an objective manner.

The Monitor interviewed Assistant Commissioner Kelly Daniels, who confirmed these procedures. She stated that if an employee were assigned to investigate someone with whom they have a personal relationship, they would be entirely excluded from any participation, including access to case information, communications, or details. The Monitor also spoke with the SID Principal Investigator and the SVU Principal Investigator, both of whom confirmed Deputy Commissioner Daniels' explanation.

**Recommendations re K. Referrals and Investigations ¶ 79:**

No recommendation

**K. Referrals and Investigations**

¶ 80 The credibility of an alleged victim, suspect, or witness shall be assessed on an individual basis and shall not be determined by the person's status as prisoner or staff, consistent with 28 C.F.R § 115.71.

Requirements:

**Monitor's Measure of Compliance re K. Referrals and Investigations ¶ 80:**

- NJDOC/SID level 1 policy specifying how they rate the credibility of an alleged victim, suspect, or witness.
- Reviews of completed investigations, to include reviewing witness statements, prisoner victim(s) and alleged perpetrator(s), security staff statements.
- Interview with EMCF Special Investigations Principle and her staff to determine how they rate the credibility of an alleged victim, suspect, or witness

**Steps taken by NJDOC and EMCF towards implementation re K. Referrals and Investigations ¶ 80:**

**8/24/25 Status Report**

The information documented in prior status reports remains accurate. SID IMP #035, updated on April 30, 2025, outlines investigation procedures, and addresses the assessment of credibility, report contents, and due dates. It specifies that credibility judgments should not be based on the individual's status as either incarcerated persons or staff members but on the evidence collected, including statements, documentary evidence, and recordings. The evidence as a whole determines the outcome of an allegation, ensuring a fair and evidence-based investigation process. NJDOC continues to maintain compliance in this area.

**Monitor's Finding of Compliance re K. Referrals and Investigations ¶ 80:**

**[X] Substantial Compliance**

[ ] Partial Compliance

[ ] Non-compliance

[ ] N/A not required until [ date ]

[ ] N/A monitor granted an extension until [ date ]

**Monitor's Discussion re K. Referrals and Investigations ¶ 80:**

NJDOC 001.008 Prevention, Detection and Response of Sexual Abuse and Harassment states "SID does not rate the credibility of an alleged victim, suspect, or witness by the person's status as prisoner or staff.

The credibility of a victim, suspect, or witness is assessed on an individual basis and shall not be determined based on the status of a victim or staff member. A credibility determination should place no greater weight on one person over another. Victims, suspects, and witnesses are all equally entitled to give their testimony, and none are rejected as incredible simply based on their status. Credibility is impacted by the evidence itself. It is the evidence that refutes, corroborates, or has no impact upon a person's testimonial evidence. The evidence ultimately determines whether the allegation is unfounded, substantiated, or unsubstantiated.”

This policy was revised on November 21, 2024.

Special Investigations Division (SID) Internal Management Procedures (IMP) 035, Investigation Procedures was finalized on December 21, 2023. Page 6 now says, “The credibility of an alleged victim, suspect, or witness in any investigation undertaken by SID shall not be determined by the person’s status as an incarcerated person or staff member. Credibility is impacted by the evidence itself, including statements by the alleged victim and suspect, witness statements, documentary evidence, and recorded evidence, such as surveillance video, Body Worn Camera video and telephonic recordings. The overall evidence determines whether an allegation is substantiated, unsubstantiated or unfounded and whether probable cause exists that a criminal offense has been committed.

Additionally, Special Investigations Division (SID) Internal Management Procedures (IMP) #014, “Procedures for Sexual Abuse, PREA Retaliation and Sexual Harassment” states, “The credibility of an alleged victim, suspect, or witness shall not be determined by the person’s status as an incarcerated person or staff member. Credibility is impacted by the evidence itself, to include statements by the alleged victim, witness statements, documentary evidence, and recorded evidence, such as surveillance video, Body Worn Camera video and telephonic recordings.” This IMP was finalized on December 21, 2023.

The Monitor and the DOJ reviewed all investigative reports generated during this reporting period. They also had access to all interviews and statements from the alleged victim, the staff member under investigation, and all relevant witnesses. The investigative decisions appeared to be based on the evidence available—such as statements, video footage, records, reports, and documented facts—rather than the individual’s status as either a staff member or an incarcerated person.

#### **Recommendations re K. Referrals and Investigations ¶ 80:**

No recommendation

#### **K. Referrals and Investigations**

¶ 81 Within 90 days after an allegation of sexual abuse or sexual harassment is referred for investigation, NJDOC or Edna Mahan shall issue a written investigative report that indicates whether the allegation is substantiated, unsubstantiated, or unfounded. If the matter is referred to prosecutorial review, this 90-day period shall begin to run the day after NJDOC receives the prosecutor's decision as to whether the allegation is criminal or administrative (and therefore will be investigated solely by NJDOC or Edna Mahan). The investigator may request in writing, approved by the facility designee, an extension for cause that identifies the remaining actions necessary to complete the investigation. In no case shall the investigation be deemed to be unfounded solely due to the expiration of the 90 days. The investigative report shall include an effort to determine whether staff actions or failures to act contributed to the abuse, a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings.

Requirements:

If the matter is referred to prosecutorial review, this 90-day period shall begin to run the day after NJDOC receives the prosecutor's decision as to whether the allegation is criminal or administrative (and therefore will be investigated solely by NJDOC or Edna Mahan).

The investigative report shall include an effort to determine whether staff actions or failures to act contributed to the abuse, a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings.

#### **Monitor's Measure of Compliance re K. Referrals and Investigations ¶ 81:**

- Spreadsheet documenting all allegations of sexual abuse, sexual harassment, retaliation for reporting, and/or staff neglect or violation of responsibilities that may have contributed to these incidents. The spreadsheet should identify:
  - The date of notification of the allegation
  - The date the case was referred to prosecutor's review
  - If the case is criminal or administrative
  - If the case was returned to NJDOC, the date returned
  - If an extension was requested, and if so, the date of the request, and the reason for the extension
  - The date of the completed investigation
  - The finding if the allegation was determined to be unfounded, unsubstantiated, or substantiated.
  - The date the Sexual Assault Advisory Council (SAAC) was held

- Copies of a Sexual Assault Investigation Disposition form for each allegation sent to the DOJ and Monitor
- A quarterly report (beginning January 5, 2022 for the last quarter of 2021) submitted to the DOJ and Monitor of the status of all the “open” EMCF investigations, along with the spreadsheet noted above
- Interview with NJDOC Deputy Chief Investigator

**Steps taken by NJDOC and EMCF towards implementation re K. Referrals and Investigations ¶ 81:**

**8/24/25 Status Report**

The information documented in prior status reports remains accurate. SID IMP #035 Investigation Procedures, updated on 4/30/2025, incorporates information about the contents and due dates of an investigative report and is followed.

**Monitor’s Finding of Compliance re K. Referrals and Investigations ¶ 81:**

**[X] Substantial Compliance**

☐ Partial Compliance

☐ Non-compliance

☐ N/A not required until [ date ]

☐ N/A monitor granted an extension until [ date ]

**Monitor’s Discussion re K. Referrals and Investigations ¶ 81:**

Special Investigations Division (SID) Internal Management Procedures (IMP) #035, Investigation Procedures was revised on December 21, 2023. It states, “Currently there is a federal monitor reviewing sexual abuse, sexual harassment and retaliation claims that occur at EMCF pursuant to a Consent Decree settlement agreement reached between the State of New Jersey and the United States (Docket No. 3:21-cv-15031-ZNQ-TJB). While EMCF is under Consent Decree monitoring, SID shall investigate and will issue a written investigation report within 90 days after an allegation of sexual abuse or sexual harassment or retaliation is raised for all EMCF investigations.

- i. If the matter is referred for prosecutorial review, this 90-day period shall begin to run the day after NJDOC receives the prosecutor’s decision remanding the matter as an administrative investigation.

- ii. The investigator may request in writing an extension of the 90-day period for cause that identifies the remaining actions necessary to complete the investigation. This extension request shall be submitted to the Assistant Commissioner of Women's Services or designee.
- iii. In no case shall the investigation be closed solely due to the expiration of the 90 days.

NJDOC and Edna Mahan staff maintain, and have submitted a copy, to DOJ and the Monitor, a spreadsheet documenting all allegations of sexual abuse, sexual harassment, retaliation for reporting, and/or staff neglect or violation of responsibilities that may have contributed to these incidents. This spreadsheet identifies:

- The date of notification of the allegation
- The date the case was referred to prosecutor's review
- If the case is criminal or administrative
- If the case was returned to NJDOC, the date returned
- If an extension was requested, and if so, the date of the request, and the reason for the extension
- The date of the completed investigation.
- Whether the allegation is substantiated, unsubstantiated, or unfounded

Additionally, copies of the Sexual Assault Investigation Disposition form for each investigated allegation have been sent to the DOJ and Monitor. During this reporting period (February 25 – August 24, 2025), EMCF had 10 allegations of staff sexual abuse or sexual harassment of incarcerated persons. Six (6) open cases are still pending Prosecutor's Office review, and SID/SVU investigated four (4) cases.

The Monitor has examined all investigative reports produced during this reporting period. Each report contains a statement on whether staff actions or failure to act played a role in the abuse, a summary of physical and testimonial evidence, an explanation of credibility determinations, and the investigative facts and findings.

#### **Recommendations re K. Referrals and Investigations ¶ 81:**

No recommendation



**K. Referrals and Investigations**

¶ 82. NJDOC shall ensure that an investigative summary sheet that provides an overview of the current status of an investigation is included in the investigative file. The summary information should include, among other things, basic information such as staff name(s), prisoner names(s), location of incident, type of allegation, and the date and time of day of the incident.

Requirements:

**Monitor's Measure of Compliance re K. Referrals and Investigations ¶ 82:**

- Copies of investigative summary sheets sent to the DOJ and Monitor. Investigative summary sheets include:
  - Staff name(s)
  - Prisoner Name(s)
  - Location of incident
  - Type of allegation
  - Date and time of day of the incident
  - Other information, as needed
- Interview with NJDOC Deputy Chief Investigator regarding completing the investigative summary sheet/closure report
- Interview with EMCF Special Investigations Principle and her staff regarding completing the investigative summary sheet/closure report
- Interview with EMCF PREA Compliance Manager regarding the investigative summary sheet/closure report

**Steps taken by NJDOC and EMCF towards implementation K. Referrals and Investigations ¶ 82:**

**8/24/25 Status Report**

The information documented in previous status reports remains accurate. SID IMP #035 Investigation Procedures, updated on 4/30/2025, indicates that "An Investigative summary sheet that provides an overview of the current status of an investigation must be included in the investigative file. The summary information should include, among other things, basic information such as the names of staff, the names of incarcerated persons, the type of allegation and the location, date and time of the incident." Pursuant to this policy, an investigative summary sheet is currently kept on all cases investigated by SID containing all of the referenced requirements in this section.

**Monitor's Finding of Compliance re K. Referrals and Investigations ¶ 82:**

**[X] Substantial Compliance**

- [ ] Partial Compliance
- [ ] Non-compliance
- [ ] N/A not required until [ date ]
- [ ] N/A monitor granted an extension until [ date ]

**Monitor's Discussion re K. Referrals and Investigations ¶ 82:**

Special Investigations Division (SID) Internal Management Procedures (IMP) 035, Investigation Procedures, was revised on December 21, 2023. The IMP states, "An investigative summary sheet that provides an overview of the current status of an investigation must be included in the investigative file. The summary information should include, among other things, basic information such as the names of staff, the names of incarcerated persons, the type of allegation and the location, date and time of the incident. This IMP was finalized on December 21, 2023.

The Special Investigations Division of the NJDOC revised the investigative summary sheet and has been using this revised form since March 2022. This investigative summary sheet provides an overview of the current status of an investigation and is included in the investigative file. The summary information also includes basic details such as staff name(s), IP address (es), location of the incident, type of allegation, and the date and time of the incident.

**Recommendations re K. Referrals and Investigations ¶ 82:**

No recommendation

**K. Referrals and Investigations**

- ¶ 83. A review team, including upper-level management officials at Edna Mahan, with input from line supervisors, investigators, and medical and mental health practitioners, shall conduct an incident review within 30 days of the conclusion of every investigation of substantiated and unsubstantiated allegations of sexual abuse by staff. The review team shall:
- Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse by staff;
  - Examine the area in Edna Mahan where the incident allegedly occurred to assess whether physical barriers in the area may prevent detection of sexual abuse;
  - Assess the adequacy of staffing levels in that area during different shifts;
  - Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; and
  - Prepare a report of its findings and any recommendations for improvement and submit such report to the Department-wide PREA Coordinator, and Edna Mahan's PREA Compliance Manager.

**Requirements:**

- ¶ 85 Edna Mahan's Administrator should have access to investigative files once they are complete, as well as the personnel files of involved employees, and regular briefings of PREA investigations that include sufficient details so that the facility Administrator and/or the incident review team has sufficient information to assess the incident and devise and implement any necessary movement, discipline, or corrective action.

**Monitor's Measure of Compliance re K. Referrals and Investigations ¶ 83:**

- NJDOC Policy Statement Number 001.008 "Prevention, Detection and Response of Sexual Abuse and Harassment" specific to criminal and administrative agency investigations.
- NJDOC PCS. 001.PREA .001 Sexual Assault/PREA Advisory
- EMCF's Level 3 policy on Sexual Assault/PREA Advisory
- Copies of the Sexual Assault Investigation Disposition form for all EMCF's cases
- A review of Folder 115.73 on the DOCNet I-drive during the on-site visit
- Copies of EMCF's Sexual Assault Advisory Council (SAAC) monthly agenda and meeting minutes
- Copies of all report of EMCF's Sexual Assault Advisory Council findings and recommendations for improvement sent to NJDOC PREA Coordinator and Edna Mahan's PREA Compliance Manager
- Interview with EMCF PREA Compliance Manager regarding EMCF's Sexual Assault Advisory Council (SAAC)
- Interview with EMCF Administrator regarding EMCF's Sexual Assault Advisory Council (SAAC)
- Interview at least two of the members who sit on the EMCF's Sexual Assault Advisory Council (SAAC)

**Steps taken by NJDOC and EMCF towards implementation re K. Referrals and Investigations ¶ 83:**

**8/24/25 Status Report**

The information documented in previous status reports remains accurate. NJDOC policy PCS.001.008 outlines the responsibilities of the Sexual Abuse Advisory Council (SAAC), emphasizing its key role in reviewing closed cases of sexual abuse and harassment. The SAAC operates at both the facility and departmental levels, and evaluates these cases to suggest improvements in prevention, detection, and response mechanisms. This process evaluates potential policy or procedural changes, understanding the motivations behind incidents, examining environmental factors, and assessing staffing and technological needs. The aim is to recommend actionable changes, issuing Corrective Action Reports when needed, and to oversee the adoption of these recommendations to ensure ongoing enhancements in the NJDOC's approach to managing sexual abuse and harassment. SAAC reports are provided monthly to the Federal Monitor. A formal follow-up process, through which Administration reports back to the SAAC regarding implementation of recommendations, was implemented during this reporting period.

The Division of Women's Services, in collaboration with subject matter experts, The Moss Group, initiated a formal review of Policy PREA.001, titled, "Sexual Abuse Advisory Council (SAAC)." The intent of the review is to analyze the current process of a sexual abuse incident review, inclusive of both the facility-level and Central Office-level review, to ensure the NJDOC is conducting a thorough quality assurance review of identified needs. These needs may be inclusive of policy creation/revisions, procurement of additional equipment, staff training, and staff corrective action/discipline.

In an effort to maintain confidentiality, language was previously added to the EMCF Facility PREA Review Team Cover Letter reminding involved staff of their role in maintaining such. The statement reads, "The reports in discussion reviewed within this meeting are required under PREA Standard 115.86. This information is confidential and a breach of confidentiality is a violation which is subject to disciplinary action."

**Monitor's Finding of Compliance re K. Referrals and Investigations ¶ 83:**

**[X] Substantial Compliance**

- ☐ Partial Compliance
- ☐ Non-compliance
- ☐ N/A not required until [ date ]
- ☐ N/A monitor granted an extension until [ date ]

**Monitor's Discussion re K. Referrals and Investigations ¶ 83:**

NJDOC 001.008 Prevention, Detection and Response of Sexual Abuse and Harassment states, "NJDOC has established multi-disciplinary Sexual Assault Advisory Councils (SAAC) which convenes at both the correctional facility and Departmental level. The SAAC's review all allegations and instances of sexual abuse/sexual harassment with the purpose of assessing and improving PREA prevention, detection and response. The purpose, composition and duties of the Sexual Assault Advisory Council (SAAC) are contained in the Internal Management Procedure PCS.001.PREA.001 Sexual Assault/PREA Advisory Council.

Facility incident reviews shall convene within thirty (30) days of the conclusion of the investigation. SID shall present the completed investigation case for review at the SAAC meeting. These reviews are done for all allegations of sexual abuse and/or sexual harassment as defined by PREA.

The review team shall:

- (1) Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse;
- (2) Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility;
- (3) Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse;
- (4) Assess the adequacy of staffing levels in that area during different shifts;
- (5) Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; and
- (6) Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to paragraphs (d)(1)-(d)(5) of this section, and any recommendations for improvement and submit such report to the facility head and PREA compliance manager.

Each PREA allegation case review completed by the SAAC considers all factors listed above in section (d) of this subsection.

The SAAC may issue Corrective Action Reports, if necessary, and will monitor the implementation of recommended corrective actions. Recommendations for improvement shall be implemented, or reasons for not doing so shall be documented in the Corrective Action Reports."

This policy was revised on November 21, 2024.

PCS.001. PREA 001 “Sexual Assault/Prison Rape Elimination Act (PREA) Advisory Council is in the process of revision. However, it currently states, “Facility incident reviews shall convene within thirty (30) days of the conclusion of the investigation. SID shall present the completed investigation case for review at the SAAC meeting. These reviews are done for all allegations of sexual abuse and/or sexual harassment as defined by PREA.”

The Monitor and DOJ received copies of all Sexual Assault Advisory Council (SAAC) meeting minutes from EMCF, along with the Incident Reviews completed during this reporting period. For each case, the SAAC evaluated whether the allegation or investigation suggested a need to adjust policy or practice to strengthen the prevention, detection, or response to staff sexual abuse. The Council also reviewed the location of each alleged incident to determine whether physical barriers might limit visibility and detection, assessed staffing levels across different shifts, and considered implementing additional monitoring technology to enhance supervision. A summary of findings and any recommendations was provided to both the Department-wide PREA Coordinator and Edna Mahan’s PREA Compliance Manager. Over the course of this reporting period, the SAAC issued thirteen (13) recommendations for action.

The Monitor interviewed four members of the Edna Mahan Sexual Assault Advisory Council: the PREA Compliance Manager, a Mental Health Representative, a Health Care Representative, and the Principal Investigator from the Special Investigations Unit, to discuss the Council’s process. All confirmed that the PREA Compliance Manager convenes and chairs the SAAC. They further reported that meetings are held monthly and always occur within thirty (30) days following the conclusion of an investigation.

Before each SAAC meeting, members are provided with copies of all investigations scheduled for review, giving them adequate time for careful evaluation. During the meeting, the Principal Investigator from the Special Investigations Division or the Special Victims Unit presents each completed case for discussion, allowing members to ask questions and request additional details as needed. The IPCM then prepares a report summarizing the SAAC’s findings and recommendations, which is submitted to the Department-wide PREA Coordinator for review. This report is subsequently reviewed and formally approved by the NJDOC Agency SAAC. Members confirmed that they receive copies of all recommendations and are notified once implementation is complete. The Monitor has noted significant improvements in both the structure and effectiveness of the SAAC over the past three years.

#### **Recommendations re K. Referrals and Investigations ¶ 83:**

Continue to meet to conduct incident reviews.

## **K. Referrals and Investigations**

¶ 84. NJDOC and Edna Mahan shall review the review team's recommendations for improvement and shall implement them or document their reasons for not doing so.

Requirements:

### **Monitor's Measure of Compliance re K. Referrals and Investigations ¶ 84:**

- NJDOC Policy Statement Number 001.008 "Prevention, Detection and Response of Sexual Abuse and Harassment" specific to criminal and administrative agency investigations
- NJDOC PCS. 001.PREA .001 Sexual Assault/PREA Advisory
- EMCF's Level 3 policy on Sexual Assault/PREA Advisory
- Copies of all report of EMCF's Sexual Assault Advisory Council findings and recommendations for improvement
- Copies of all Corrective Action Reports developed by EMCF's Sexual Assault Advisory Council (SAAC)
- Copies of all completed EMCF's Corrective Action Reports as referenced above
- Copies of ANY subsequent actions that are recommended by the EMCF SAAC, to include, but not be limited to, memos, emails, new level 3 policies, procedures, Post Orders, etc.
- Copies of all Corrective Action Reports developed by NJDOC's Agency Sexual Assault Advisory Council (SAAC)
- Copies of all completed NJDOC's Corrective Action Reports as referenced above
- Copies of ANY subsequent actions that are recommended by the NJDOC's SAAC, to include, but not be limited to, memos, emails, new level 1 policies, procedures, directives, etc.
- All documents from EMCF or NJDOC's SAAC that describe "why" recommended actions were not taken
- Interview with EMCF PREA Compliance Manager regarding the Review Team's recommendations for improvement
- Interview with EMCF Administrator regarding the Review Team's recommendations for improvement
- Interview with NJDOC Deputy Chief Investigator regarding reviewing EMCF's Review Team's recommendations for improvement

### **Steps taken by NJDOC and EMCF towards implementation re K. Referrals and Investigations ¶ 84:**

#### **8/24/25 Status Report**

The information documented in prior status reports remains accurate. EMCF's Sexual Assault Advisory Committee (SAAC) documents corrective action recommendations on a form used during post-incident reviews. These suggestions are tracked by the Institutional PREA Compliance Manager (IPCM) on a spreadsheet and forwarded to the PREA Compliance Unit (PCU) at the Central Office Headquarters (COHQ) for further review. The COHQ SAAC evaluates these recommendations, making final determinations or requesting additional actions. The PCU maintains oversight of progress through periodic updates requested from the IPCM, ensuring that the recommended actions are implemented.

The EMCF IPCM continues to share the spreadsheet containing the suggestions with the EMCF Administrator, Associate Administrator, and all SAAC members.

The Division of Women's Services, in collaboration with subject matter experts, The Moss Group, initiated a formal review of Policy PREA.001, titled, "Sexual Abuse Advisory Council (SAAC)." The intent of the review is to analyze the current process of a sexual abuse incident review, inclusive of both the facility-level and Central Office-level review, to ensure the NJDOC is conducting a thorough quality assurance review of identified needs. These needs may be inclusive of policy creation/revisions, procurement of additional equipment, staff training, and staff corrective action/discipline.

The EMCF IPCM continues to share the spreadsheet containing the suggestions with the EMCF Administrator, Associate Administrator, all SAAC members.

**Monitor's Finding of Compliance re K. Referrals and Investigations ¶ 84:**

**[X] Substantial Compliance**

[ ] Partial Compliance

[ ] Non-compliance

[ ] N/A not required until [ date ]

[ ] N/A monitor granted an extension until [ date ]

**Monitor's Discussion re K. Referrals and Investigations ¶ 84:**

NJDOC 001.008 Prevention, Detection and Response of Sexual Abuse and Harassment states, "NJDOC has established multi-disciplinary Sexual Assault Advisory Councils (SAAC) which convenes at both the correctional facility and Departmental level. The SAAC's review all allegations and instances of sexual abuse/sexual harassment with the purpose of assessing and improving PREA prevention, detection, and response. The purpose, composition and duties of the Sexual Assault Advisory Council (SAAC) are contained in the Internal Management Procedure PCS.001.PREA.001 Sexual Assault/PREA Advisory Council.

Facility incident reviews shall convene within thirty (30) days of the conclusion of the investigation. SID shall present the completed investigation case for review at the SAAC meeting. These reviews are done for all allegations of sexual abuse and/or sexual harassment as defined by PREA.



The SAAC may issue Corrective Action Reports, if necessary, and will monitor the implementation of recommended corrective actions. Recommendations for improvement shall be implemented or reasons for not doing so shall be documented on the Corrective Action Reports.

This policy was revised on November 21, 2024.

As noted previously, during this past reporting period, the SAAC made thirteen (13) recommendations for action. The Monitor and DOJ received a copy of a spreadsheet maintained by the Chair of the SAAC, the Institutional PREA Compliance Manager. This spreadsheet records the day of the SAAC review, the concerns/recommendations made by the SAAC, the suggested action steps, and the outcome of these action steps. This spreadsheet is available on a shared drive for all members of the EMCF administration and is shared with all SAAC members.

**Recommendations re K. Referrals and Investigations ¶ 84:**

EMCF's administrative team continues to review SAAC's recommendations for improvement and shall implement them or document their reasons for not doing so.

**M. Limited English Proficient (LEP) Prisoners**

¶ 90. With respect to implementing the terms of this Agreement, NJDOC and Edna Mahan shall ensure that all LEP prisoners at Edna Mahan have access to interpretation and translation services as required by Title VI of the Civil Rights Act.

Requirements:

**Monitor's Measure of Compliance re M. Limited English Proficient (LEP) Prisoners ¶ 90:**

- NJDOC policy statement SUP.004.001 Limited English Proficient (LEP) Language Assistance
  - Level 3 policy requiring that all LEP prisoners at Edna Mahan have access to interpretation and translation services, as required by Title VI of the Civil Rights Act
  - Documentation of ALL methods created to provide access for LEP prisoners to interpretation and translation services, as required by Title VI of the Civil Rights Act
  - Any memos, written directives from the Commissioner, Deputy Commissioner and/or Administrator that addresses procedures, and practices to ensure all prisoners at Edna Mahan have access to interpretation and translation services as required by Title VI of the Civil Rights Act.
  - Details of the usage of any LEP prisoners to access interpretation services -records, logs, phone call use, etc.
  - Interview with at least two LEP identified prisoners
  - Review of any grievances submitted regarding any requirements of the provision
  - Interview with Edna Mahan Administrator specific to interpretation and translation services for LEP prisoners
  - Interview with Edna Mahan EDNA PREA Compliance Manager specific to interpretation and translation services for LEP prisoners
- ¶ 52 - A semi-annual report (beginning on April 5, 2022, for the last quarter of 2021 and first quarter of 2022) from EMCF PREA Compliance Manager to the DOJ and Monitor, identifying the names of prisoners who received the prisoner orientation education in a different format. The report should identify the names of the prisoners and the alternate source of how the information was provided.

**Steps taken by NJDOC and EMCF towards implementation re M. Limited English Proficient (LEP) Prisoners ¶ 90:**

**8/24/25 Status Report**

NJDOC continues to take steps to ensure effective communication with all incarcerated individuals, as mandated by Title VI of the Civil Rights Act of 1964. This includes the creation of multiple systems and processes to increase and improve communication between English-speaking staff and IPs with limited English proficiency (LEP). LEP Coordinator Associate Administrator Tiffany Thompson, in collaboration with Women's Services and EMCF staff, continues to make improvements to LEP services for the EMCF incarcerated individuals, as well as maintain and audit them. Ms. Thompson held multiple meetings with EMCF LEP IPs, utilizing the Language Line, to inquire about their general well-being

and experiences communicating with staff throughout the facility. These meetings served as opportunities for information sharing and problem-solving with the LEP population.

Ms. Thompson began training Assistant Superintendent Maureen Hayes to take over the LEP Coordinator role in the next reporting period. Ms. Hayes accompanied Ms. Thompson during meetings with LEP IPs and was introduced to the numerous systems in place to meet the communication needs of the EMCF LEP population.

All forms available to the incarcerated population remain available in English, Spanish, Mandarin and Haitian Creole. A tracking report is maintained for each identified LEP IP containing information regarding document translation requests and outcomes; disciplinary charges and hearings; meetings with the LEP Coordinator and other EMCF staff; JPAY correspondence translations; and requests and outcomes for specialty items. LEP IPs continue to be required to acknowledge their acceptance/declination of usage of Language Line services, via a signed paper receipt.

SID continues to ensure that interpretation services are offered to all IPs designated as LEP and acceptance/declines are documented. This service is inclusive of the SID hotline. This reporting period, SID updated its IMP # 50, which governs to IP SID hotline, to explicitly identify LEP IPs. This policy now requires SID to memorialize in a logbook whether an IP who contacted the hotline is identified as LEP, whether the IP was offered interpretation services, and whether that service was accepted or declined. SID also updated its investigative report checklist to state that all LEP IPs must be offered interpretation services through the Department of Corrections' interpretation vendor and that all refusals for that service must be documented in the SID investigation report.

LEP status stickers continue to be affixed to the identification cards of LEP incarcerated persons, which they carry at all times. Additionally, LEP incarcerated persons continue to be provided with "quick translation cards" to attach to their IDs or carry with them. These cards feature simple phrases in both English and the individual's preferred language, allowing them to point to the appropriate phrase to communicate emergent or non-emergent issues. Women's Services staff met with all twenty-three (23) identified LEP IPs, utilizing the Language Line, during the reporting period to ensure each individual maintained a quick translation card and understood how to utilize the tool. Additionally, staff toured the facility and met with members of custody staff to ensure their comprehension of the purpose of the quick translation cards and review LEP policy standards.

Medical and Mental Health staff receive alerts in the Electronic Monitoring Record (EMR) when an LEP incarcerated person is under their care. These staff members can document the offering of interpretation services through the Language Line and record the outcome within

the EMR. Additionally, EMCF Medical staff continue to offer pre-test and post-visit consultations through the Language Line to enhance accessibility for LEP incarcerated persons.

Court Line procedures include translated Disciplinary Hearing forms (English to Spanish, Mandarin, and Haitian Creole), used in conjunction with the Language Line during any disciplinary hearing involving an LEP incarcerated individual. All identified LEP individuals are offered Language Line services throughout the disciplinary process, with documentation in iTag (inmate management system) and via a signed paper receipt created during this reporting period. The relevant Level 3 policies, IMP#144 and IMP#144A, have been updated accordingly.

EMCF Administration established “EMCF Community Connect,” a bi-annual voluntary orientation refresher session aimed to educate the IP population on new policies and rules. Administration also uses this opportunity to review existing policies and rules, inclusive of LEP procedures, with the IP population.

EMCF staff from Programs and Support Services, Education, and Chaplaincy Services continue to meet with the Mandarin and Creole speaking incarcerated individuals on a weekly basis utilizing Linguistica Services to assist in identifying urgent areas of need.

**Monitor’s Finding of Compliance re M. Limited English Proficient (LEP) Prisoners ¶ 90:**

**☒ Substantial Compliance**

- ☐ Partial Compliance
- ☐ Non-compliance
- ☐ N/A not required until [ date ]
- ☐ N/A monitor granted an extension until [ date ]

**Monitor’s Discussion re M. Limited English Proficient (LEP) Prisoners ¶ 90:**

NJDOC has several policies specific to Limited English Proficient (LEP) Language Assistance: Use of Language line. Those include: SUP.004.001, Limited English Proficient (LEP) Language Assistance: Use of Language Line (last revised September 10, 2018); PCS.008.LEP.01, Internal Management Procedure, Division of Programs and Community Services, Office of Transitional Services (last revised October 22, 2018); PCS.004.LEP.OSAPAS.01, Office of Substance Abuse Programming & Addiction Services Level I + III, Internal Management Procedures (last revised December 2020); SUP.003.LEP.01, Office Education Services Level I, Internal Management Procedures (last revised October 22 2018); PCS.001.LEP.01 Office of Community Programs And Outreach Services Level I Internal Management Procedures (last revised November 1, 2018).

Each of these policies has the following policy statement:

“In accordance with Title VI of the Civil Rights Act of 1964 and its implementing regulations, it is the policy of the NJDOC to take reasonable steps to provide meaningful access to non-English speakers and limited English proficient (LEP) individuals incarcerated, detained, or otherwise encountering NJDOC correctional facilities, programs, and activities. These steps help to ensure that language shall not prevent staff from communicating effectively with LEP inmates, detainees, and others to ensure safe and orderly operations, and that limited English proficiency shall not prevent inmates, detainees, or others from accessing important programs and information; understanding rules; participating in proceedings; or gaining eligibility for parole, probation, treatment programs, alternatives to revocation, or favorable classifications. The DOC shall utilize various internal and external sources to provide oral and written language assistance services to communicate with LEP inmates in the areas of programming, safety, medical and quasi-legal proceedings. These sources include but are not limited to, the language line services and appropriate staff.”

It is also NJDOC policy to ensure that no inmate is retaliated against for requesting language assistance services or participating in any other conduct protected under Title VI.

Except in emergency circumstances, other inmates shall not be utilized to provide interpretation for LEP inmates with significant matters that include psychological, medical and safety. An exception may be made for trained counsel substitutes in disciplinary proceedings”.

The DOC shall utilize various internal and external sources to provide oral and written language assistance services to communicate with LEP incarcerated persons in the areas of programming, safety, medical and quasi-legal proceedings. These sources include, but are not limited to, the Language Line and appropriate staff.

Both Edna Mahan Correctional Facility for Women Level 3 Internal Management Procedures #144, and #144A titled, “Limited English Proficiency (LEP) Language Assistance: Bilingual Staff and use of the Language Line,” states, “[I]n accordance with Title VI of the Civil Rights Act of 1964 and its implementing regulations, it is the policy of the NJDOC and Edna Mahan Correctional Facility, to take reasonable steps to provide meaningful access to non-English speakers and limited English proficient (LEP) individuals incarcerated, detained, or otherwise encountering NJDOC correctional facilities, programs, and activities. These steps help to ensure that language shall not prevent staff from communicating effectively with LEP incarcerated persons , detainees, and others to ensure safe and orderly operations, and that limited English proficiency shall not prevent incarcerated persons , detainees, or others from accessing important programs and information; understanding rules; participating in proceedings; or gaining eligibility for parole, probation, treatment programs, alternatives to revocation, or favorable classifications.

Both IMP #144 and IMP #144A guide procedures specific to how an incarcerated person with Limited English Proficiency (LEP) is identified, that a weekly “LEP Roster” will be issued to all departments, where the phones with access to the language line are located, how to use (and document the use of) the language line, how to use (and document the use of) translation services, what certified bilingual staff can communicate with the IP about, what a non-certified bilingual staff can communicate with the IP about, and the disciplinary process. Both IMPs were updated on July 24, 2024.

Both IMPs are highly similar. IMP #144 focuses on custody, while IMP #144A is accessible to all staff but is tailored explicitly for civilian staff. The primary difference is that IMP #144A provides more detailed explanations of New Admission Intake, LEP Designation, and LEP Roster procedures, as these fall under civilian responsibilities. IMP #144 focuses more thoroughly on the weekly audits of the hurricane book, which is a custody requirement.

Over the past four reporting periods, NJDOC and EMCF have taken substantial steps to ensure that all incarcerated individuals with limited English proficiency (LEP) have access to interpretation and translation services in matters related to the Settlement Agreement.

To aid in identification, LEP individuals are marked with a green sticker on their ID tag, door tag, and “face sheet.” Medical staff have also implemented an alert system within electronic medical records to flag LEP status. In addition, a policy requires that any patient identified as LEP be automatically offered access to the language line. To maintain consistency, a weekly list of all identified LEP individuals is distributed to supervisors, including those in medical and mental health departments.

All forms specific to incarcerated individuals are now available in English, Spanish, Mandarin, and Haitian Creole. Each LEP individual has been provided with a “request for interpretation” card, which displays simple phrases in both English and the person’s preferred language, enabling them to point to the appropriate phrase to communicate emergent or non-emergent issues. The card also allows individuals to request the use of the language line at any time. Additionally, all LEP individuals have received dictionaries in their primary language with English translations of key words. To further support participation, two part-time interpreters—one Spanish-speaking and one Mandarin-speaking—have been hired to assist LEP individuals in group didactic sessions as well as academic and Career Technical Education (CTE) programs.

EMCF staff from Programs and Support Services, Education, and Chaplaincy Services continue to meet weekly with Mandarin- and Creole-speaking incarcerated individuals, using the Language Line to identify urgent needs. Unfortunately, during this reporting period, the only bilingual Spanish-speaking NJDOC employee left EMCF. As a result, Ms. Thompson, EMCF’s LEP coordinator, was unable to conduct focus

groups with Spanish-speaking LEP individuals. However, she and Associate Superintendent Hayes have met individually with each LEP using the Language Line.

The Division of Program and Reintegration Services (DPRS) continues to make dedicated efforts to ensure that LEP incarcerated persons at EMCF have the opportunity to attend, understand, and actively participate in a variety of programs, including cognitive-behavioral, psychoeducational, psychotherapeutic, and volunteer initiatives. Below is a status report on the action plan developed and implemented by DPRS to support these efforts:

- A temporary Mandarin-speaking staff member was hired at EMCF for two days per week, six hours per day.
- A temporary Spanish-speaking staff member was hired at EMCF for two days per week, six hours per day.
- A Spanish-speaking interpreter, with experience as an immigration paralegal and business owner, was hired for two days per week, six hours per day.
- A request was submitted to a temp agency to hire a Haitian-Creole translator; resumes were received, interviews conducted, and a facility tour scheduled. A job offer will depend on the outcome of the tour.
- DPRS continues to work with the New Jersey Office of Human Resources to hire an ESL teacher for EMCF.
- Educational smart boards with Google Translate integration were introduced in classrooms. Technical difficulties remain due to internet limitations in the older buildings, but DPRS is exploring creative solutions.
- All NCCER Core Construction subject textbooks are now available in Spanish.
- A Spanish-speaking incarcerated person with a bachelor's degree was hired as a Teacher's Assistant for Spanish-speaking students.
- A contracted interpreter supported five Spanish-speaking participants in the Road to Recovery and Anger Management programs.
- A contracted interpreter assisted one Mandarin-speaking participant in the STARS (reentry preparedness) and HOPE (parenting) programs.
- Three Spanish-speaking participants were supported with staff interpretation during Releasing Trauma and Embracing Faith (RTEF) group sessions.
- Two Spanish-speaking participants attended Focus on the Victim (FOV) sessions without staff interpretation.
- Two Spanish-speaking participants attended Houses of Healing (HOH) sessions without staff interpretation.
- Three Spanish-speaking participants attended Heal and Empower Those Overcoming Abuse and Rape Trauma (HEART) sessions without staff interpretation.
- Contracted Mandarin interpreters continue to provide language assistance to the Mandarin-speaking participant.

- Language line check-in calls are offered twice weekly to the Haitian-Creole-speaking participant.
- Three Spanish-speaking participants made a total of six international calls to family members during this reporting period.
- A new full-time Spanish-speaking chaplain began working at EMCF.
- Spanish-speaking participants can now take the GED test in Spanish.

The Monitor and her Associate spoke with custody line staff, who understood that they must contact a supervisor whenever they need to use the Language Line to communicate with an LEP individual. Custody supervisors were also familiar with the Language Line and its proper use; most had used it successfully in the past and expressed confidence in doing so. Additionally, staff recognized that if they spoke the LEP individual's native language—primarily Spanish—they could provide simple directions or answer basic questions but were not permitted to discuss critical areas such as discipline, classification, medical, or mental health matters.

The Monitor and her Associate also spoke with fourteen incarcerated individuals with Limited English Proficiency (LEP). When asked how they communicate with staff to meet their needs, most reported that Spanish-speaking staff assist them with “everyday matters,” such as informing them of appointments, answering questions about activity times, or fulfilling simple requests. Some individuals noted that they rely on friends who speak Spanish for additional assistance. The LEP individual who speaks Mandarin has made significant progress in English and is now able to communicate basic needs directly to custody staff. All LEP individuals acknowledged their right to be free from all forms of sexual abuse and harassment, and all demonstrated knowledge of how to report allegations of sexual abuse, sexual harassment, or retaliation, providing examples of the reporting methods available to them.

In the previous monitoring report, the Monitor highlighted the critical distinction between an LEP individual requesting another LEP individual to interpret and custody staff soliciting another incarcerated person to serve as an interpreter. The Monitor observed significant improvements in this area. When asked, both staff and incarcerated individuals understood that the decision to use an interpreter should always rest with the LEP individual. It is important to note that although an LEP incarcerated person can request that another incarcerated person interpret basic information and requests, incarcerated persons do not serve as interpreters in relation to medical, disciplinary, investigative, or other sensitive or complex matters.

NJDOC and Edna Mahan have made substantial progress in ensuring that all LEP incarcerated individuals have access to interpretation and translation services, in accordance with Title VI of the Civil Rights Act and the Settlement Agreement. Policies and procedures are now firmly in place, establishing an effective system for identifying and communicating with LEP individuals. The Language Line is routinely offered and used in critical areas, including discipline, classification, orientation, PREA reporting, investigations, and medical and mental health services. Additionally, all LEP individuals interviewed by the Monitor were aware of their right to access the Language Line and now



have cards they can present to staff whenever interpretation services are needed. As one long-term LEP individual at EMCF observed, “Communication has improved dramatically compared to the past.”

**Recommendations re M. Limited English Proficient (LEP) Prisoners ¶ 90:**

Continue to ensure that all LEP prisoners at Edna Mahan have access to interpretation and translation services as required by Title VI of the Civil Rights Act.

#### IV. QUALITY IMPROVEMENT AND DATA COLLECTION

¶ 91. Within eighteen (18) months of the Effective Date, NJDOC and Edna Mahan shall develop and implement a quality improvement program, as described in the paragraphs below, to identify and address any trends and deficiencies in Edna Mahan's systems for prevention, detection and response to sexual abuse and sexual harassment at Edna Mahan, and to assess and ensure compliance with the terms of this Agreement.

Requirements:

##### **Monitor's Measure of Compliance re Quality Improvement and Data Collection ¶ 91:**

Edna Mahan Level 3 policy which establishes responsibilities and procedures for a quality improvement program to identify and address any trends and deficiencies in EMCF systems for prevention, detection, and response to sexual abuse and sexual harassment at Edna Mahan, signed by Edna Mahan administrator no later than February 24, 2023.

¶92/¶93 - Copies of Quality Improvement meeting minutes.

##### **Steps taken by NJDOC and EMCF towards implementation re Quality Improvement and Data Collection ¶ 91:**

###### **8/24/25 Status Report**

IMP RMS #001 Quality Improvement and Data Collection Level 3 policy was adopted and implemented on June 15, 2025 after review by the Department of Justice (DOJ), the Federal Monitor and then NJDOC. The EMCF Quality Improvement Team is comprised of the Women's Services Director, EMCF Administrator, IPCM, Majors, Administrative Lieutenant, Training Lieutenant, Human Resources Manager, Personnel Assistant, and SID and continues to meet on a monthly basis to review and analyze data. NJDOC continues to collect data manually until a formal computer-based tracking system can be secured.

EMCF held the Quarter 1 (April 2025) and Quarter 2 (July 2025) RMS QI Meetings at which time members reviewed and analyzed data from January – March 2025 and April – June 2025 to identify trends and abnormalities in allegations of sexual abuse, harassment, and retaliation. An in-depth review of the data factors was conducted by Committee members who made recommendations for additional data to be collected in an effort to best identify potential trends and necessary corrective action.

**Monitor's Finding of Compliance re Quality Improvement and Data Collection ¶ 91:**

**[X] Substantial Compliance**

- ☐ Partial Compliance
- ☐ Non-compliance
- ☐ N/A not required until [ date ]
- ☐ N/A monitor granted an extension until [ date ]

**Monitor's Discussion re Quality Improvement and Data Collection ¶ 91:**

EMCF policy, IMP RMS #001, "Quality Improvement and Data Collection," was signed on June 11, 2025.

EMCF conducted monthly Quality Improvement (QI) meetings during this reporting period. Additionally, EMCF held its first-quarter meeting on April 23, 2025, and its second-quarter meeting on July 16, 2025. The Monitor and the DOJ received the meeting minutes for both quarterly meetings. During these meetings, the QI committee members examined and analyzed data from January to March and April to June 2025 to identify patterns and irregularities in allegations of sexual abuse, harassment, and retaliation.

The Monitor attended most of the QI meetings during this reporting period and was impressed with the structure/functioning of the committee. The agenda for each meeting included looking at the data for the following (required in the Settlement Agreement)

- Total number of investigations initiated regarding allegations of sexual abuse, sexual harassment, and retaliation
- The number of PREA-related allegations involving staff from EMCF referred for criminal investigation and the number of criminal prosecutions
- The number of sexual abuse, sexual harassment, and retaliation allegations that occurred on each shift
- Locations within EMCF where alleged sexual abuse and sexual harassment occurred
- Number of forensic medical exams, exams performed by sexual assault forensic examiners, and exams performed by sexual assault nurse examiners
- Number of administrative investigations pending more than 90 days
- Total number of closed investigations, total number substantiated, total number unsubstantiated, and total number of unfounded complaints of sexual abuse or sexual harassment
- The number of all grievances related to sexual abuse or sexual harassment, emergency grievances, and the number of grievances referred to EMCF's SID for investigations
- Number of times NJDOC or EMCF has determined that an EMCF IP was subject to a substantial risk of imminent sexual or physical abuse

- Number of IPs who were held in or assigned to involuntary segregation because of a risk of or report of sexual victimization
- Number of instances when IPs were used to act as interpreters for other IPs in connection with sexual abuse or sexual harassment allegations or investigations
- Number and names of pregnant IPs at EMCF
- Incidents of self-harm
- Staffing levels, by gender, during different shifts
- Number of cross-gender strip, visual cavity, and pat-down searches
- Number of staff who improperly entered or allegedly improperly entered shower or toilet areas at EMCF unannounced and without justification
- Number of staff who allegedly used sexually explicit, profane, vulgar, degrading, racially insensitive or offensive language on a frequent or repeated basis at EMCF
- Number of staff who allegedly were located in areas other than their assigned post at EMCF on a frequent or repeated basis
- Number of staff who were disciplined for actions at EMCF involving sexual abuse, sexual harassment, use of sexually explicit, profane, vulgar, degrading, or racially insensitive or offensive language, or unprofessional staff conduct with IPs, including terminations, suspensions, and resignations
- Number of staff who resigned while a sexual abuse or sexual harassment allegation or other investigation was pending at EMCF.
- Number of EMCF staff disciplined for on or off-duty conduct related to sexual abuse or sexual harassment or is a potential risk factor related to sexual abuse, such as employee misconduct at EMCF related to contraband or undue familiarity, or for off-duty conduct related to domestic violence or drug trafficking
- Staff reports of training attendance, frequency, and completion rates.

Additionally, the RMS Committee added the following data points:

- Breakdown of types of grievances
- Names of staff and incarcerated persons who reportedly engaged in or reported alleged acts of sexual abuse, sexual harassment, and/or retaliation
- Implementation of footnotes to provide more detailed information
- An expansion of staff training data
- Breakdown of staffing, which separates weekday and weekend/holiday shifts
- Identification of whether cases were deemed administrative or criminal

The Monitor was encouraged by the QI Committee's initiative in expanding the data points within the Risk Management System. This action reflects a commitment that goes beyond simply fulfilling the requirements of the Settlement Agreement. It demonstrates the

Committee's genuine dedication to using meaningful data to help ensure that incarcerated individuals are protected from sexual abuse, sexual harassment, and retaliation.

**Recommendations re Quality Improvement and Data Collection ¶ 91:**

Continue to hold RMS monthly and quarterly meetings.

¶ 92. Within twelve (12) months of the Effective Date, Edna Mahan will draft and/or revise any quality improvement policies and procedures, consistent with the process in the Policies and Procedures Section, Section III.A, to identify and address systemic deficiencies, if identified, in Edna Mahan's sexual safety system.

Requirements:

- ¶ 94. The Edna Mahan RMS data collection shall include:
- a. Number of substantiated prisoner and third-party reports of:
    - i. sexual abuse at Edna Mahan;
    - ii. sexual harassment at Edna Mahan;
    - iii. cross-gender staff presence in the shower and toilet areas of the bathrooms at Edna Mahan;
    - iv. Edna Mahan staff located in areas other than their assigned posts; and
    - v. retaliatory treatment and threats to prisoners or third parties, including disciplinary actions or housing relocation;
  - b. Number and names of Edna Mahan staff who:
    - i. engaged in or allegedly engaged in sexual abuse at Edna Mahan;
    - ii. engaged in or allegedly engaged in sexual harassment at Edna Mahan;
    - iii. allegedly violated the privacy rights of prisoners at Edna Mahan by entering the shower and toilet areas unannounced and without justification;
    - iv. allegedly used sexually explicit, profane, vulgar, degrading, or racially insensitive or offensive language on a frequent or repeated basis at Edna Mahan;
    - v. allegedly were located in areas other than their assigned post at Edna Mahan on a frequent or repeated basis;
    - vi. were disciplined for actions at Edna Mahan involving sexual abuse, sexual harassment, use of sexually explicit, profane, vulgar, degrading, or racially insensitive or offensive language, or unprofessional staff conduct with prisoners, including terminations, suspensions, and resignations; and
    - vii. resigned while a sexual abuse or sexual harassment allegation, or other investigation, was pending at Edna Mahan;

- c. Number of forensic medical exams, exams performed by sexual assault forensic examiners, and exams performed by sexual assault nurse examiners;
- d. Staffing levels, by gender, during different shifts;
- e. The number of sexual abuse and sexual harassment allegations that occurred on each shift;
- f. Locations within Edna Mahan where alleged sexual abuse and sexual harassment occurred;
- g. Number of prisoners who were held in or assigned to involuntary segregation because of a risk of or report of sexual victimization;
- h. Number and names of pregnant prisoners at Edna Mahan;
- i. Number of cross-gender strip, visual cavity, and pat-down searches;  
The number of all grievances related to sexual abuse or sexual harassment, emergency grievances, and number of grievances referred to Edna Mahan's Special Investigations Division for investigation;
- j. Number of times NJDOC or Edna Mahan has determined that an Edna Mahan prisoner was subject to substantial risk of imminent sexual or physical abuse;
- k. Number of administrative investigations initiated regarding allegations of sexual abuse or sexual harassment;
- l. Number of sexual abuse or sexual harassment investigations that involved extensions because a final decision had not been reached within 90 days;
- m. Number of instances when prisoners were used to act as interpreters for other prisoners in connection with sexual abuse or sexual harassment allegations or investigations;
- n. Total number of investigations, total number substantiated, total number unsubstantiated, and total number unfounded complaints of sexual abuse or sexual harassment;
- o. Number of PREA-related allegations involving staff from Edna Mahan referred for criminal investigation and the number of criminal prosecutions;
- p. Number of Edna Mahan staff disciplined for on- or off-duty conduct related to sexual abuse or sexual harassment or is a potential risk factor related to sexual abuse, such as employee misconduct at Edna Mahan related to contraband or undue familiarity, or for off-duty conduct related to domestic violence or drug trafficking;
- q. Number of times a substantiated incident of retaliation occurred involving Edna Mahan staff or prisoners;
- r. NJDOC, Edna Mahan, and staff reports of training attendance, frequency, and completion rates; and
- s. Incidents of self-harm.

**Monitor's Measure of Compliance re Quality Improvement and Data Collection ¶ 92:**

- Edna Mahan Level 3 policy which establishes responsibilities and procedures for the collection of data, including a Risk Management System, and its use in a Quality Improvement (QI) system at Edna Mahan in order to improve operations, ensure women prisoners are treated with dignity and respect, and to protect the safety and security of prisoners drafted by August 24, 2022, and signed by Edna Mahan administrator no later than February 24, 2023
- Any memos, written directives from the Commissioner, Deputy Commissioner and/or Administrator that addresses procedures, and practices at Edna Mahan regarding collection of data, including a Risk Management System, and a Quality Improvement (QI) system at Edna Mahan
- Copies of Quality Improvement meeting minutes

**Steps taken by NJDOC and EMCF towards implementation re Quality Improvement and Data Collection ¶ 92:**

**8/24/2025 Status Report**

IMP RMS #001 Quality Improvement and Data Collection Level 3 policy was adopted and implemented on June 15, 2025 after review by the Department of Justice (DOJ), the Federal Monitor and then NJDOC. The EMCF Quality Improvement Team is comprised of the Women's Services Director, EMCF Administrator, IPCM, Majors, Administrative Lieutenant, Training Lieutenant, Human Resources Manager, Personnel Assistant, and SID and continues to meet on a monthly basis to review and analyze data. NJDOC continues to collect data manually until a formal computer-based tracking system can be secured.

EMCF held the Quarter 1 (April 2025) and Quarter 2 (July 2025) RMS QI Meetings at which time members reviewed and analyzed data from January – March 2025 and April – June 2025 to identify trends and abnormalities in allegations of sexual abuse, harassment, and retaliation. An in-depth review of the data factors was conducted by Committee members who made recommendations for additional data to be collected in an effort to best identify potential trends and necessary corrective action. The third Semi-Annual RMS Report was submitted to the Federal Monitor on August 22, 2025.

**Monitor's Finding of Compliance re Quality Improvement and Data Collection ¶ 92:**

**[X] Substantial Compliance**

[ ] Partial Compliance

[ ] Non-compliance

[ ] N/A not required until [ date ]

[ ] N/A monitor granted an extension until [ date ]



**Monitor's Discussion re Quality Improvement and Data Collection ¶ 92:**

EMCF policy, IMP RMS #001, "Quality Improvement and Data Collection," was signed on June 11, 2025.

**Recommendations re Quality Improvement and Data Collection ¶ 92:**

No recommendation

- ¶ 93. NJDOC and Edna Mahan shall develop, implement, and maintain a Risk Management System (“RMS”) that will document and track facility trends at Edna Mahan related to allegations of: (1) sexual abuse; (2) sexual harassment; and (3) retaliation for reporting sexual abuse or sexual harassment.
- a. The RMS shall ensure that trends and incidents involving sexual abuse and sexual harassment are identified and corrected in a timely manner.
  - b. The RMS will collect, consolidate, analyze, track, and otherwise use its data described in this this Section to assist with the prevention of sexual abuse and sexual harassment.

Requirements:

- ¶ 94. The Edna Mahan RMS data collection shall include:
- a. Number of substantiated prisoner and third-party reports of:
    - i. sexual abuse at Edna Mahan;
    - ii. sexual harassment at Edna Mahan;
    - iii. cross-gender staff presence in the shower and toilet areas of the bathrooms at Edna Mahan;
    - iv. Edna Mahan staff located in areas other than their assigned posts; and
    - v. retaliatory treatment and threats to prisoners or third parties, including disciplinary actions or housing relocation;
  - b. Number and names of Edna Mahan staff who:
    - i. engaged in or allegedly engaged in sexual abuse at Edna Mahan;
    - ii. engaged in or allegedly engaged in sexual harassment at Edna Mahan;
    - iii. allegedly violated the privacy rights of prisoners at Edna Mahan by entering the shower and toilet areas unannounced and without justification;
    - iv. allegedly used sexually explicit, profane, vulgar, degrading, or racially insensitive or offensive language on a frequent or repeated basis at Edna Mahan;
    - v. allegedly were located in areas other than their assigned post at Edna Mahan on a frequent or repeated basis;
    - vi. were disciplined for actions at Edna Mahan involving sexual abuse, sexual harassment, use of sexually explicit, profane, vulgar, degrading, or racially insensitive or offensive language, or unprofessional staff conduct with prisoners, including terminations, suspensions, and resignations; and

- vii. resigned while a sexual abuse or sexual harassment allegation, or other investigation, was pending at Edna Mahan;
- c. Number of forensic medical exams, exams performed by sexual assault forensic examiners, and exams performed by sexual assault nurse examiners;
- d. Staffing levels, by gender, during different shifts;
- e. The number of sexual abuse and sexual harassment allegations that occurred on each shift;
- f. Locations within Edna Mahan where alleged sexual abuse and sexual harassment occurred;
- g. Number of prisoners who were held in or assigned to involuntary segregation because of a risk of or report of sexual victimization;
- h. Number and names of pregnant prisoners at Edna Mahan;
- i. Number of cross-gender strip, visual cavity, and pat-down searches;  
The number of all grievances related to sexual abuse or sexual harassment, emergency grievances, and number of grievances referred to Edna Mahan's Special Investigations Division for investigation;
- j. Number of times NJDOC or Edna Mahan has determined that an Edna Mahan prisoner was subject to substantial risk of imminent sexual or physical abuse;
- k. Number of administrative investigations initiated regarding allegations of sexual abuse or sexual harassment;
- l. Number of sexual abuse or sexual harassment investigations that involved extensions because a final decision had not been reached within 90 days;
- m. Number of instances when prisoners were used to act as interpreters for other prisoners in connection with sexual abuse or sexual harassment allegations or investigations;
- n. Total number of investigations, total number substantiated, total number unsubstantiated, and total number unfounded complaints of sexual abuse or sexual harassment;
- o. Number of PREA-related allegations involving staff from Edna Mahan referred for criminal investigation and the number of criminal prosecutions;
- p. Number of Edna Mahan staff disciplined for on- or off-duty conduct related to sexual abuse or sexual harassment or is a potential risk factor related to sexual abuse, such as employee misconduct at Edna Mahan related to contraband or undue familiarity, or for off-duty conduct related to domestic violence or drug trafficking;
- q. Number of times a substantiated incident of retaliation occurred involving Edna Mahan staff or prisoners;
- r. NJDOC, Edna Mahan, and staff reports of training attendance, frequency, and completion rates; and
- s. Incidents of self-harm.

**Monitor's Measure of Compliance re Quality Improvement and Data Collection ¶ 93:**

- Edna Mahan Level 3 policy which establishes responsibilities and procedures for the collection of data, including a Risk Management System, and its use in a Quality Improvement (QI) system at Edna Mahan in order to improve operations, ensure women prisoners are treated with dignity and respect, and to protect the safety and security of prisoners drafted by August 24, 2022, and signed by Edna Mahan administrator no later than February 24, 2023
- Any memos, written directives from the Commissioner, Deputy Commissioner and/or Administrator that addresses procedures, and practices at Edna Mahan regarding collection of data, including a Risk Management System, and a Quality Improvement (QI) system at Edna Mahan
- Copies of Quality Improvement meeting minutes

**Steps taken by NJDOC and EMCF towards implementation re Quality Improvement and Data Collection ¶ 93:**

**8/24/2025 Status Report**

IMP RMS #001 Quality Improvement and Data Collection Level 3 policy was adopted and implemented on June 15, 2025 after review by the Department of Justice (DOJ), the Federal Monitor and then NJDOC. The EMCF Quality Improvement Team is comprised of the Women's Services Director, EMCF Administrator, IPCM, Majors, Administrative Lieutenant, Training Lieutenant, Human Resources Manager, Personnel Assistant, and SID and continues to meet on a monthly basis to review and analyze data. NJDOC continues to collect data manually until a formal computer-based tracking system can be secured.

EMCF held the Quarter 1 (April 2025) and Quarter 2 (July 2025) RMS QI Meetings at which time members reviewed and analyzed data from January – March 2025 and April – June 2025 to identify trends and abnormalities in allegations of sexual abuse, harassment, and retaliation. An in-depth review of the data factors was conducted by Committee members who made recommendations for additional data to be collected in an effort to best identify potential trends and necessary corrective action.

The third Semi-Annual RMS Report was submitted to the Federal Monitor on August 22, 2025.

**Monitor's Finding of Compliance re Quality Improvement and Data Collection ¶ 93:**

**☒ Substantial Compliance**

☐ Partial Compliance

☐ Non-compliance

☐ N/A not required until [ date ]

☐ N/A monitor granted an extension until [ date ]

**Monitor's Discussion re Quality Improvement and Data Collection ¶ 93:**

NJDOC and EMCF have developed, implemented, and are currently maintaining a manual Risk Management System (RMS). NJDOC continues to explore the development of a formal, computer-based RMS tracking system. EMCF has also begun tracking facility-wide trends related to allegations of (1) sexual abuse, (2) sexual harassment, and (3) retaliation for reporting such incidents. Additionally, they are working on manual methods to integrate the RMS with other NJDOC tracking systems, including the Early Warning System—a statewide database managed by the Special Investigations Unit—and the Administrative Referral Tracking Form, a tool developed by the NJDOC Operations Division.

**Recommendations re Quality Improvement and Data Collection ¶ 93:**

Continue to maintain a Risk Management System that ensures trends and incidents involving sexual abuse and sexual harassment are identified and corrected promptly.

- ¶ 95. Edna Mahan shall aggregate the data collected on a quarterly basis and review data aggregated in order to assess and improve the effectiveness of its sexual abuse and sexual harassment prevention, detection, and response policies, practices, and training, including by:
- a. Identifying potential patterns, changes, and problem areas (including for individual officers; for individual prisoners; and for housing units); to include problems in Edna Mahan's staffing levels, policies, practices, staff discipline system, and staff and prisoner training/education that might have contributed to those patterns if such patterns reflect increased sexual abuse and sexual harassment, decreased sexual abuse and sexual harassment detection, or inadequate responses to sexual abuse and sexual harassment;
  - b. Identifying staff or supervisors in need of retraining, performance plans, and discipline, while considering the employee's general responsibilities and specific assignment;
  - c. Developing intervention options, as appropriate, to facilitate an effective response to identified problems;
  - d. Taking corrective action on an ongoing basis; and
  - e. Preparing semi-annual reports of its findings and corrective actions, including a comparison to the findings in previous reports to assess progress.

Requirements:

**Monitor's Measure of Compliance re Quality Improvement and Data Collection ¶ 95:**

- Quarterly copies of the aggregated data beginning January 5, 2023, for the second quarter of the year, 2023
- Corrective action plans developed as a result of data review/QI meetings, beginning June 2023
- Copies of semi-annual reports beginning 2023

**NJDOC Discussion: Steps taken by NJDOC and EMCF towards implementation re Quality Improvement and Data Collection ¶ 95:**

**8/24/25 Status Report**

IMP RMS #001 Quality Improvement and Data Collection Level 3 policy was adopted and implemented on June 15, 2025 after review by the Department of Justice (DOJ), the Federal Monitor and then NJDOC. The EMCF Quality Improvement Team is comprised of the Women's Services Director, EMCF Administrator, IPCM, Majors, Administrative Lieutenant, Training Lieutenant, Human Resources Manager, Personnel Assistant, and SID and continues to meet on a monthly basis to review and analyze data. NJDOC continues to collect data manually until a formal computer-based tracking system can be secured.

EMCF held the Quarter 1 (April 2025) and Quarter 2 (July 2025) RMS QI Meetings at which time members reviewed and analyzed data from January – March 2025 and April – June 2025 to identify trends and abnormalities in allegations of sexual abuse, harassment, and retaliation. An in-depth review of the data factors was conducted by Committee members who made recommendations for additional data to be collected in an effort to best identify potential trends and necessary corrective action.

The third Semi-Annual RMS Report was submitted to the Federal Monitor on August 22, 2025. This report contains findings and corrective action for Q1 and Q2.

**Monitor's Finding of Compliance re Quality Improvement and Data Collection ¶ 95:**

**☒ Substantial Compliance**

☐ Partial Compliance

☐ Non-compliance

☐ N/A not required at this time

☐ N/A monitor granted an extension until [ date ]

**Monitor's Discussion re Quality Improvement and Data Collection ¶ 95:**

As noted above, EMCF conducted monthly Quality Improvement (QI) meetings during this reporting period. Additionally, EMCF held its first-quarter meeting on April 23, 2025, and its second-quarter meeting on July 16, 2025. The Monitor and the DOJ received the meeting minutes for both quarterly meetings. During these meetings, the QI committee members examined and analyzed data from January to March and April to June 2025 to identify patterns and irregularities in allegations of sexual abuse, harassment, and retaliation.

The Monitor attended both of these quarterly meetings. In both the quarterly meetings, the QI committee members reviewed aggregated data to assess the effectiveness of its sexual abuse and sexual harassment policies, practices, and training. The Committee identified and discussed:

- Potential patterns, changes, and problem areas (including for individual officers; for individual IPs, and for housing units);
- EMCF's staffing levels
- Staff in need of retraining, and/or performance plans
- Strategies for IPs
- Intervention strategies as appropriate, for identified problems.

Additionally, on August 24, 2025, the Monitor and the DOJ received a semiannual report from the RMS/QI committee detailing its findings and corrective actions. This report contained findings and corrective action for Q3 and Q4 and included a comparison to the findings in the previous report to assess progress.

**Recommendations re Quality Improvement and Data Collection ¶ 95:**

Continue to maintain a Risk Management System that will ensure trends and incidents involving sexual abuse and sexual harassment are identified and corrected in a timely manner.



- ¶ 96. The RMS will rely on the data analysis described above. All appropriate supervisors and investigative staff shall have access to this data described above.
- a. Edna Mahan's Administrator shall use information from the RMS to improve quality management practices, identify patterns and trends, and take necessary corrective action both on an individual and systemic level.
  - b. Supervisors assigned to Edna Mahan will assure that remedial activities are completed, as well as report if the intervention was effective in changing behaviors.
  - c. The executive staff member responsible for women's facilities, or designee, will manage the RMS and will conduct quarterly audits of the RMS to ensure that analysis and intervention are working effectively, and to identify potential patterns or trends resulting in harm to prisoners.

Requirements:

**Monitor's Measure of Compliance re Quality Improvement and Data Collection ¶ 96:**

- ¶92/¶93 - Edna Mahan Level 3 policy which establishes responsibilities and procedures for the collection of data, including a Risk Management System, and its use in a Quality Improvement (QI) system at Edna Mahan in order to improve operations, ensure women prisoners are treated with dignity and respect, and to protect the safety and security of prisoners drafted by August 24, 2022, and signed by Edna Mahan administrator no later than February 24, 2023
- a. Corrective action plans developed by Edna Mahan's Administrator, both on an individual and systemic level, beginning June 2023  
Interview with Edna Mahan Administrator
  - b. Copies of documentation from supervisors verifying that the identified remedial activities were completed beginning June 2023.  
Copies of documentation from supervisors verifying that the identified remedial activities were effective in changing staff behaviors beginning June 2023  
Interviews with at least three Edna Mahan Supervisors during on-site visits
  - c. Quarterly copies of the audits of the RMS conducted by the Assistant Commissioner for Women's Services beginning July 5, 2023, for the second quarter (Q2) of the year, 2023 Interviews with Assistant Commissioner for Women's Services

**NJDOC Discussion: Steps taken by NJDOC and EMCF towards implementation re Quality Improvement and Data Collection ¶ 96:  
8/24/2025 Status Report**

IMP RMS #001 Quality Improvement and Data Collection Level 3 policy was adopted and implemented on June 15, 2025 after review by the Department of Justice (DOJ), the Federal Monitor and then NJDOC. The EMCF Quality Improvement Team is comprised of the Women's Services Director, EMCF Administrator, IPCM, Majors, Administrative Lieutenant, Training Lieutenant, Human Resources Manager, Personnel Assistant, and SID and continues to meet on a monthly basis to review and analyze data. NJDOC continues to collect data manually until a formal computer-based tracking system can be secured.

EMCF held the Quarter 1 (April 2025) and Quarter 2 (July 2025) RMS QI Meetings at which time members reviewed and analyzed data from January – March 2025 and April – June 2025 to identify trends and abnormalities in allegations of sexual abuse, harassment, and retaliation. An in-depth review of the data factors was conducted by Committee members who made recommendations for additional data to be collected in an effort to best identify potential trends and necessary corrective action.

The third Semi-Annual RMS Report was submitted to the Federal Monitor on August 22, 2025. This report contains findings and corrective action for Q1 and Q2.

Assistant Commissioner Helena Tome is responsible for oversight of the RMS and conducted a quarterly audit at the conclusion of Quarters 1 and 2.

**Monitor's Finding of Compliance re Quality Improvement and Data Collection ¶ 96:**

**[X] Substantial Compliance**

- ☐ Partial Compliance
- ☐ Non-compliance
- ☐ N/A not required at this time
- ☐ N/A monitor granted an extension until [ date ]

**Monitor's Discussion re Quality Improvement and Data Collection ¶ 96:**

Page 6 of IMP RMS #001, "Quality Improvement and Data Collection," states, "The RMS Coordinator will provide all appropriate supervisors and investigative staff access to the data collection to assist in these ongoing assessments. Additionally, page 8 of 12 states, "The Administrator shall use information from the RMS to improve quality management practices, identify patterns and trends, and take necessary corrective action both on an individual and systemic level. The Administrator will ensure that remedial activities are completed, as well as reported to the Assistant Commissioner of Women's Services if the intervention was effective in changing behaviors." This policy was signed on June 11, 2025.

EMCF held two quarterly RMS meetings during this reporting period: on April 23, 2025, and on July 16, 2025. The Monitor and the DOJ received meeting minutes for these quarterly meetings. Additionally, EMCF conducted monthly Quality Improvement (QI) meetings during this reporting period. The Monitor and the DOJ received the meeting minutes for all of these meetings. During these meetings, the QI committee members examined and analyzed data from January through June 2025 to identify patterns and irregularities in allegations of sexual abuse, harassment, and retaliation. The report also includes the appropriate supervisors and investigative staff with access to the data described above.

Assistant Commissioner Helena Tome is the executive staff member responsible for overseeing the RMS. Her audit of the RMS was included in the Semi-Annual report.

**Recommendations re Quality Improvement and Data Collection ¶ 96:**

Continue to maintain a risk Management system that will ensure trends and incidents involving sexual abuse and sexual harassment are identified and corrected in a timely manner.

¶ 97. NJDOC and Edna Mahan will provide to the Monitor and DOJ on a semi-annual basis a list of all staff members identified through the RMS, and any corrective action, if taken. On an annual basis, NJDOC and Edna Mahan shall conduct a documented review of the RMS to ensure that it has been effective in identifying concerns regarding policy, training, or the need for discipline. NJDOC and Edna Mahan will document their review and conclusions and provide them to the Monitor and DOJ.

Requirements:

The fact that a staff member is identified through the RMS does not necessarily mean that corrective action should be taken.

**Monitor's Measure of Compliance re Quality Improvement and Data Collection ¶ 97:**

- A list of staff members identified through the RMS, and the corrective action taken (if any) provided semi-annually, beginning July 2023
- A copy of the annual documented review of the Risk Management System provided to the DOJ and Monitor, beginning in the year 2024

**Steps taken by NJDOC and EMCF towards implementation re Quality Improvement and Data Collection ¶ 97:**

**8/24/2025 Status Report**

IMP RMS #001 Quality Improvement and Data Collection Level 3 policy was adopted and implemented on June 15, 2025 after review by the Department of Justice (DOJ), the Federal Monitor and then NJDOC. The EMCF Quality Improvement Team is comprised of the Women's Services Director, EMCF Administrator, IPCM, Majors, Administrative Lieutenant, Training Lieutenant, Human Resources Manager, Personnel Assistant, and SID and continues to meet on a monthly basis to review and analyze data. NJDOC continues to collect data manually until a formal computer-based tracking system can be secured.

EMCF held the Quarter 1 (April 2025) and Quarter 2 (July 2025) RMS QI Meetings at which time members reviewed and analyzed data from January – March 2025 and April – June 2025 to identify trends and abnormalities in allegations of sexual abuse, harassment, and retaliation. An in-depth review of the data factors was conducted by Committee members who made recommendations for additional data to be collected in an effort to best identify potential trends and necessary corrective action.

The third Semi-Annual RMS Report was submitted to the Federal Monitor on August 22, 2025. This report contains findings and corrective action for Q1 and Q2.

Assistant Commissioner Helena Tome is responsible for oversight of the RMS and conducted a quarterly audit at the conclusion of Quarters 1 and 2.

**Monitor's Finding of Compliance re Quality Improvement and Data Collection ¶ 97:**

**[X] Substantial Compliance**

- ☐ Partial Compliance
- ☐ Non-compliance
- ☐ N/A not required at this time
- ☐ N/A monitor granted an extension until [ date ]

**Monitor's Discussion re Quality Improvement and Data Collection ¶ 97:**

On August 24, 2025, the Monitor and the DOJ received the third semi-annual report of the RMS/QI committee's findings and corrective actions. This report covered the period of January – June 2025 and contained the following findings and corrective actions for Q1 and Q2.

**Q1 2025**

In the first quarter of 2025, there were zero (0) substantiated cases of sexual abuse and three (3) substantiated cases of sexual harassment.

The following trends were identified in PREA-related allegations reported during the first quarter:

- For the second quarter in a row, the total number of administrative and criminal investigations related to PREA incidents decreased
- The shift during which a sexual abuse or sexual harassment incident allegedly took place was once again most often unknown or unreported by the IP, and there was only one (1) allegation of a sexual abuse or sexual harassment incident allegedly occurring on third shift; it is important to note this is the first report of an incident allegedly occurring on third shift
- The primary location where sexual abuse and sexual harassment allegedly occurred was reported in general population housing units; the beginning of the quarter experienced a significant uptick in IP-on-IP incident allegations in Satellite Building 1 (specifically Building 1 West), however, increased staff presence and other proactive attempts throughout the period led to a decrease in allegations in March
- Grievances and inquiries related to sexual harassment were almost three times lower than in the previous quarter

- This quarter saw a slight increase in the number of PREA-related allegations involving staff that were referred for criminal investigation; once again, zero (0) staff were disciplined for actions involving sexual abuse or sexual harassment against IPs
- Q1 demonstrated either no change or an increase in the average weekday and weekend male and female first, second, and third shift officers
- Q1 demonstrated either no change or an increase in the average weekday and weekend male and female second and third shift supervisors; the first shift weekend female supervisors saw a slight decline

In the first quarter of 2025, there was one (1) staff member identified as needing retraining, performance plans, or discipline related to subjects covered in the Consent Decree or as a result of the RMS. This case involved allegation made in December 2024 by staff member of IP sexual harassment. The allegation was substantiated in March 2025 and resulted in corrective action for the staff (retraining in misgendering/communication/ proper use of pronouns).

As an intervention, in March 2025, Major Karpew requested additional custody staff assignments to Satellite Building 1 East and West in response to the increase in IP-on-IP sexual abuse and sexual harassment allegations. Custody supervisors began conducting additional tours of both units, and weekly camera audits of the area were instituted. Administrative staff held a meeting with the unit IP liaisons to discuss unit living conditions, social interaction, and any identified issues.

## **Q2 2025**

In the second quarter of 2025, there were zero (0) substantiated cases of staff-on-IP sexual abuse and one (1) substantiated case of IP-on-IP sexual harassment.

The following trends were identified in PREA-related allegations reported during the second quarter:

- There was one (1) repeated staff name as an alleged perpetrator of sexual abuse and PREA retaliation from Q1 to Q2
- There were no identified repeat IPs who allegedly engaged in sexual abuse or sexual harassment from Q1 to Q2
- There were four (4) repeat IPs who reported allegations of sexual abuse, sexual harassment and/or PREA retaliation from Q1 to Q2
- There were zero (0) IP on IP allegations made in Satellite Building 1 (East or West); however, there were four (4) staff on IP allegations made in Satellite Building 1 East
- Grievances and inquiries related to sexual abuse and sexual harassment decreased by 55% in Q2 compared to Q1
- Two (2) third shift female supervisors were hired during Q2

In the second quarter of 2025, no staff members were identified as needing retraining, performance plans, or discipline related to subjects covered in the Consent Decree or as a result of the RMS.

No intervention options were identified as needed during this quarter.

Leanne Scott, Director of Women's Services, and Amelia Renshaw, EMCF's Institutional PREA Compliance Manager (IPCM), oversee the Risk Management System (RMS) and conduct quarterly audits in coordination with Assistant Commissioner (AC) Helena Tome. Each year, the AC completes a documented review of the RMS to evaluate its effectiveness in identifying issues related to policy, training, or the need for disciplinary action. The findings from this annual review were incorporated into the third semi-annual RMS report.

**Recommendations re Quality Improvement and Data Collection ¶ 97:**

Continue to identify areas for improvement in data collection and analysis, as well as resulting interventions.

- ¶ 98. If either the aggregated data referenced in Paragraph 95 indicates in three consecutive RMS reports a consistent failure to improve protection of prisoners from sexual abuse and sexual harassment by staff, or if there are increases in any of the following:
- a. cases of staff-on-prisoner sexual abuse that are not unfounded;
  - b. cases of staff-on prisoner sexual harassment that are not unfounded;
  - c. cases of staff discipline for sexual abuse, sexual harassment, or staff use of sexually explicit, profane, vulgar, degrading, or racially insensitive offensive language directed at a prisoner; NJDOC and Edna Mahan shall make modifications to Edna Mahan's policies, procedures and/or practices to address the increase within 60 days of the third consecutive report.

Nothing in this section prevents NJDOC and Edna Mahan from making modifications sooner than this or as data and/or incidents indicate a need for adjustment.

Requirements:

**Monitor's Measure of Compliance re Quality Improvement and Data Collection ¶ 98:**

- Revised policies, procedures, and/or practices as a result of the Risk Management System identifying a consistent failure to improve protection of prisoners from sexual abuse or sexual harassment by staff
- Interview with Edna Mahan Administrator
- Interview with at least two members of the Quality Improvement meetings (other than the Edna Mahan Administrator)

¶ 95 - Quarterly copies of the aggregated data beginning July 5, 2023, for the previous quarter of the year 2023 (Q2)

**Steps taken by NJDOC and EMCF towards implementation re Quality Improvement and Data Collection ¶ 98:**

**8/24/2025 Status Report**

IMP RMS #001 Quality Improvement and Data Collection Level 3 policy was adopted and implemented on June 15, 2025 after review by the Department of Justice (DOJ), the Federal Monitor and then NJDOC. The EMCF Quality Improvement Team is comprised of the Women's Services Director, EMCF Administrator, IPCM, Majors, Administrative Lieutenant, Training Lieutenant, Human Resources Manager, Personnel Assistant, and SID and continues to meet on a monthly basis to review and analyze data. NJDOC continues to collect data manually until a formal computer-based tracking system can be secured.



EMCF held the Quarter 1 (April 2025) and Quarter 2 (July 2025) RMS QI Meetings at which time members reviewed and analyzed data from January – March 2025 and April – June 2025 to identify trends and abnormalities in allegations of sexual abuse, harassment, and retaliation. An in-depth review of the data factors was conducted by Committee members who made recommendations for additional data to be collected in an effort to best identify potential trends and necessary corrective action.

The third Semi-Annual RMS Report was submitted to the Federal Monitor on August 22, 2025. This report contains findings and corrective action for Q1 and Q2.

Assistant Commissioner Helena Tome is responsible for oversight of the RMS and conducted a quarterly audit at the conclusion of Quarters 1 and 2.

**Monitor's Finding of Compliance re Quality Improvement and Data Collection ¶ 98:**

**☒ Substantial Compliance**

- ☐ Partial Compliance
- ☐ Non-compliance
- ☐ N/A not required at this time
- ☐ N/A monitor granted an extension until [ date ]

**Monitor's Discussion re Quality Improvement and Data Collection ¶ 98:**

As previously noted, the EMCF Quality Improvement Team continues to meet monthly to review and analyze data. The Monitor and the DOJ have received copies of each of the monthly meeting minutes. The Monitor and the DOJ have also received the meeting minutes from the quarterly meeting and semi-annual Risk Management Reports. To date, the aggregated data referenced in Paragraph 95 has not indicated a failure to improve protection of prisoners from sexual abuse and sexual harassment by staff.

Additionally, there have not been any aggregated data referenced in Paragraph 95 indicating three consecutive RMS reports a consistent failure to improve the protection of prisoners from sexual abuse and sexual harassment by staff, or if there are increases in any of the following:

- a. cases of staff-on-prisoner sexual abuse that are not unfounded;
- b. cases of staff-on prisoner sexual harassment that are not unfounded;
- c. cases of staff discipline for sexual abuse, sexual harassment or staff use of sexually explicit, profane, vulgar, degrading, or racially insensitive offensive language directed at a prisoner;

**Recommendations re Quality Improvement and Data Collection ¶ 98:**

Continue to maintain a Risk Management system that reviews data and trends and make modifications to EMCF's policies, procedures, and/or practices, as needed, to address any increases in the above-listed areas.

## VI. NJDOC AND EDNA MAHAN'S REPORTING REQUIREMENTS

¶ 104. NJDOC and Edna Mahan shall provide to the Monitor and DOJ a semi-annual Status Report until the Agreement is terminated, the first of which shall be submitted within six months of the Effective Date.

Requirements:

- ¶ 105. Each Status Report shall describe the actions NJDOC and Edna Mahan have taken during the reporting period to implement this Agreement and shall make specific reference to the Agreement provisions being implemented. The report shall also summarize audits and quality improvement activities and contain findings and recommendations that would be used to track and trend data compiled at Edna Mahan.
- ¶ 106. NJDOC and Edna Mahan shall maintain sufficient records to document that the requirements of this Agreement are being properly implemented and shall make such records available to DOJ at all reasonable times for inspection and copying. In addition, NJDOC and Edna Mahan shall maintain and submit upon request records or other documents to verify that they have taken such actions as described in their Status Reports (e.g., census summaries, policies, procedures, protocols, training materials and incident reports) and will also provide to DOJ all documents reasonably requested by DOJ.

### **Monitor's Measure of Compliance re NJDOC and EMCF Reporting Requirements ¶ 104:**

¶ 104 – Status Report submitted to the DOJ and Monitor on, or before, the following dates:

- February 24, 2022
- August 24, 2022
- February 24, 2023
- August 24, 2023
- February 24, 2024
- August 24, 2025

And other dates, as needed, until the Agreement is terminated.

**Steps taken by NJDOC and EMCF towards implementation NJDOC and EMCF Reporting Requirements ¶ 104:**

**8/24/25 Status Report**

NJDOC provided its eighth status report to DOJ and the Monitor on August 24, 2025.

**Monitor's Finding of Compliance re NJDOC and EMCF Reporting Requirements ¶ 104:**

**☒ Substantial Compliance**

☐ Partial Compliance

☐ Non-compliance

☐ N/A not required until [ date ]

☐ N/A monitor granted an extension until [ date ]

**Monitor's Discussion re NJDOC and EMCF Reporting Requirements ¶ 104:**

On August 24, 2025, the Monitor and DOJ received a Status Report from NJDOC. Part of the status report described NJDOC and Edna Mahan's actions during the reporting period to implement the Settlement Agreement. The descriptions, which referenced the Agreement paragraphs being implemented, are included in this monitoring report titled, "NJDOC Discussion: Steps taken by NJDOC and EMCF towards implementation. Additionally, the Status Report also summarized activities NJDOC and Edna Mahan have taken to improve conditions (including, but not limited to, sexual safety) at the facility.

**Recommendations re NJDOC and EMCF Reporting Requirements ¶ 104:**

Continue to provide to the Monitor and DOJ a semi-annual Status Report until the Agreement is terminated.

¶ 109. Within 72 hours of an incident or report, NJDOC shall notify DOJ upon any incident or allegations of sexual abuse or retaliation and/or injury requiring emergency medical attention related to an allegation sexual abuse. With this notification, NJDOC and Edna Mahan shall forward to DOJ any related incident reports and medical and/or mental health reports and investigations as they become available.

Requirements:

**Monitor's Measure of Compliance re DOJ's Right of Access ¶ 109:**

Notices of all incidents or allegations of sexual abuse or retaliation submitted to the Monitor and DOJ within 72 hours of the incident or report. Notices should include, but not be limited to:

- Name of person making report
- Name of alleged victim
- Name of staff involved in allegation
- Incident number
- Date of incident
- Date of notification
- Status of housing assignment for prisoner
- Restrictions of assignments for staff (if any)
- Any other preliminary reports/information available

**Steps taken by NJDOC and EMCF towards implementation DOJ's Right of Access ¶ 109:**

**8/24/25 Status Report**

In the current reporting period, a total of 52 allegations pertaining to this section have either been investigated by SID or are currently under investigation. Among these 52 cases, 12 cases have been officially closed, 1 is awaiting administrative investigation, and 39 are currently undergoing review by the respective County Prosecutor's Office. Among the cases that have been closed, 5 were determined to be unfounded, 7 were determined to be unsubstantiated and 0 were substantiated.

**Monitor's Finding of Compliance re DOJ's Right of Access ¶ 109:**

**[X] Substantial Compliance**

- ☐ Partial Compliance
- ☐ Non-compliance
- ☐ N/A not required until [ date ]
- ☐ N/A monitor granted an extension until [ date ]

**Monitor's Discussion re DOJ's Right of Access ¶ 109:**

Since August 24, 2021, with rare exception, NJDOC has notified DOJ and the Monitor any incident or allegations of sexual abuse or retaliation and/or injury requiring emergency medical attention related to an allegation sexual abuse within 72 hours. At a minimum, the notices have included:

- The name of person making report
- The name of alleged victim
- The name of staff involved in allegation
- The incident number
- The date of incident
- The date of notification to Edna Mahan and NJDOC
- The status of housing assignment for the alleged victim
- Restrictions of assignments for staff (if any)
- Any other preliminary reports/information available

NJDOC has also forwarded to DOJ and the Monitor any related incident reports and medical and/or mental health reports and completed investigations as they become available. Additionally, NJDOC and Edna Mahan staff maintain, and have submitted a copy, to DOJ and the Monitor, a spreadsheet documenting all allegations of sexual abuse, sexual harassment, retaliation for reporting, and/or staff neglect or violation of responsibilities that may have contributed to these incidents, as well as the information noted above. NJDOC, DOJ, and the Monitor continue to meet monthly to review this spreadsheet and discuss any noteworthy cases.

**Recommendations re DOJ's Right of Access ¶ 109:**

Continue to notify DOJ and the Monitor within 72 hours of an incident or report of allegations of sexual abuse or retaliation and/or injury requiring emergency medical attention related to an allegation sexual abuse. Continue to forward to DOJ and the Monitor any related incident reports and medical and/or mental health reports and investigations as they become available.

¶ 110. NJDOC shall provide to the Monitor and to DOJ copies of or applicable portions of any formal reports or recommendations from the Office of the Corrections Ombudsperson or the Commission to Protect New Jersey Prisoners from Sexual Assault and Sexual Misconduct concerning efforts to establish or revise Edna Mahan or statewide policies and procedures, including reporting and data collections systems, related to sexual abuse or sexual harassment of prisoners.

Requirements:

This paragraph does not include ordinary course referrals and related documentation

¶ 107. DOJ and its attorneys, consultants, and agents shall have access to Edna Mahan, Edna Mahan prisoners, NJDOC and Edna Mahan staff and documents as is reasonably necessary to evaluate compliance with this Agreement. DOJ will provide written notice prior to any site visits. DOJ may participate in any compliance visits by the Monitor.

¶ 108. Access is not intended, and will not be construed, as a waiver, in litigation with third parties of any applicable statutory or common law privilege associated with information disclosed to DOJ under this Agreement.

**Monitor's Measure of Compliance re DOJ's Right of Access ¶ 110:**

- Copies provided to the Monitor and DOJ of applicable portions of any formal reports or recommendations from the Office of the Corrections Ombudsperson concerning efforts to establish or revise Edna Mahan or statewide policies or procedures, related to sexual abuse or sexual harassment of prisoners.
- Copies provided to the Monitor and DOJ of applicable portions of any formal reports or recommendations from the Commission to Protect New Jersey Prisoners from Sexual Assault and Sexual Misconduct concerning efforts to establish or revise Edna Mahan or statewide policies or procedures, related to sexual abuse or sexual harassment of prisoners.
- Interviews with staff from the Office of the Corrections Ombudsperson
- Interviews with members of the Commission to Protect New Jersey Prisoners from Sexual Assault and Sexual Misconduct
- Meeting minutes from the Commission to Protect New Jersey Prisoners from Sexual Assault and Sexual Misconduct, as available

**Steps taken by NJDOC and EMCF towards implementation DOJ's Right of Access ¶ 110:**

**8/24/25 Status Report**

There were no formal reports or recommendations during the reporting period from the Office of the Corrections Ombudsperson or the Commission specific to the protection of New Jersey prisoners from sexual assault and sexual misconduct.

**Monitor's Finding of Compliance re DOJ's Right of Access ¶ 110:**

- ☐ Substantial Compliance
- ☐ Partial Compliance
- ☐ Non-compliance

**[X] N/A not required until the Corrections Ombudsperson's Office makes any recommendations related to sexual abuse or sexual harassment of incarcerated persons.**

☐ N/A monitor granted an extension until [ date ]

**Monitor's Discussion re DOJ's Right of Access ¶ 110:**

On September 4, 2025, the Monitor spoke with Corrections Ombudsperson's staff Roshunda Simmons and Mary Ann Conte, who reported that the Ombudsperson's office did not author any reports regarding EMCF during this reporting period. Additionally, as of February 24, 2022, there is no longer a "Commission to Protect New Jersey Inmates from Sexual Assault and Sexual Misconduct."

**Recommendations re DOJ's Right of Access ¶ 110:**

Provide a copy to the Monitor and DOJ whenever Corrections Ombudsperson writes a formal report, or makes any recommendations related to sexual abuse or sexual harassment of incarcerated persons.



¶111 Within ninety days of the Effective Date and for the duration of the Agreement, NJDOC will engage the Edna Mahan Board of Trustees to identify goals, concerns, and recommendations regarding implementation of this Agreement. NJDOC shall conduct periodic, but at least semi-annual, public meetings. Additionally, NJDOC and Edna Mahan shall conduct periodic, but at least semi-annual, meetings with available Edna Mahan staff to gather feedback from staff on events, accomplishments, and setbacks during the previous period.

**Requirements:**

Public meetings with stakeholders should include former Edna Mahan prisoners, prisoner advocates, and family members of current Edna Mahan prisoners.

The meetings shall serve to provide stakeholders and the public with an update on events, accomplishments, and setbacks during the previous period, and to respond to stakeholders' questions and requests for information related to Edna Mahan. Stakeholders will also be afforded the opportunity to ask questions and make proposals.

Nothing in this Paragraph is intended to create any enforcement rights or standing other than those of the Parties under this Agreement.

¶ 107. DOJ and its attorneys, consultants, and agents shall have access to Edna Mahan, Edna Mahan prisoners, NJDOC and Edna Mahan staff and documents as is reasonably necessary to evaluate compliance with this Agreement. DOJ will provide written notice prior to any site visits. DOJ may participate in any compliance visits by the Monitor.

¶ 108. Access is not intended, and will not be construed, as a waiver, in litigation with third parties of any applicable statutory or common law privilege associated with information disclosed to DOJ under this Agreement.

**Monitor's Measure of Compliance re DOJ's Right of Access ¶ 111:**

- Agendas for Edna Mahan Board of Trustees meetings
- Minutes from Edna Mahan Board of Trustees meetings
- Notification of to the Monitor and DOJ of appointments of new Edna Mahan Board of Trustees members
- Dates and agendas of Public Stakeholder meetings, to include, but not be limited to the following agenda items:
  - a. Updates on events, accomplishments, and setbacks
  - b. Opportunity for questions and answers

- c. Opportunity for requests for information
- d. Opportunity for stakeholders to make proposals
- Minutes from Public Stakeholder meetings, to include names of all attendees and summary of meeting
- Dates and agendas of meetings with Edna Mahan staff, to include, but not be limited to the following agenda item:
  - a. Gather feedback on events, accomplishments, and setbacks
- Minutes from meetings with Edna Mahan staff, to include names of all attendees and summary of meeting
- Interviews with Edna Mahan Board of Trustees members
- Interviews with Stakeholders
- Interviews/Focus Groups with Edna Mahan staff during on-site visits

**Steps taken by NJDOC and EMCF towards implementation DOJ's Right of Access ¶ 111:**

**8/24/25 Status Report**

NJDOC will host the eighth EMCF Public Meeting on September 19, 2025, via virtual format. Presenters will be together at the NJDOC Jones Farm Conference Center in Ewing, NJ. It is anticipated that Monitor Jane Parnell will facilitate the event, which is expected to last approximately 90 minutes in length, with 30 minutes dedicated to providing participants with the opportunity to ask questions and submit recommendations and proposals. The Public Meeting information and registration will be put on the NJDOC website and open to all who wish to attend. EMCF held a Staff Focus Group on August 8, 2025, prior to the Public Meeting, to allow department heads to provide feedback on events, accomplishments, and setbacks during the period.

An announcement will be formally added to the NJDOC website on September 7, 2025 advising of the upcoming September 19, 2025 Public Meeting. A JPAY notification will be sent to the EMCF incarcerated population advising of the meeting date and time and to encourage families' attendance.

The meeting schedule and agenda will be provided to the Monitor and DOJ. In addition to the public meeting minutes, NJDOC will provide minutes from the staff feedback session(s).

There have been no changes to the EMF BOT members during the reporting period. BOT members continue to meet with both EMCF IPs and staff regularly to gain perspective on facility issues and seek clarity and resolution on behalf of the population, as necessary.

**Monitor's Finding of Compliance re DOJ's Right of Access ¶ 111:**

**[X] Substantial Compliance**

- ☐ Partial Compliance
- ☐ Non-compliance
- ☐ N/A not required until [ date ]
- ☐ N/A monitor granted an extension until [ date ]

**Monitor's Discussion re DOJ's Right of Access ¶ 111:**

During this reporting period, NJDOC has continued to hold monthly meetings with the Edna Mahan Board of Trustees (BOT). The Monitor met with five members of the BOT, all of whom expressed satisfaction with the board's progress and effectiveness. Members reported having open lines of communication with Commissioner Kuhn, Assistant Commissioner Tome, and Administrator Fusaro, and noted that they receive consistent informational updates. They described the transition from the previous Administrator to Administrator Fusaro as seamless, highlighting that he is well respected by both staff and the incarcerated population. BOT members emphasized that Administrator Fusaro is transparent about what he can and cannot do, highly responsive to their requests, and diligent in providing timely follow-up. Overall, the BOT expressed appreciation for the opportunity to represent the voices of the incarcerated population at EMCF and pride in serving on such a productive and collaborative body.

On March 14, 2025, NJDOC held its seventh public meeting with stakeholders. Eighty-one people attended this virtual meeting. The attendees included, but were not limited to, advocates, family/friends of incarcerated persons, legislators, staff, contractors, and Board of Trustees members. The agenda of this meeting included an update on events, accomplishments, and setbacks at Edna Mahan and NJDOC, a question-and-answer period, and an opportunity for stakeholders to make suggestions/proposals. Eighty-one people attended this virtual meeting. The seventh stakeholders meeting was held on September 19, 2025, outside this reporting period.

A Staff Advisory meeting was held on August 8, 2025. The Monitor and the DOJ received copies of the meeting minutes. The previous Staff Advisory meeting was held on February 13, 2025, thus meeting the requirement for semi-annual meetings.

**Recommendations re DOJ's Right of Access ¶ 111:**

- Continue to conduct Board of Trustees meetings.
- Continue to hold semi-annual public meetings with stakeholders.
- Continue to conduct semi-annual meetings with available Edna Mahan staff.