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Pathway Programs Annual PREA Report

In compliance with the Prison Rape Elimination Act, Pathway has adopted a PREA Policy that aims to provide guidelines and procedures that reduce the risk of sexual abuse and sexual harassment at all Pathway owned and operated facilities. It is a written plan to coordinate actions taken in response to an incident of sexual abuse among staff, clients/residents, volunteers, contractors, and facility leadership. Pathway is committed to a zero-tolerance standard for sexual abuse and sexual harassment either by staff or by another client/resident.

The purpose of this report is to gather data that will assist in reducing the risk that sexual abuse and/or sexual harassment would occur within Pathway's facilities.

Summary of 2019 reporting data:

Client on Client Incident Type	Number of incidents	Number Substantiated	Number Unsubstantiated	Number Unfounded
Non-Consensual Sexual Act	0	0	0	0
Abusive Sexual Contact	5	0	4	1
Sexual Harassment	4	1	2	1
Consensual Sexual Contact	2	0	1	1

Staff on Client Incident Type	Number of Incidents	Number Substantiated	Number Unsubstantiated	Number Unfounded
Staff Sexual Misconduct	1	0	0	1
Staff Sexual Harassment	0	0	0	0

Frequency and Severity of sexual abuse/sexual harassment and trends:

There were 12 reported incidents during the year. Six incidents occurred on the male campus and six on the female campus. Of the incidents occurring on the male campus, seven incidents appear to be the result of poor boundaries/horseplay or standing too close with accidental touching. Two incidents of alleged sexual harassment were unfounded, and the alleged victims appeared to be making an attempt to get a peer in trouble by recruiting others to lie for them. There were two incidents of alleged consensual sexual contact that were unfounded and one alleged incident of abusive sexual contact involving inappropriate touching that was unsubstantiated and could not be verified through reports

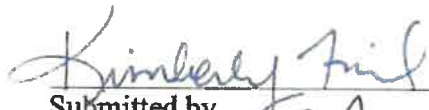
of staff, peers, or review of video footage. Lastly, the incident of alleged staff sexual misconduct appears to be related to a client not getting the attention they wanted from a staff member. The alleged victim indicated there was no misconduct, which was verified through video footage and interviews with all other clients on campus.

Deficiencies identified:

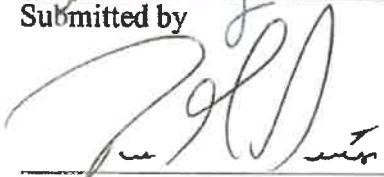
There were no physical barriers identified that allowed abuse to occur. No recommendations were made for changes to the physical plant or addition of security cameras or staffing.

Corrective Action Plan:

No corrective action plan was identified as a need for this review period.


Submitted by

11/15/2020
Date


Reviewed by

1-15-2020
Date