

# PREA Facility Audit Report: Final

**Name of Facility:** Farmington Correctional Center

**Facility Type:** Prison / Jail

**Date Interim Report Submitted:** NA

**Date Final Report Submitted:** 07/27/2023

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input type="checkbox"/>
<b>Auditor Full Name as Signed:</b> Matthew Taylor	<b>Date of Signature:</b> 07/27/ 2023

AUDITOR INFORMATION	
<b>Auditor name:</b>	Taylor, Matthew
<b>Email:</b>	mtaylor@azadc.gov
<b>Start Date of On-Site Audit:</b>	06/12/2023
<b>End Date of On-Site Audit:</b>	06/14/2023

FACILITY INFORMATION	
<b>Facility name:</b>	Farmington Correctional Center
<b>Facility physical address:</b>	1012 West Columbia Street, Farmington, Missouri - 63640
<b>Facility mailing address:</b>	

<b>Primary Contact</b>	
<b>Name:</b>	Travis Crews
<b>Email Address:</b>	travis.crews@doc.mo.gov
<b>Telephone Number:</b>	5732187100

<b>Warden/Jail Administrator/Sheriff/Director</b>	
<b>Name:</b>	Teri Vandergriff
<b>Email Address:</b>	Teri.Vandergriff@doc.mo.gov
<b>Telephone Number:</b>	5732187100

<b>Facility PREA Compliance Manager</b>	
<b>Name:</b>	Travis Crews
<b>Email Address:</b>	travis.crews@doc.mo.gov
<b>Telephone Number:</b>	O: 573-218-7100

<b>Facility Health Service Administrator On-site</b>	
<b>Name:</b>	Lisa Ivy
<b>Email Address:</b>	livy@TeamCenturion.com
<b>Telephone Number:</b>	5732187100

<b>Facility Characteristics</b>	
<b>Designed facility capacity:</b>	2532
<b>Current population of facility:</b>	2451
<b>Average daily population for the past 12 months:</b>	2210
<b>Has the facility been over capacity at any point in the past 12 months?</b>	No

<b>Which population(s) does the facility hold?</b>	Males
<b>Age range of population:</b>	17-87
<b>Facility security levels/inmate custody levels:</b>	Medium
<b>Does the facility hold youthful inmates?</b>	Yes
<b>Number of staff currently employed at the facility who may have contact with inmates:</b>	660
<b>Number of individual contractors who have contact with inmates, currently authorized to enter the facility:</b>	111
<b>Number of volunteers who have contact with inmates, currently authorized to enter the facility:</b>	94

#### AGENCY INFORMATION

<b>Name of agency:</b>	Missouri Department of Corrections
<b>Governing authority or parent agency (if applicable):</b>	
<b>Physical Address:</b>	2729 Plaza Drive, Jefferson City, Missouri - 65109
<b>Mailing Address:</b>	P.O. Box 236, Jefferson City, Missouri - 65102
<b>Telephone number:</b>	5737512389

#### Agency Chief Executive Officer Information:

<b>Name:</b>	Anne L. Precythe
<b>Email Address:</b>	Anne.Precythe@doc.mo.gov
<b>Telephone Number:</b>	573-526-6607

#### Agency-Wide PREA Coordinator Information

<b>Name:</b>	Darren Snellen	<b>Email Address:</b>	darren.snellen@doc.mo.gov
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## Facility AUDIT FINDINGS

### Summary of Audit Findings

The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.

Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.

#### Number of standards exceeded:

0

#### Number of standards met:

45

#### Number of standards not met:

0

## POST-AUDIT REPORTING INFORMATION

### GENERAL AUDIT INFORMATION

#### On-site Audit Dates

1. Start date of the onsite portion of the audit:	2023-06-12
2. End date of the onsite portion of the audit:	2023-06-14

#### Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	The auditor made contact with Just Detention International (JDI) through the official public website. JDI responded to my request for information and did not report any concerning information related to relevant conditions in the facility.

### AUDITED FACILITY INFORMATION

14. Designated facility capacity:	2532
15. Average daily population for the past 12 months:	2210
16. Number of inmate/resident/detainee housing units:	12
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

**Audited Facility Population Characteristics on Day One of the Onsite Portion of the Audit****Inmates/Residents/Detainees Population Characteristics on Day One of the Onsite Portion of the Audit**

<b>36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:</b>	2403
<b>37. Enter the total number of youthful inmates or youthful/juvenile detainees in the facility as of the first day of the onsite portion of the audit:</b>	3
<b>38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:</b>	50
<b>39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:</b>	150
<b>40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:</b>	20
<b>41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:</b>	22

<p><b>43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:</b></p>	<p>20</p>
<p><b>44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:</b></p>	<p>37</p>
<p><b>45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:</b></p>	<p>2</p>
<p><b>46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:</b></p>	<p>0</p>
<p><b>47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:</b></p>	<p>0</p>
<p><b>48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):</b></p>	<p>No text provided.</p>
<p><b>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</b></p>	
<p><b>49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:</b></p>	<p>591</p>

<b>50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</b>	94
<b>51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</b>	71
<b>52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:</b>	No text provided.

## INTERVIEWS

### Inmate/Resident/Detainee Interviews

#### Random Inmate/Resident/Detainee Interviews

<b>53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:</b>	26
<b>54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</b>	<input checked="" type="checkbox"/> Age <input checked="" type="checkbox"/> Race <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input checked="" type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> None



<b>55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</b>	The facility provided the auditor with a roster of all inmates at the facility. The auditor chose inmates based on age, race, ethnicity, length of time at the facility and housing assignment.
<b>56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</b>	No text provided.
<b>Targeted Inmate/Resident/Detainee Interviews</b>	
<b>58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</b>	17
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	
<b>59. Enter the total number of interviews conducted with youthful inmates or youthful/juvenile detainees using the "Youthful Inmates" protocol:</b>	3
<b>60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:</b>	1

<b>61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:</b>	1
<b>62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:</b>	1
<b>63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</b>	4
<b>64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</b>	1
<b>65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</b>	2
<b>66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</b>	4

<p><b>67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</b></p>	<p>1</p>
<p><b>68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</b></p>	<p>0</p>
<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p><b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p>	<p>The auditor was provided rosters of all inmates confined at the facility. Additional documentation was provided by the facility which illustrated there were no inmates at the facility that disclosed prior sexual victimization during the risk screening. The facility also provided a written statement, authored by the PREA compliance manager, indicating this population did not exist at the facility during the onsite portion of the audit.</p>
<p><b>69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:</b></p>	<p>0</p>

<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p><b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p>	<p>As a matter of policy and practice, the facility does not place inmates in segregated housing/isolation for risk of sexual victimization. This was supported by inmate rosters and documentation provided by the facility. The auditor also had informal conversations with staff and inmates which also supported this claim.</p>
<p><b>70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</b></p>	<p>No text provided.</p>
<p><b>Staff, Volunteer, and Contractor Interviews</b></p>	
<p><b>Random Staff Interviews</b></p>	
<p><b>71. Enter the total number of RANDOM STAFF who were interviewed:</b></p>	<p>13</p>
<p><b>72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</b></p>	<p><input checked="" type="checkbox"/> Length of tenure in the facility</p> <p><input checked="" type="checkbox"/> Shift assignment</p> <p><input type="checkbox"/> Work assignment</p> <p><input checked="" type="checkbox"/> Rank (or equivalent)</p> <p><input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken)</p> <p><input type="checkbox"/> None</p>

<p><b>73. Were you able to conduct the minimum number of RANDOM STAFF interviews?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</b></p>	<p>No text provided.</p>
<p><b>Specialized Staff, Volunteers, and Contractor Interviews</b></p>	
<p>Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.</p>	
<p><b>75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):</b></p>	<p>19</p>
<p><b>76. Were you able to interview the Agency Head?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>78. Were you able to interview the PREA Coordinator?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>79. Were you able to interview the PREA Compliance Manager?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)</p>

**80. Select which SPECIALIZED STAFF roles were interviewed as part of this audit from the list below: (select all that apply)**

- Agency contract administrator
- Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment
- Line staff who supervise youthful inmates (if applicable)
- Education and program staff who work with youthful inmates (if applicable)
- Medical staff
- Mental health staff
- Non-medical staff involved in cross-gender strip or visual searches
- Administrative (human resources) staff
- Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff
- Investigative staff responsible for conducting administrative investigations
- Investigative staff responsible for conducting criminal investigations
- Staff who perform screening for risk of victimization and abusiveness
- Staff who supervise inmates in segregated housing/residents in isolation
- Staff on the sexual abuse incident review team
- Designated staff member charged with monitoring retaliation
- First responders, both security and non-security staff
- Intake staff

	<input type="checkbox"/> Other
<b>81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>a. Enter the total number of VOLUNTEERS who were interviewed:</b>	1
<b>b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)</b>	<input checked="" type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input checked="" type="checkbox"/> Religious <input type="checkbox"/> Other
<b>82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>a. Enter the total number of CONTRACTORS who were interviewed:</b>	4
<b>b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)</b>	<input type="checkbox"/> Security/detention <input type="checkbox"/> Education/programming <input checked="" type="checkbox"/> Medical/dental <input type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input type="checkbox"/> Other
<b>83. Provide any additional comments regarding selecting or interviewing specialized staff.</b>	The main contract staff at the facility are medical and mental health practitioners.

## SITE REVIEW AND DOCUMENTATION SAMPLING

### Site Review

PREA Standard 115.401 (h) states, "The auditor shall have access to, and shall observe, all areas of the audited facilities." In order to meet the requirements in this Standard, the site review portion of the onsite audit must include a thorough examination of the entire facility. The site review is not a casual tour of the facility. It is an active, inquiring process that includes talking with staff and inmates to determine whether, and the extent to which, the audited facility's practices demonstrate compliance with the Standards. Note: As you are conducting the site review, you must document your tests of critical functions, important information gathered through observations, and any issues identified with facility practices. The information you collect through the site review is a crucial part of the evidence you will analyze as part of your compliance determinations and will be needed to complete your audit report, including the Post-Audit Reporting Information.

<b>84. Did you have access to all areas of the facility?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>Was the site review an active, inquiring process that included the following:</b>	
<b>85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>88. Informal conversations with staff during the site review (encouraged, not required)?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No



<p><b>89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).</b></p>	<p>No text provided.</p>
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**Documentation Sampling**

Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.

<p><b>90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?</b></p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
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<p><b>91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).</b></p>	<p>No text provided.</p>
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**SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY**

**Sexual Abuse and Sexual Harassment Allegations and Investigations Overview**

Remember the number of allegations should be based on a review of all sources of allegations (e.g., hotline, third-party, grievances) and should not be based solely on the number of investigations conducted. Note: For question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, or detainee sexual abuse allegations and investigations, as applicable to the facility type being audited.

**92. Total number of SEXUAL ABUSE allegations and investigations overview during the 12 months preceding the audit, by incident type:**

	<b># of sexual abuse allegations</b>	<b># of criminal investigations</b>	<b># of administrative investigations</b>	<b># of allegations that had both criminal and administrative investigations</b>
<b>Inmate-on-inmate sexual abuse</b>	20	0	20	0
<b>Staff-on-inmate sexual abuse</b>	9	0	9	0
<b>Total</b>	29	0	29	0

**93. Total number of SEXUAL HARASSMENT allegations and investigations overview during the 12 months preceding the audit, by incident type:**

	<b># of sexual harassment allegations</b>	<b># of criminal investigations</b>	<b># of administrative investigations</b>	<b># of allegations that had both criminal and administrative investigations</b>
<b>Inmate-on-inmate sexual harassment</b>	13	0	13	0
<b>Staff-on-inmate sexual harassment</b>	0	0	0	0
<b>Total</b>	13	0	13	0

## Sexual Abuse and Sexual Harassment Investigation Outcomes

### Sexual Abuse Investigation Outcomes

Note: these counts should reflect where the investigation is currently (i.e., if a criminal investigation was referred for prosecution and resulted in a conviction, that investigation outcome should only appear in the count for “convicted.”) Do not double count. Additionally, for question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, and detainee sexual abuse investigation files, as applicable to the facility type being audited.

#### 94. Criminal SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
<b>Inmate-on-inmate sexual abuse</b>	0	0	0	0	0
<b>Staff-on-inmate sexual abuse</b>	0	0	0	0	0
<b>Total</b>	0	0	0	0	0

#### 95. Administrative SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:

	Ongoing	Unfounded	Unsubstantiated	Substantiated
<b>Inmate-on-inmate sexual abuse</b>	10	1	9	0
<b>Staff-on-inmate sexual abuse</b>	2	1	2	4
<b>Total</b>	12	2	10	4

### Sexual Harassment Investigation Outcomes

Note: these counts should reflect where the investigation is currently. Do not double count. Additionally, for question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, and detainee sexual harassment investigation files, as applicable to the facility type being audited.

**96. Criminal SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:**

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
<b>Inmate-on-inmate sexual harassment</b>	0	0	0	0	0
<b>Staff-on-inmate sexual harassment</b>	0	0	0	0	0
<b>Total</b>	0	0	0	0	0

**97. Administrative SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:**

	Ongoing	Unfounded	Unsubstantiated	Substantiated
<b>Inmate-on-inmate sexual harassment</b>	5	4	3	1
<b>Staff-on-inmate sexual harassment</b>	0	0	0	0
<b>Total</b>	5	4	3	1

**Sexual Abuse and Sexual Harassment Investigation Files Selected for Review**

**Sexual Abuse Investigation Files Selected for Review**

<b>98. Enter the total number of SEXUAL ABUSE investigation files reviewed/ sampled:</b>	10
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<p><b>99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)</p>
<p><b>Inmate-on-inmate sexual abuse investigation files</b></p>	
<p><b>100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b></p>	<p>5</p>
<p><b>101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</b></p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p><b>102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p><b>Staff-on-inmate sexual abuse investigation files</b></p>	
<p><b>103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b></p>	<p>5</p>
<p><b>104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</b></p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>

<p><b>105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>
<p><b>Sexual Harassment Investigation Files Selected for Review</b></p>	
<p><b>106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</b></p>	<p>7</p>
<p><b>107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)</p>
<p><b>Inmate-on-inmate sexual harassment investigation files</b></p>	
<p><b>108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</b></p>	<p>7</p>
<p><b>109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</b></p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
<p><b>110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>

<b>Staff-on-inmate sexual harassment investigation files</b>	
<b>111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</b>	0
<b>112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?</b>	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
<b>113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</b>	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
<b>114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.</b>	No text provided.
<b>SUPPORT STAFF INFORMATION</b>	
<b>DOJ-certified PREA Auditors Support Staff</b>	
<b>115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No

**Non-certified Support Staff**

<p><b>116. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.</b></p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p>
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**AUDITING ARRANGEMENTS AND COMPENSATION**

<p><b>121. Who paid you to conduct this audit?</b></p>	<p><input type="radio"/> The audited facility or its parent agency</p> <p><input type="radio"/> My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)</p> <p><input checked="" type="radio"/> A third-party auditing entity (e.g., accreditation body, consulting firm)</p> <p><input type="radio"/> Other</p>
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<p><b>Identify the name of the third-party auditing entity</b></p>	<p>PREA Auditors of America</p>
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<b>Standards</b>	
<b>Auditor Overall Determination Definitions</b>	
<ul style="list-style-type: none"> <li>• Exceeds Standard (Substantially exceeds requirement of standard)</li> <li>• Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period)</li> <li>• Does Not Meet Standard (requires corrective actions)</li> </ul>	
<b>Auditor Discussion Instructions</b>	
<p>Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.</p>	

<b>115.11</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Department policy D1-8.13 outlines the agency’s zero tolerance towards all forms of sexual abuse and sexual harassment for all facilities it directly operates. Policy D1-8.13 outlines how the agency implements its approach to preventing, detecting and responding to incidents of sexual abuse and sexual harassment. The policy includes definitions of prohibited behaviors regarding sexual abuse and sexual harassment and the sanctions for those who are found to have participated in prohibited behaviors. The policy includes a comprehensive description of the strategies and responses to reduce and prevent sexual abuse and sexual harassment of inmates.</p> <p>The Missouri Department of Corrections employs an upper-level agency-wide PREA coordinator who has sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards. The PREA coordinator falls under the agency’s Office of the Director and Office of Professional Standards. A review of the agency’s organizational chart illustrated this hierarchy. An interview with the agency PREA Coordinator Darren Snellen also confirmed his position and authority.</p>

	<p>Mr. Snellen also stated “I am in regular contact with PREA site coordinators providing them guidance and training. Each year I conduct mock audits of the facilities that are going to be audited and provide them with guidance and feedback. Additionally, each year we provide the site coordinators with a day training in regards to being compliant with PREA standard, our policies and procedures. Anytime an issue is brought to light during an investigation I contact the warden and site coordinator to address and correct the issue.”</p> <p>Farmington Correctional Center employs a designated PREA compliance manager. The PREA compliance manager for the facility at the time of the audit was Deputy Warden Travis Crews. Deputy Warden Crews reported he had sufficient time and authority to coordinate the facility’s efforts to comply with the PREA standards. The PREA compliance manager for the facility reports directly to the Warden of the institution.</p> <p>Based on a review of the PAQ, provided policies, procedures, documents, site review observations and interviews conducted with staff and inmates, the facility is substantially compliant with this standard and all of its provisions.</p>
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<b>115.12</b>	<b>Contracting with other entities for the confinement of inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The Missouri Department of Corrections does not currently enter into contracts for the confinement of inmates in their facilities. This information was illustrated in the pre-audit questionnaire (PAQ) and confirmed through an interview with the agency’s contract administrator.</p> <p>Based on a review of the PAQ, provided policies, procedures, documents, site review observations and interviews conducted with staff and inmates, the facility is substantially compliant with this standard and all of its provisions.</p>

<b>115.13</b>	<b>Supervision and monitoring</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The facility has developed and documented its best efforts to comply on a regular basis with a staffing plan that provides adequate levels of staffing and, where applicable, video monitoring, to protect inmates against abuse. The facility provided a copy of the staffing level spreadsheet which outlined all three shifts’ normal staffing patterns and numbers as well as a critical staffing chart. The facility indicated in the</p>

PAQ the average number of daily inmates which the staffing plan was predicated was 2532.

During the site review process the auditor actively observed the number of staff, contractors and volunteers that were visually present. All areas of the facility were observed by the auditor which included inmate housing units, segregation areas, work locations, education and programming locations. The auditor carefully observed staff line of sight and any potential blind spots throughout the facility. During the site review, video monitoring was carefully observed and reviewed to determine if the use of the technology augmented and supported staff supervision. During the site review the auditor had informal conversations with staff regarding supervision practices.

Informal conversations were also conducted with inmates at the facility regarding staffing presence and how staffing impacts access to programming, education and daily activities.

The facility reported through the PAQ there have not been any deviations to the staffing plan within the last 12 months. However, it was reported that if there were deviations to the staffing plan, they would be documented.

The auditor interviewed the Warden of the facility who stated that adequate staffing levels to protect inmates against sexual abuse is always considered in the staffing plan. She indicated they focus on inmate gathering locations, work locations and housing units. She also reported video monitoring technology is part of the staffing plan which is documented. She reported if there were any deviations from the staffing plan they would be documented with explanations.

A PREA staffing plan evaluation dated January 24, 2023 was provided by the facility.

This evaluation illustrated that at least once every year the facility, in collaboration with the PREA coordinator, reviews the staffing plan to see whether adjustments are needed to the staffing plan, the deployment of monitoring technology and allocation of resources to commit to the staffing plan to ensure compliance with the plan. An interview with the agency PREA coordinator also substantiated his involvement with the staffing plan evaluation at the facility.

Policy D1-8.13, provided by the facility illustrates a practice of having intermediate and higher-level supervisors conduct and document unannounced rounds. Policy and post orders illustrate that rounds are conducted on all three shifts at the facility.

Additionally, policy prohibits staff from alerting other staff members that supervisory rounds are occurring.

The auditor conducted interviews with intermediate and higher-level staff at the facility who confirmed these practices on all three shifts and that they were unannounced.

The facility provided documented examples of unannounced rounds occurring on all three shifts at the facility.

Based on a review of the PAQ, provided policies, procedures, documents, site review observations and interviews conducted with staff and inmates, the facility is substantially compliant with this standard and all of its provisions.

<b>115.14</b>	<b>Youthful inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Agency policy D1-8.13 dictates youthful inmates shall not be placed in a housing unit in which the youthful inmate will have sight, sound, or physical contact with any adult inmate through use of a shared dayroom or other common space, shower area, or sleeping quarters. Policy dictates the facility makes its best efforts to avoid placing youthful inmates in isolation to comply with this provision. Absent exigent circumstances, agencies shall not deny youthful inmates daily large-muscle exercise and any legally required special education services. Youthful inmates shall also have access to other programs and work opportunities to the extent possible.</p> <p>In the PAQ the facility reported they have a housing unit which youthful inmates are assigned that provide sight and sound separation between youthful and adult offenders in dayrooms, common areas, showers, and sleeping quarters. The PAQ also reported they do not place youthful inmates in the same housing units as adults. The PAQ indicated the facility maintains sight, sound, and physical separation between youthful inmates and adult inmates in areas outside housing units. The PAQ reported there have been zero youthful offenders placed in isolation in order to separate them from adult inmates</p> <p>During the site review the auditor observed the single housing unit dedicated to housing youthful inmates at the facility. The auditor observed a single high fence surrounding the housing unit. The housing unit was two stories but the fence surrounding the building was higher than the building itself. The auditor was unable to see or hear adult inmates while inside or outside the housing unit. It should be noted the auditor visited this housing unit twice during the site review and both times there was clear and obvious sight and sound separation. The auditor observed there were no youthful offenders held in isolation that were prohibited from exercise, education or program opportunities.</p> <p>The auditor interviewed 2 staff members who supervise youthful offenders. Both staff members indicated sight and sound separation always occurred with youthful offenders and they were not aware of any instances where youthful offenders would have contact with adult inmates at the facility. One of the staff members reported that if they needed to take a youthful offender to medical, on the other side of the yard, that only occurred during count when the yard was locked down and they were always directly supervised by a security staff member.</p> <p>The auditor interviewed 3 youthful offenders during the onsite portion of the audit. All youthful offenders reported they never had any contact with adult inmates and always had sight and sound separation.</p> <p>Based on a review of the PAQ, provided policies, procedures, documents, site review observations and interviews conducted with staff and inmates, the facility is substantially compliant with this standard and all of its provisions.</p>

<b>115.15</b>	<b>Limits to cross-gender viewing and searches</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Agency policy D1-8.13 prohibits cross-gender strip searches or cross-gender visual body cavity searches except in exigent circumstances or when performed by medical practitioners. Agency policy requires that all cross-gender strip searches and cross-gender visual body cavity searches be documented. This policy dictates the agency has procedures in place to enable inmates to shower, perform bodily functions, and change clothing without non-medical 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, including viewing via video camera. Policy also requires staff of the opposite gender to announce their presence when entering a housing unit. This policy prohibits staff from searching or physically examining a transgender or intersex inmate for the sole purpose of determining the inmate’s genital status. The facility reported in the PAQ that have not conducted any such searches in the last 12 months.</p> <p>The facility reported through the PAQ that they do not conduct cross-gender strip or cross-gender visual body cavity searches of inmates. The facility also reported in the PAQ in the past 12 months they have conducted zero cross-gender strip or cross-gender visual body cavity searches of inmates.</p> <p>During the site review process, the auditor visually observed areas within the facility where staff conducted strip searches of inmates. The auditor observed designated strip search areas allowed for privacy either through barriers or privacy screens to prevent potential cross-gender viewing. The auditor also had informal conversations with random security staff who indicated staff of the opposite gender do no conduct these types of searches.</p> <p>The facility reported through the PAQ that no female inmates are housed at the facility. The auditor verified this information through facility documentation and rosters, conversations with staff and inmates and direct observation.</p> <p>During the site review process, the auditor observed all housing units at the facility and areas where inmates would have opportunity to shower, use the toilet, or change their clothes. The facility did have housing units that were multi-tiered but direct observation of those areas did not indicate cross-gender viewing was apparent or problematic. Video monitoring technology was reviewed by the auditor and no camera footage observed indicated inmates could be seen in a state of undress, using the shower or toilet by staff of the opposite gender. The auditor observed the facility has implemented verbal announcement over loudspeakers in the housing unit when female staff is working on posts in housing units. Additionally, the facility has a visual sign that is hung in conspicuous areas of the housing unit, alerting inmates of female staff presence.</p> <p>The auditor conducted interviews with random staff throughout the facility.</p>

	<p>Overwhelmingly staff indicated female staff regularly announce their presence prior to entering a housing unit. Staff also indicated they felt inmates had the ability to shower and use the restroom without female staff seeing them in a state of undress.</p> <p>Interviews were also conducted with random inmates throughout the facility. Generally, inmates felt they had privacy when showering and using the restroom because female staff almost never entered the bathroom areas when inmates were utilizing them.</p> <p>The auditor conducted interviews of random staff throughout the facility. No staff interviewed indicated they would ever search a transgender or intersex inmate solely for the purpose of determining the inmate’s genital status. Interviews were also conducted with at least 3 transgender inmates at the facility. All inmates interviewed indicated they did not believe they were ever searched for the sole purpose of determining their genital status.</p> <p>Policy D1-8.13, training logs and Divisional Searches Training Plan were provided by the facility outlining training specific to searches of transgender and intersex inmates in a professional and respectful manner. The PAQ indicated that 100 percent of security staff have completed the required training.</p> <p>The auditor conducted interviews with random staff throughout the facility. All security staff indicated they had received training on how to conduct professional and respectful searches of transgender and intersex inmates.</p> <p>The auditor interviewed 4 transgender inmates during the onsite portion of the audit. No inmates reported they were ever placed in a housing unit specifically for transgender inmates. Additionally, no inmates reported they were ever strip searched for the sole purpose of determining their genital status.</p> <p>Based on a review of the PAQ, provided policies, procedures, documents, site review observations and interviews conducted with staff and inmates, the facility is substantially compliant with this standard and all of its provisions.</p>
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<b>115.16</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>The Department policy D1-8.13 illustrates the facility’s established procedures to provide disabled inmates equal opportunity to participate in and benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment. The facility provided their current contracts for on demand</p>

interpretation services which included sign language. The facility also has established procedures for inmates that are limited English proficient equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. The two most common languages spoken at the facility are English and Spanish. There are staff employed at the facility that are trained to assist with only Spanish-speaking inmates and staff are trained on how to provide these services as evidenced by the provided training logs. The facility provided posters and brochures that are placed in conspicuous locations throughout the facility to assist inmates that are disabled and are limited English proficient.

During the site review the auditor made observations in inmate housing units and tested the availability of services provided by telephone. The auditor was able to test these services in English and Spanish. Additionally, PREA information is also available in multiple formats via the inmate tablets. This information is available in multiple languages. The auditor observed in multiple housing units that written information was not as available and obvious or in a centralized location. The auditor worked directly with the facility and the facility agreed and completed inmate bulletin board installation that included comprehensive PREA education material for all inmates at the facility.

Interviews were conducted with the agency Director. He stated the Department assigns offenders based on their needs. Offenders with a disability would be assigned to an institution that is setup to accommodate them. If the offender has concerns, there is also a policy and process for offenders to request ADA accommodation. He reported the Department also has signs and materials that are available in different languages to ensure those offenders in which English is their second language can be informed of the agency's practices and processes.

The auditor interviewed inmates with disabilities and who were limited English proficient. Overwhelmingly inmates reported they received PREA educational materials in a way they could understand.

Policy D1-8.13 prohibits the use of inmate interpreters, inmate readers, or other types of inmate assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first responder duties under 115.64, or the investigation of the inmate's allegations. The facility reported that they have not had any instances where inmate interpreters were utilized.

Interviews with random staff who reported the facility would not use inmate interpreters to assist another inmate who was reporting an incident of sexual abuse.

The auditor interviewed inmates with disabilities or who are limited English proficient. Interviews supported the facility's adherence to established policy and procedures.

Based on a review of the PAQ, provided policies, procedures, documents, site review observations and interviews conducted with staff and inmates, the facility is substantially compliant with this standard and all of its provisions.

<b>115.17</b>	<b>Hiring and promotion decisions</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Agency policies D2-2.23, D2-11.14, D2-13.1 outline the prohibition from hiring or promoting anyone who may have contact with inmates and prohibits enlisting the services of any contractor who may have contact with inmates who 1) Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997); (2) Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or (3) Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (a)(2) of this section. These policies require consideration of any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates. These policies also require that before it hires any new employees who may have contact with inmates, it (a) conducts criminal background record checks, and (b) consistent with federal, state, and local law, makes its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse. Policy requires that a criminal background record check is completed before enlisting the services of any contractor who may have contact with inmates. Policy D2-11.14 requires that either criminal background record checks be conducted at least every five years for current employees and contractors who may have contact with inmates, or that a system is in place for otherwise capturing such information for current employees. It was noted by the auditor that agency policy actually requires background checks on all employees, contractors and volunteers every year on the person's birth month. Policy requires that material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination.</p> <p>The facility PAQ indicated that during the last 12 months, they hired 268 persons who may have contact with inmates all of whom have had criminal background checks.</p> <p>The auditor conducted file reviews of staff, contractors and volunteers at the facility illustrating that proper criminal background checks have been conducted.</p> <p>The auditor interviewed human resource staff at the facility which confirmed the requirements under this standard and its provisions.</p> <p>The facility reported that in the last 12 months they have entered into 3 contracts for services where criminal background record checks were conducted on all staff covered in the contract who might have contact with inmates.</p> <p>Agency policy D2-2.23 requires that material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination.</p> <p>Based on a review of the PAQ, provided policies, procedures, documents, site review</p>



	<p>observations and interviews conducted with staff and inmates, the facility is substantially compliant with this standard and all of its provisions.</p>
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<b>115.18</b>	<b>Upgrades to facilities and technologies</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>According to information provided by the facility in the PAQ, they have not acquired a new facility or made a substantial expansion or modification to the existing facilities since August 20, 2012, or since the last PREA audit.</p> <p>The auditor conducted interviews with the agency Director and facility Warden that confirmed the information provided in the PAQ.</p> <p>According to information provided by the facility in the PAQ, facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit.</p> <p>The auditor conducted interviews with the agency Director and facility Warden that confirmed the information provided in the PAQ.</p> <p>Based on a review of the PAQ, provided policies, procedures, documents, site review observations and interviews conducted with staff and inmates, the facility is substantially compliant with this standard and all of its provisions.</p>

<b>115.21</b>	<b>Evidence protocol and forensic medical examinations</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>Based on information provided by the facility in the PAQ, the facility is responsible for conducting administrative sexual abuse investigations, including inmate-on-inmate sexual abuse or staff sexual misconduct. In the PAQ the facility reported they were responsible for conducting criminal sexual abuse investigations (including inmate-on-inmate sexual abuse or staff sexual misconduct). In the PAQ they reported when they conduct sexual abuse investigations, the agency investigators follow a uniform evidence protocol. The policy D1-8.8 outlines the agency’s uniform evidence protocol.</p> <p>The auditor interviewed at least 12 random staff working throughout the facility to assess staff knowledge of the required technical detail to aid responders in obtaining usable physical evidence. Additionally, random staff were aware of their</p>

responsibilities when an inmate reports they have been a victim of sexual abuse.

Information provided in the PAQ indicated the protocol was adapted from or otherwise based on the most recent edition of the DOJ's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011.

Information provided in the PAQ indicated the facility offers all inmates who experience sexual abuse access to forensic medical examinations. The facility also offers all inmates who experience sexual abuse access to forensic medical examinations onsite. The facility offers all inmates who experience sexual abuse access to forensic medical examinations at an outside facility as well if not available at the time of an incident. The facility indicated that examinations are conducted by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs). The facility also indicated they document efforts to provide SANEs or SAFEs. This information was evidenced by the provided SANE Hospital listing and the Department's Coordinated Response Plan.

The PAQ indicated the facility conducted 3 forensic medical exams during the past 12 months, 3 exams performed by SANEs/SAFEs during the past 12 months and 3 exams performed by a qualified medical practitioner during the past 12 months.

The auditor interviewed SAFE/SANE staff during the onsite portion of the audit. They indicated that exams would almost always be conducted at the facility because they have a procedure to bring in nurses at all times of day regardless of the hour. They indicated there are at least 3 nurses available at any time to respond. They also explained that exams are only conducted at the facility when the incident is inmate-on-inmate. If the incident involves a staff member the SAFE/SANE exam is done at the hospital.

Information provided in the PAQ indicated the facility attempts to make available a victim advocate from a rape crisis center to the victim, either in person or by other means. Specifically, the facility has an MOU with Southeast Missouri Family Violence Council to provide victim advocacy services. Additionally, the facility provided information that they also have 2 qualified staff members who has received training on providing advocacy with survivors of sexual victimization.

The PAQ indicated if requested by the victim, a victim advocate, qualified agency staff member, or qualified community-based organization staff member accompanies and supports the victim through the forensic medical examination process and investigatory interviews and provides emotional support, crisis intervention, information, and referrals.

The auditor interviewed the PREA Compliance Manager who confirmed the MOU with Southeast Missouri Family Violence Council and the two chaplains that have received advocacy training.

Based on a review of the PAQ, provided policies, procedures, documents, site review observations and interviews conducted with staff and inmates, the facility is

	substantially compliant with this standard and all of its provisions.
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<b>115.22</b>	<b>Policies to ensure referrals of allegations for investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Policy D1-8.13 requires that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment (including inmate-on-inmate sexual abuse and staff sexual misconduct). The facility reported that in the last 12 months there have been 34 allegations of sexual abuse and sexual harassment that were received. The facility reported through the PAQ there were 6 allegations resulting in an administrative investigation. There was 1 allegation referred for criminal investigation. The facility reported that all allegations received during the past 12 months, all administrative and criminal investigations were completed. The auditor observed discrepancies in the original investigation numbers provided by the facility in the PAQ. The auditor confirmed actual investigation numbers during the audit process and numbers were reported in the PARF.</p> <p>The auditor interviewed the Director of the agency that confirmed the facility conducts criminal and administrative investigations related to sexual abuse and sexual harassment.</p> <p>Policies D1-8.1 and D1-8.4 require that allegations of sexual abuse or sexual harassment be referred for investigation to an agency with the legal authority to conduct criminal investigations, including the agency if it conducts its own investigations, unless the allegation does not involve potentially criminal behavior.</p> <p>Information in the PAQ indicated the agency's policy regarding the referral of allegations of sexual abuse or sexual harassment for criminal investigation is published on the agency website. The auditor confirmed the existence of the policy on the agency website through direct observation.</p> <p>The auditor interviewed investigative staff who confirmed there was a policy in place as required in this provision.</p> <p>Based on a review of the PAQ, provided policies, procedures, documents, site review observations and interviews conducted with staff and inmates, the facility is substantially compliant with this standard and all of its provisions.</p>

<b>115.31</b>	<b>Employee training</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>

	<p>Agency policies D1-8.13, IS5-3.3 and provided training plan illustrate that the agency trains all employees who may have contact with inmates on: (1) Its zero-tolerance policy for sexual abuse and sexual harassment; (2) How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures; (3) Inmates’ rights to be free from sexual abuse and sexual harassment; (4) The right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment; (5) The dynamics of sexual abuse and sexual harassment in confinement; (6) The common reactions of sexual abuse and sexual harassment victims; (7) How to detect and respond to signs of threatened and actual sexual abuse; (8) How to avoid inappropriate relationships with inmates; (9) How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates; and (10) How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.</p> <p>The PAQ and policy DI-8.13 indicated that training is tailored to the gender of the inmates at the facility and employees who are reassigned from facilities housing the opposite gender are given additional training. Between trainings the agency provides employees who may have contact with inmates with refresher information about current policies regarding sexual abuse and sexual harassment. Employees receive refresher training every two years. Between trainings employees are provided additional refresher training between the required two-year training periods. The agency documents that employees who may have contact with inmates understand the training they have received through employee signature or electronic verification.</p> <p>The auditor interviewed a random sampling of staff throughout the facility, all of which indicated they had been fully trained on PREA and their responsibilities as employees of the Department and confirmed the frequency of training.</p> <p>The auditor reviewed employee training records which illustrated the agency’s compliance with this standard.</p> <p>Based on a review of the PAQ, provided policies, procedures, documents, site review observations and interviews conducted with staff and inmates, the facility is substantially compliant with this standard and all of its provisions.</p>
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<b>115.32</b>	<b>Volunteer and contractor training</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	Policy D1-8.13 dictates the agency shall ensure that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency’s sexual abuse and sexual harassment prevention, detection, and response policies and procedures.

	<p>The training module “Volunteers in Corrections” training illustrated that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response.</p> <p>The PAQ indicated there were a total of 94 volunteers and contractors, (who may have contact with inmates) who have been trained in the agency's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response. The facility reported the level and type of training provided to volunteers and contractors is based on the services they provide and level of contact they have with inmates. All volunteers and contractors who have contact with inmates have been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents. The PAQ indicated the agency maintains documentation confirming that volunteers and contractors understand the training they have received.</p> <p>The auditor interviewed volunteers and contractors throughout the facility, all which confirming they had received PREA training from the agency. Additionally, contract medical and mental health staff indicated they receive additional PREA training through Corizon.</p> <p>The auditor reviewed volunteer and contractor training records which illustrated compliance with this standard.</p> <p>Based on a review of the PAQ, provided policies, procedures, documents, site review observations and interviews conducted with staff and inmates, the facility is substantially compliant with this standard and all of its provisions.</p>
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<b>115.33</b>	<b>Inmate education</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<p><b>Auditor Discussion</b></p> <p>Policy D1-8.13 dictates that during the intake process, inmates shall receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment. The policy requires within 30 days of intake, the facility shall provide comprehensive education to inmates either in person or through video regarding their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents, and regarding agency policies and procedures for responding to such incidents. Policy also requires that inmates who are transferred from one facility to another be educated regarding their rights to be free from both sexual abuse and sexual harassment and retaliation for reporting such incidents and on agency policies and procedures for responding to such incidents, to the extent that the policies and procedures of the new facility differ from those of the previous facility. Inmate PREA education handouts, flyers and brochures illustrate</p>

compliance with this standard.

The PAQ indicated there were 2399 inmates that were admitted during the past 12 months all were given PREA educational material. The facility reported there were 2399 inmates admitted during the past 12 months (whose length of stay in the facility was for 30 days or more) who received comprehensive education on their rights to be free from both sexual abuse and sexual harassment and retaliation for reporting such incidents and on agency policies and procedures for responding to such incidents within 30 days of intake.

The auditor interviewed intake staff at the facility who confirmed they provided all required PREA information to inmates during the intake process.

The auditor also interviewed a random sampling of inmates throughout the facility. Overwhelmingly, inmates reported receiving PREA information during intake and within 72 hours of entering the facility.

The auditor spot checked inmate records during the course of the audit illustrating inmates received PREA related training and educational materials during the intake process or within 72 hours of intake. Inmates also signed an acknowledgment form indicating they received the aforementioned training.

During the site review process, the auditor observed the intake process with the group of new inmates entering the facility. The auditor observed the inmates gathered in a housing unit dayroom dedicated by the facility for inmate education upon first entering the facility. Informational material was provided to inmates via literature, which was available in both English and Spanish formats. Staff also spoke with inmates directly to ascertain if there were individuals that needed additional assistance based on limited English proficiency or who were disabled, deaf or who were blind or have low vision. The auditor observed medical/mental health staff present that could assist with individuals that had cognitive or functional disabilities. The auditor also observed that a PREA educational video was provided to the group of inmates which further illustrated compliance with this standard.

During the site review process, the auditor observed housing units that needed a more robust and more centralized location where inmates have access to information related to PREA educational materials, reporting mechanisms and access to outside emotional support services. The auditor worked directly with the facility to address this concern by creating a bulletin board space in every wing of every housing unit. This bulletin board space ensures that key PREA information is continuously and readily available throughout the facility.

Based on a review of the PAQ, provided policies, procedures, documents, site review observations and interviews conducted with staff and inmates, the facility is substantially compliant with this standard and all of its provisions.

	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Policy D1-8.13 requires that investigators are trained in conducting sexual abuse investigations in confinement settings. Investigators also receive specialized training that includes techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral.</p> <p>The facility PAQ also provided the training modules from “Investigating Sexual Abuse in Confinement Settings” illustrating the training provided to its investigators. The facility reported there are a total of 2 investigators that work at the facility that have completed the required training.</p> <p>The auditor interviewed investigative staff from OPS who confirmed they had received the required specialized training.</p> <p>The auditor reviewed training records of investigators which further confirmed the completion the required training.</p> <p>Based on a review of the PAQ, provided policies, procedures, documents, site review observations and interviews conducted with staff and inmates, the facility is substantially compliant with this standard and all of its provisions.</p>

<b>115.35</b>	<b>Specialized training: Medical and mental health care</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Policy D1-8.13 requires all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: (1) How to detect and assess signs of sexual abuse and sexual harassment; (2) How to preserve physical evidence of sexual abuse; (3) How to respond effectively and professionally to victims of sexual abuse and sexual harassment; and (4) How and to whom to report allegations or suspicions of sexual abuse and sexual harassment.</p> <p>The facility reported in the PAQ that there was a total of 61 medical and mental health care practitioners who work regularly at this facility all of whom received the training required by agency policy. In the PAQ the facility reported there were medical staff working at the facility that could be responsible for conducting forensic medical exams and those staff have received appropriate training on how to conduct such examinations.</p> <p>The facility also provided training records of medical and mental health staff working</p>

	<p>at the facility illustrating completion of required training. The PAQ reported that 100 percent of medical and mental health staff who work regularly at the facility who received agency required training.</p> <p>The auditor interviewed medical and mental health staff working at the facility who confirmed they have received the required PREA training that included all the elements of the provision. Medical staff also reported there were staff working at the facility who could conduct SAFE/SANE exams.</p> <p>Based on a review of the PAQ, provided policies, procedures, documents, site review observations and interviews conducted with staff and inmates, the facility is substantially compliant with this standard and all of its provisions.</p>
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<b>115.41</b>	<b>Screening for risk of victimization and abusiveness</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Agency policies D1-8.13 and IS5-2.3 require screening (upon admission to a facility or transfer to another facility) for risk of sexual abuse victimization or sexual abusiveness toward other inmates. This policy also requires that inmates be screened for risk of sexual victimization or risk of sexually abusing other inmates within 72 hours of their intake. Policy also requires the facility reassess each inmate's risk of victimization or abusiveness within a set time period, not to exceed 30 days after the inmate's arrival at the facility, based upon any additional, relevant information received by the facility since the intake screening. Policy requires that an inmate's risk level be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness. Finally, policy prohibits disciplining inmates for refusing to answer (or for not disclosing complete information related to questions regarding: (a) whether or not the inmate has a mental, physical, or developmental disability; (b) whether or not the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender non-conforming; (c) whether or not the inmate has previously experienced sexual victimization; and (d) the inmate's own perception of vulnerability.</p> <p>The facility reported in the PAQ there were a total of 2399 inmates entering the facility (either through intake or transfer) within the past 12 months whose length of stay in the facility was for 72 hours or more and all were screened for risk of sexual victimization or risk of sexually abusing other inmates within 72 hours of their entry into the facility. In the PAQ the facility provided a copy of their objective screening instrument. The risk screening tool minimally considers 1) Whether the inmate has a mental, physical, or developmental disability; (2) The age of the inmate; (3) The physical build of the inmate; (4) Whether the inmate has previously been incarcerated; (5) Whether the inmate's criminal history is exclusively nonviolent; (6)</p>



Whether the inmate has prior convictions for sex offenses against an adult or child; (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming; (8) Whether the inmate has previously experienced sexual victimization; (9) The inmate's own perception of vulnerability; and (10) Whether the inmate is detained solely for civil immigration purposes.

During the site review process, the auditor confirmed who was responsible for conducting the risk screening of inmates at the facility. The auditor was also able to sit through several risk screenings of inmates entering the facility. The auditor confirmed the screening process occurs in a setting that ensures as much privacy as possible given the potentially sensitive information that could be discussed. The auditor assessed whether screening staff ask screening questions in a manner that fosters comfort and elicits responses. The auditor also tested the method for assessing confined persons for risk of being sexually abused by other persons confined in the facility or sexually abusive toward other persons confined in the facility, including whether:

- Screening staff use an instrument to collect information during the risk screening process.
- Screening staff affirmatively ask persons confined in the facility about their sexual orientation and gender identity by directly inquiring if they identify as LGBTI (in addition to making a subjective determination about perceived status).
- Screening staff use additional sources of information, outlined in the Standards, to complete the initial risk screening assessment.
- Completion of the risk screening instrument returns a subsequent "score" or determination of risk of being sexually abused or being sexually abusive.

During the site review process, the auditor observed the safeguards the facility had in place to protect sensitive information related the risk screening process. Sensitive information was only accessed by approved staff and were either locked in filing cabinets or electronic access which was password protected for authorized staff.

The auditor interviewed staff responsible for the risk screening process who confirmed risk screening takes place within 72 hours of arrival at the facility.

The auditor also interviewed random inmates throughout the facility, several of which entered the facility within the last 12 months, who indicated they remembered being asked questions related to whether they had been in prison before, whether they had been sexual abused before, how they identify and if they felt safe in the facility.

Inmates were also questioned if they remembered receiving a follow-up interview with a staff member within 30 days of their intake to the facility. Overwhelmingly, inmates reported they remembered the follow-up questions.

The auditor also interviewed the PREA Coordinator and PREA Compliance Manager who confirmed the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates.

The auditor spot-checked inmate records at the facility which indicated inmates were

	<p>screened within 72 hours of their intake and that inmates were reassessed for their risk of victimization or of being sexually abusive within 30 days after their arrival based upon any additional, relevant information received since intake.</p> <p>Based on a review of the PAQ, provided policies, procedures, documents, site review observations and interviews conducted with staff and inmates, the facility is substantially compliant with this standard and all of its provisions.</p>
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<b>115.42</b>	<b>Use of screening information</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>Policies D1-8.13, IS5-2.3 and IS18-1.1 address how the facility makes individualized determinations about how to ensure the safety of each inmate. These policies dictate how the facility in deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, and in making other housing and programming assignments, the agency considers on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether the placement would present management or security problems.</p> <p>The facility provided examples of risk screening information and how they use the information to make housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive.</p> <p>The auditor interviewed the PREA Compliance Manager and staff responsible for risk screening at the facility that confirmed adherence to individualized determinations for inmates' facility and agency wide. They also both stated that transgender and intersex inmate's own views with respect to their safety was given serious consideration. They also confirmed placement and programming assignments for each transgender or intersex inmate are reassessed at least twice each year to review any threats to safety experienced by the inmate. The PREA compliance manager explained there was an individual shower in each housing unit that offered transgender inmates the ability to shower separately.</p> <p>The auditor interviewed multiple transgender inmates at the facility. Transgender inmates reported they had not been placed in housing units only for transgender or intersex inmates. They also felt their own views with respect to their safety was given serious consideration. Transgender inmates all reported they were afforded the opportunity to shower separately from other inmates.</p> <p>During the site review process the auditor observed showers in housing units with doors that enabled transgender and intersex inmates to shower separately from other inmates.</p>

	Based on a review of the PAQ, provided policies, procedures, documents, site review observations and interviews conducted with staff and inmates, the facility is substantially compliant with this standard and all of its provisions.
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<b>115.43</b>	<b>Protective Custody</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>Agency policies D1-8.13 and IS5-2.3 prohibit the placement of inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made and a determination has been made that there is no available alternative means of separation from likely abusers. Policy IS5-2.3 also requires that every 30 days, the facility shall afford each such inmate a review to determine whether there is a continuing need for separation from the general population.</p> <p>The facility PAQ reported there were zero inmates held in involuntary segregated housing in the past 12 months for one to 24 hours awaiting completion of an assessment. The PAQ also reported there was a total of zero inmates at risk of sexual victimization who were assigned to involuntary segregated housing for longer than 30 days while awaiting alternative placement. The facility PAQ reported there were a total of zero inmates at risk of sexual victimization who were held in involuntary segregated housing in the past 12 months.</p> <p>The auditor interviewed the Warden who confirmed that inmates are never placed in involuntary segregated housing as a result of an inmate’s high risk of sexual victimization.</p> <p>The auditor interviewed a staff member who supervises inmates in segregated housing. This individual was also a supervisor over the segregated housing unit. The staff member stated the only time that inmates lose any programs, privileges, education or work opportunities, is when the individual requests protective custody for their own safety. The stated inmates are never placed in segregated housing based on risk assessment or reported incidents of sexual abuse as the victim.</p> <p>The auditor also interviewed inmates who were housed in segregated housing but those who were interviewed reported they desired to be in segregated housing for their own personal safety concerns.</p> <p>The auditor spot-checked inmate records provided from the facility and there were no instances observed where inmates were placed in segregated housing for any extended period of time and certainly nothing close to 30 days or more.</p> <p>Based on a review of the PAQ, provided policies, procedures, documents, site review observations and interviews conducted with staff and inmates, the facility is</p>

	substantially compliant with this standard and all of its provisions.
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<b>115.51</b>	<b>Inmate reporting</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Agency policy D1-8.13 addresses the multiple internal ways for inmates to privately report sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents. This policy also mandates that staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties. Policy D1-8.13 addresses the Crime Tips hotline as a method for staff to privately report sexual abuse and sexual harassment of inmates. Policy confirms that staff are immediately required to document reporting that is verbal, in writing, anonymously and from third parties.</p> <p>The PAQ included an MOU with the Missouri Department of Safety which provides at least one way for inmates to report abuse or harassment to a public or private entity or office that is not part of the agency.</p> <p>During the site review process the auditor actively observed all posted or printed signage throughout the facility (e.g., posters, pamphlets, brochures, electronic signage). Signage observed included audit notices, how to report sexual abuse and sexual harassment, access to outside victim emotional support services, and other relevant PREA information. Signage was provided in both English and Spanish, the other most commonly spoken language at the facility. The signage text size, formatting, and physical placement accommodates most readers, including those of average height, low vision/visually impaired, or those physically disabled/in a wheelchair. The auditor observed the information on the signage was accurate and consistent throughout the facility (e.g., audit notices are relevant to the current audit; contact information is consistent for service provider/organization name(s), addresses, phone numbers. The auditor observed signage on how to report sexual abuse and sexual harassment using both internal and external reporting methods.</p> <p>The auditor did make a recommendation to the facility that they construct a centralized location and bulletin board space accessible to all inmates in the housing units specifically. The facility agreed to and constructed these bulletin boards which enhanced how PREA information was available to all inmates housed at the facility.</p> <p>The auditor also observed the generalized locations of inmate mailboxes and receptacles placed throughout the facility where all inmates had access. Mailboxes were secure with locking mechanisms and only authorized staff at the facility has access to these boxes, which were never handled by other inmates. The auditor successfully tested external reporting by phone which worked appropriately and effectively.</p>

	<p>During the site review process the auditor was able to successfully test staffs' ability to report outside their immediate chain-of-command and it was on demand and easy to understand and use.</p> <p>The auditor interviewed random staff throughout the facility who were overwhelmingly aware of how to confidentially report incidents of sexual abuse and sexual harassment that was outside of their immediate chain-of-command or administration and the requirement to report all incidents of sexual abuse and sexual harassment immediately.</p> <p>The auditor interviewed random inmates throughout the facility. Inmates interviewed overwhelmingly reported the ways they could report incidents of sexual abuse and sexual harassment. Some of the methods discussed were reporting verbally to a staff member, writing a "kite" to staff, calling the posted hotline numbers and speaking directly with staff that were not considered security staff. Some inmates also indicated they could contact their family members who could report incidents as a third-party.</p> <p>The auditor interviewed the PREA compliance manager who reported inmates are allowed to submit a written letter to staff and they would not be required to provide their personal information and remain anonymous. They also were aware of the inmates had the ability to report to the Missouri State Police as the detached and separate third-party.</p> <p>Based on a review of the PAQ, provided policies, procedures, documents, site review observations and interviews conducted with staff and inmates, the facility is substantially compliant with this standard and all of its provisions.</p>
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<b>115.52</b>	<b>Exhaustion of administrative remedies</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<p><b>Auditor Discussion</b></p> <p>Agency policies D1-8.13 and D5-3.2 illustrate the agency has an administrative procedure for dealing with inmate grievances regarding sexual abuse. These policies allow inmates to submit a grievance regarding an allegation of sexual abuse at any time, regardless of when the incident is alleged to have occurred. Inmates are not required to use an informal grievance process, or otherwise to attempt to resolve with staff, an alleged incident of sexual abuse. The policy allows an inmate to submit a grievance alleging sexual abuse without submitting it to the staff member who is the subject of the complaint. The policy also illustrates that an inmate grievance alleging sexual abuse not be referred to the staff member who is the subject of the complaint. The agency's policy requires that a decision on the merits of any grievance or portion of a grievance alleging sexual abuse be made within 90 days of the filing of the grievance. Policy allows third parties, including fellow inmates, staff members, family</p>

members, attorneys, and outside advocates, to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse, and shall also be permitted to file such requests on behalf of inmates. If a third-party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process. If the inmate declines to have the request processed on his or her behalf, the agency shall document the inmate's decision. Agency policy has established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse. After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, the agency shall immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken, shall provide an initial response within 48 hours, and shall issue a final agency decision within 5 calendar days. The initial response and final agency decision documents the agency's determination whether the inmate is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance. Agency policy dictates inmates may be disciplined for filing a grievance related to alleged sexual abuse only where the agency demonstrates that the inmate filed the grievance in bad faith.

The facility PAQ reported there were zero grievances filed within the last 12 months alleging sexual abuse. The PAQ also indicated there were a total of zero emergency grievances alleging substantial risk of imminent sexual abuse filed within the last 12 months. The PAQ indicated there were zero grievances alleging sexual abuse that resulted in disciplinary action by the agency against the inmate for having filed the grievance in bad faith within the last 12 months.

During the site review portion of the audit, the auditor visually observed the facility's third-party reporting mechanism documentation. This information was available to family members, friends, advocates, and attorney at the entrance of the facility and waiting area. The auditor tested the third-party reporting through the agency website. The PREA coordinator obtained the email and responded within a reasonable period of time.

The auditor interviewed 1 inmate who reported sexual abuse in the facility. This inmate did not file any grievances related to the incident of sexual abuse.

Based on a review of the PAQ, provided policies, procedures, documents, site review observations and interviews conducted with staff and inmates, the facility is substantially compliant with this standard and all of its provisions.

**115.53**

**Inmate access to outside confidential support services**

**Auditor Overall Determination:** Meets Standard

	<p><b>Auditor Discussion</b></p> <p>Agency policy D1-8.13 provides direction on how the facility shall provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations, and, for persons detained solely for civil immigration purposes, immigrant services agencies. The facility shall enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible.</p> <p>The facility PAQ indicated and provided an MOU they currently have with Southeast Missouri Family Violence Council for advocacy services provided at the facility.</p> <p>The facility provided both English and Spanish versions of PREA information posters outlining emotional support services are provided in writing or by phone to Just Detention International, RAINN and Southeast Missouri Family Violence Council by mail or telephone at no charge.</p> <p>During the site review process the auditor observed signage specific to emotional support services that clearly details the services and how to make contact with ongoing emotional support. Inmates have the ability to contact these agencies by provided telephone numbers and mailing address clearly indicated on the flyers. The auditor's assessment of this process was that it was easy to operate, inmates understood how to make contact with these outside agencies, they could do so without financial cost and there was reasonable access for those inmates considered limited English proficient and disabled. The auditor also reviewed the process for sending and receiving mail at the facility. A mail drop box was observed in a general location in the facility that remained locked at all times and could only be opened by authorized staff. This drop box could be used to send mail or letter or note in passing. All inmates at the facility had equal and easy access to the mail drop box.</p> <p>The auditor interviewed an inmate who reported sexual abuse at the facility. The inmate was unable to provide information about what outside emotional support services were offered to him by the facility.</p> <p>The auditor interviewed random inmates throughout the facility some of which reported seeing brochures or signage posted related to outside ongoing emotional support services.</p> <p>Based on a review of the PAQ, provided policies, procedures, documents, site review observations and interviews conducted with staff and inmates, the facility is substantially compliant with this standard and all of its provisions.</p>
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<b>115.54</b>	<b>Third-party reporting</b>
	<b>Auditor Overall Determination:</b> Meets Standard

	<p><b>Auditor Discussion</b></p> <p>The facility PAQ illustrated multiple methods to receive third-party reports of sexual abuse and sexual harassment and how they distribute publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate.</p> <p>The auditor reviewed the external agency website which provided a telephone number, the ability to write directly to the PREA Unit for the Missouri Department of Corrections and the ability to email directly to the Missouri Department of Corrections.</p> <p>During the site review process the auditor observed clear and obvious signage related to third-party reporting throughout the facility including public areas which can be accessed by family members, friends, advocates and attorneys.</p> <p>The auditor tested the third-party reporting email reporting mechanism during the audit process. The auditor was able to clearly and easily submit an email test complaint which the facility promptly responded to.</p> <p>Based on a review of the PAQ, provided policies, procedures, documents, site review observations and interviews conducted with staff and inmates, the facility is substantially compliant with this standard and all of its provisions.</p>
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<b>115.61</b>	<b>Staff and agency reporting duties</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>Agency policy D1-8.13 requires all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency; retaliation against inmates or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. This policy also contains language indicating apart from reporting to designated supervisors or officials, staff shall not reveal any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions. The facility also provided an excerpt from Missouri Revised Statutes related to mandatory reporting responsibilities further illustrating this requirement.</p> <p>During the site review process the auditor observed how the facility processed all types of methods of reporting for staff, volunteers and contractors. Reporting methods were available on demand and to all staff/supervisory staff at the facility.</p> <p>The auditor interviewed random staff throughout the facility who all reported their</p>



	<p>duty to report all instances of sexual abuse and sexual harassment immediately. The duty to report was also a requirement for instances of retaliation for individuals who reported or witnessed instances of sexual abuse or harassment.</p> <p>The auditor interviewed medical and mental health staff at the facility who confirmed their duty to report incidents of sexual abuse and that they inform inmates of their duty to report and the limitations to confidentiality.</p> <p>The auditor interviewed the Warden and Agency PREA Coordinator who confirmed that if an alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, the agency shall report the allegation to the designated State or local services agency under applicable mandatory reporting laws. Interviews also confirmed that all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, will be reported to the facility's designated investigators.</p> <p>Based on a review of the PAQ, provided policies, procedures, documents, site review observations and interviews conducted with staff and residents, the facility is substantially compliant with this standard and all of its provisions.</p>
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<b>115.62</b>	<b>Agency protection duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<p><b>Auditor Discussion</b></p> <p>Agency policy D1-8.13 dictates when the facility learns that an inmate is subject to a substantial risk of imminent sexual abuse, it takes immediate action to protect the resident (i.e., it takes some action to assess and implement appropriate protective measures without unreasonable delay).</p> <p>The facility PAQ reported during the last 12 months there were zero instances when the agency determined an inmate was subject to a substantial risk of imminent sexual abuse.</p> <p>The auditor interviewed the agency Director, Warden and a sampling of random staff throughout the facility all of which indicated that immediate action is taken to protect an inmate when the facility learns they are at risk of imminent sexual abuse and articulated part of the agency coordinated response plan.</p> <p>Based on a review of the PAQ, provided policies, procedures, documents, site review observations and interviews conducted with staff and inmates, the facility is substantially compliant with this standard and all of its provisions.</p>

<b>115.63</b>	<b>Reporting to other confinement facilities</b>
	<p data-bbox="256 188 959 221"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="256 266 544 300"><b>Auditor Discussion</b></p> <p data-bbox="256 344 1465 669">Agency policy D1-8.13 dictates that upon receiving an allegation that an inmate was sexually abused while confined at another facility, the head of the facility that received the allegation shall notify the head of the facility or appropriate office of the agency where the alleged abuse occurred. This agency policy also requires that notification shall be provided as soon as possible, but no later than 72 hours after receiving the allegation. The policy requires the facility head or agency office that receives such notification shall ensure that the allegation is investigated in accordance with these standards.</p> <p data-bbox="256 703 1449 904">The facility PAQ indicated that over the past 12 months they have received 4 allegations that an inmate was abused while confined at another agency. The PAQ reported they document they provide such notifications within 72 hours of receiving these allegations. The PAQ indicated over the past 12 months there have been 5 allegations of sexual abuse the facility received from other facilities.</p> <p data-bbox="256 949 1473 1106">The auditor interviewed the agency Director and Warden who both confirmed the agency response to allegations of sexual abuse and sexual harassment received from outside agencies and for allegations made inside a facility that occurred at another facility.</p> <p data-bbox="256 1151 1453 1263">Based on a review of the PAQ, provided policies, procedures, documents, site review observations and interviews conducted with staff and inmates, the facility is substantially compliant with this standard and all of its provisions.</p>

<b>115.64</b>	<b>Staff first responder duties</b>
	<p data-bbox="256 1464 959 1498"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="256 1543 544 1576"><b>Auditor Discussion</b></p> <p data-bbox="256 1621 1473 2069">Agency policy D1-8.13 and the Coordinated Response Protocol provides clear guidance that upon learning of an allegation that an inmate was sexually abused, the first security staff member to respond to the report shall be required to: (1) Separate the alleged victim and abuser; (2) Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence; (3) If the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating; and (4) If the abuse occurred within a time period that still allows for the collection of physical evidence, ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as</p>

	<p>appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating. This policy also requires if the first staff responder is not a security staff member, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff.</p> <p>The PAQ indicated there have been 5 instances where an allegation of sexual abuse occurred and the first responder was not security staff.</p> <p>The auditor interviewed both random security staff and non-security staff first responders who confirmed their immediate steps to protect inmates and collect evidence without destruction. Both security and non-security staff were aware of their responsibilities to request the victim request that the alleged victim not take any actions that could destroy physical evidence.</p> <p>The auditor also interviewed 1 inmate who reported sexual abuse in the facility. The inmate reported that he initially reported the incident by an inmate letter. He also reported it took about a week for anyone to respond to his complaint. He stated the first person that he initially met with was an investigator.</p> <p>Based on a review of the PAQ, provided policies, procedures, documents, site review observations and interviews conducted with staff and inmates, the facility is substantially compliant with this standard and all of its provisions.</p>
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<b>115.65</b>	<b>Coordinated response</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The PAQ indicated they have a written institutional plan to coordinate actions taken in response to an incident of sexual abuse, among staff first responders, medical and mental health practitioners, investigators, and facility leadership (Coordinated Response Plan).</p> <p>The auditor interviewed the facility Warden who confirmed the existence of a facility coordinated response plan and explained the plan and how staff should execute it when faced with an incident of sexual abuse.</p> <p>Based on a review of the PAQ, provided policies, procedures, documents, site review observations and interviews conducted with staff and inmates, the facility is substantially compliant with this standard and all of its provisions.</p>

<b>115.66</b>	<b>Preservation of ability to protect inmates from contact with abusers</b>
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	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Agency policy D2-11.6, the provided collective bargaining memo and Labor agreement between the State of Missouri Department of Corrections and Missouri Corrections Officers Association illustrated that neither the agency nor any other governmental entity responsible for collective bargaining on the agency's behalf shall enter into or renew any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation of, or a determination of whether and to what extent discipline is warranted.</p> <p>The auditor interviewed the agency Director who confirmed any agreements entered into permit the agency from removing alleged staff sexual abusers from contact with any inmate pending an investigation or a determination of whether and to what extent to discipline.</p> <p>Based on a review of the PAQ, provided policies, procedures, documents, site review observations and interviews conducted with staff and inmates, the facility is substantially compliant with this standard and all of its provisions.</p>

<b>115.67</b>	<b>Agency protection against retaliation</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Agency policy D1-8.13 establishes a process to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff, and shall designate which staff members or departments are charged with monitoring retaliation. This policy requires that for at least 90 days following a report of sexual abuse, the agency shall monitor the conduct and treatment of inmates or staff who reported the sexual abuse and of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff, and shall act promptly to remedy any such retaliation. Items the agency should monitor include any inmate disciplinary reports, housing, or program changes, or negative performance reviews or reassignments of staff. The agency shall continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need.</p> <p>The PAQ indicated the facility designates a specific staff member with monitoring possible retaliation. The person responsible for retaliation monitoring at the facility is the deputy warden and the facility PREA Compliance Manager. The PAQ indicated there were zero instances of retaliation that occurred in the past 12 months.</p> <p>The auditor interviewed the agency Director who reported retaliation monitoring on</p>

	<p>all victims, witnesses, and reporting parties. He also explained the retaliation monitoring process and how long monitoring takes place.</p> <p>The auditor interviewed with the Warden and PREA Compliance Manager who is charged with monitoring retaliation. They both reported they monitor housing changes, transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations.</p> <p>The auditor attempted to interviewed 1 inmate who reported sexual abuse at the facility. The inmate refused to indicate if he felt protected or had received any retaliation as a result of reporting an incident of sexual abuse. It should be noted that the auditor reviewed the investigation involving this inmate. The auditor observed in the file that the case was investigated promptly and thoroughly and all subsequent requirements were followed under the standards.</p> <p>Based on a review of the PAQ, provided policies, procedures, documents, site review observations and interviews conducted with staff and inmates, the facility is substantially compliant with this standard and all of its provisions.</p>
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<b>115.68</b>	<b>Post-allegation protective custody</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Agency Policy D1-8.13 prohibits the placement of inmates who allege to have suffered sexual abuse in involuntary segregated housing unless an assessment of all available alternatives has been made and a determination has been made that there is no available alternative means of separation from likely abusers.</p> <p>The PAQ indicated there have been zero instances of inmates that were placed in involuntary segregated housing in the past 12 months for one to 24 hours awaiting the completion of an assessment.</p> <p>The auditor interviewed the Warden, staff who supervise inmates in segregated housing and inmates in segregated housing who allege to have suffered sexual abuse. The interviews all indicated that facility procedure is not to place inmates who have alleged to have suffered sexual abuse in segregated housing.</p> <p>The auditor interviewed 1 inmate who reported sexual abuse at the facility. He reported he was not placed in segregated housing for filing an allegation of sexual abuse.</p> <p>Based on a review of the PAQ, provided policies, procedures, documents, site review observations and interviews conducted with staff and inmates, the facility is substantially compliant with this standard and all of its provisions.</p>

<b>115.71</b>	<b>Criminal and administrative agency investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Agency policies D1-8.1 and D1-8.4 require that when the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, it shall do so promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports. Policy requires the agency to retain all written reports for as long as the alleged abuser is incarcerated or employed by the agency, plus five years. Policy dictates that reports are retained for 90 years.</p> <p>The PAQ indicated that all substantiated allegations of conduct that appear to be criminal are referred for prosecution. The PAQ reported there were zero allegations at the facility that were referred for criminal prosecution since the last PREA audit. The facility provided their retention schedule regarding criminal and administrative investigations related to sexual abuse.</p> <p>The auditor interviewed investigative staff who confirmed that all investigations are handled promptly and professionally regardless of how the information is received, including third-party reports. Investigative staff explained the investigative process at the facility, to include evidence collection procedures. Evidence collection included physical and testimonial. The investigator confirmed investigators received specialized training regarding investigating sexual abuse in confinement settings. The investigator confirmed when the quality of evidence appeared to support criminal prosecution, the investigator only conducts compelled interviews after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution.</p> <p>The auditor reviewed investigative files while conducting the onsite portion of the audit. The auditor observed investigations that were conducted promptly, thoroughly and objectively. Investigative files reviewed also illustrated that investigators gathered and preserved direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; interviewed alleged victims, suspected perpetrators, and witnesses; and reviewed prior complaints and reports of sexual abuse involving the suspected perpetrator. Investigative files reviewed indicated that when the quality of evidence appeared to support criminal prosecution, the agency conducted compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution.</p> <p>The auditor interviewed 1 inmate that reported sexual abuse at the facility. The inmate reported he was not required to take a polygraph test at any time.</p> <p>During the site review process the auditor observed physical storage areas where investigative files were stored. This information was under lock and key and only those individuals authorized to the information had access. Any electronic means of storage was password protected.</p>

	<p>Based on a review of the PAQ, provided policies, procedures, documents, site review observations and interviews conducted with staff and inmates, the facility is substantially compliant with this standard and all of its provisions.</p>
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<b>115.72</b>	<b>Evidentiary standard for administrative investigations</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>Agency policy D1-8.13 outlines that the agency shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.</p> <p>The auditor interviewed investigative staff during the audit who confirmed the preponderance of evidence standard requirement.</p> <p>Based on a review of the PAQ, provided policies, procedures, documents, site review observations and interviews conducted with staff and inmates, the facility is substantially compliant with this standard and all of its provisions.</p>

<b>115.73</b>	<b>Reporting to inmates</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>Agency policy D1-8.13 requires that following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, the agency shall inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. The policy also requires that following an inmate's allegation that a staff member has committed sexual abuse against the inmate, the agency shall subsequently inform the inmate (unless the agency has determined that the allegation is unfounded) whenever: (1) The staff member is no longer posted within the inmate's unit; (2) The staff member is no longer employed at the facility; (3) The agency learns that the staff member has been indicted on a charge related to sexual abuse within the facility; or (4) The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility. The policy additionally requires that following an inmate's allegation that he or she has been sexually abused by another inmate, the agency shall subsequently inform the alleged victim whenever: (1) The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility; or (2) The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility. The policy requires that all such notifications or attempted notifications are documented.</p>

	<p>The facility PAQ reported in this standard that there were 5 cases of criminal and/or administrative investigations of alleged inmate sexual abuse that were completed by the facility in the past 12 months. The PAQ indicated that of the 5 cases, all 5 inmates were advised in writing of the result of the investigation.</p> <p>The auditor interviewed the facility Warden and investigative staff, both of which confirmed that inmates are always advised of the outcomes of investigations.</p> <p>The auditor also interviewed 1 inmate who reported sexual abuse at the facility. The inmate reported he was not made aware of the outcome of the investigation. It should be noted that the auditor reviewed the inmate's investigative file and determined he had been advised of the outcome of investigation.</p> <p>The auditor reviewed sample investigations while at the facility. All investigations the auditor reviewed included documentation indicating inmates were advised of the outcome of investigations; substantiated, unsubstantiated or unfounded.</p> <p>Based on a review of the PAQ, provided policies, procedures, documents, site review observations and interviews conducted with staff and inmates, the facility is substantially compliant with this standard and all of its provisions.</p>
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<b>115.76</b>	<b>Disciplinary sanctions for staff</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<p><b>Auditor Discussion</b></p> <p>Agency policies D2-11.10 and D1-8.13 dictate that staff shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies. Policy D2-11.10 outlines the disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) shall be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories. This policy also dictates that all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies.</p> <p>In the PAQ the facility provided examples of staff that were terminated as the presumptive disciplinary for staff who have engaged in sexual abuse. The PAQ indicated there were 6 cases in the last 12 months that resulted in termination for violating agency sexual abuse or sexual harassment policies. The PAQ reported there was one staff member that was disciplined, short of termination, for violating agency sexual abuse and sexual harassment policies. The PAQ indicated in the past 12 months there were zero staff members from the facility that had been reported to law</p>



	<p>enforcement or licensing boards following their termination (or resignation prior to termination) for violating agency sexual abuse or sexual harassment policies.</p> <p>Based on a review of the PAQ, provided policies, procedures, documents, site review observations and interviews conducted with staff and inmates, the facility is substantially compliant with this standard and all of its provisions.</p>
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<b>115.77 Corrective action for contractors and volunteers</b>	
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>Agency policies D1-8.13 and D2-13.1 dictate that any contractor or volunteer who engages in sexual abuse is prohibited from contact with inmates and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies.</p> <p>The PAQ indicated there had been zero contractors or volunteers reported to law enforcement for engaging in sexual abuse of inmates. The PAQ indicated the facility takes appropriate remedial measures, and considers whether to prohibit further contact with inmates, in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer.</p> <p>There were no investigative reports for the auditor to review involving volunteers or contractors related to incidents of sexual abuse or sexual harassment.</p> <p>The auditor interviewed the facility Warden who stated in the case of volunteers and contractors they follow the facility coordinated response plan and immediately remove the contractors and volunteers from inmate contact.</p> <p>Based on a review of the PAQ, provided policies, procedures, documents, site review observations and interviews conducted with staff and inmates, the facility is substantially compliant with this standard and all of its provisions.</p>

<b>115.78 Disciplinary sanctions for inmates</b>	
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>Agency policies D1-8.13 and IS19-1.6 indicate that inmates shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse. Policy</p>

	<p>D1-8.13 dictates that the agency may discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact. This policy also prohibits all sexual activity between inmates and may discipline inmates for such activity. Policy dictates a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.</p> <p>The PAQ indicated in the last 12 months, there have been 16 administrative findings of inmate-on-inmate sexual abuse that occurred at the facility. The PAQ reported that sanctions shall be commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories. The PAQ indicated the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, the facility shall consider whether to require the offending inmate to participate in such interventions as a condition of access to programming or other benefits. The facility reported they offer victim impact programming, mental health counseling, anger management and pathway to change to modify behaviors.</p> <p>The auditor interviewed the facility Warden who confirmed the disciplinary process for inmates accused of inmate-on-inmate abuse.</p> <p>The auditor interviewed mental health staff at the facility verifying what services are provided inmates to correct the underlying reasons or motivations for abuse. They also confirmed that inmates have to want to participate in services that are provided.</p> <p>Based on a review of the PAQ, provided policies, procedures, documents, site review observations and interviews conducted with staff and inmates, the facility is substantially compliant with this standard and all of its provisions.</p>
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<b>115.81</b>	<b>Medical and mental health screenings; history of sexual abuse</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<p><b>Auditor Discussion</b></p> <p>Agency policies D1-8.13 and IS11-32 indicate that if the screening pursuant to § 115.41 indicates that a prison/jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening. This policy requires that if the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening.</p>

	<p>The agency PREA Risk Assessment Manual requires that any information related to sexual victimization or abusiveness that occurred in an institutional setting is strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law. Policy IS11-32 dictates that medical and mental health practitioners shall obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18.</p> <p>The PAQ indicated that during the past 12 months 100 percent of inmates who disclosed prior victimization during screening were offered a follow-up meeting with a medical or mental health practitioner.</p> <p>The auditor was unable to interview inmates who disclosed sexual victimization during risk screening. During the onsite portion of the audit, there were no inmates currently housed at the facility. This information was confirmed through facility documentation, interviews with staff and inmates and direct observation.</p> <p>The auditor also interviewed staff responsible for risk screening who confirmed inmates are referred to mental health when the information is entered into their electronic tracking system.</p> <p>The auditor interviewed medical and mental health staff at the facility who confirmed they obtain informed consent from inmates.</p> <p>During the site review process the auditor observed the physical storage locations of sensitive information collected related to the PREA standards. Hard copy information is stored in locked offices and in locked filing cabinets where only authorized medical and mental health staff have access. All electronic records are stored securely and password protected.</p> <p>Based on a review of the PAQ, provided policies, procedures, documents, site review observations and interviews conducted with staff and inmates, the facility is substantially compliant with this standard and all of its provisions.</p>
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<b>115.82</b>	<b>Access to emergency medical and mental health services</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<p><b>Auditor Discussion</b></p> <p>The facility PAQ indicated that inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment. The facility PAQ indicated that if no qualified medical or mental health practitioners are on duty at the time a report</p>

	<p>of recent abuse is made, security staff first responders shall take preliminary steps to protect the victim pursuant to § 115.62 and shall immediately notify the appropriate medical and mental health practitioners. The PAQ indicated inmate victims of sexual abuse while incarcerated shall be offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate. Agency policy D1-8.13 dictates that treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.</p> <p>The auditor interviewed medical and mental health staff at the facility. Both medical and mental health staff reported that inmate victims of sexual abuse received timely unimpeded access to emergency medical treatment and crisis intervention treatment.</p> <p>The auditor interviewed 1 inmate who reported sexual abuse at the facility. The inmate reported that he met with mental health one day after the alleged incident occurred but he did not meet with medical staff at any time.</p> <p>The auditor interviewed multiple security staff who overwhelmingly were able to convey their part of the facility coordinated response plan when a sexual abuse incident occurs and no qualified medical or mental health staff were on duty at the time of the alleged abuse.</p> <p>Based on a review of the PAQ, provided policies, procedures, documents, site review observations and interviews conducted with staff and inmates, the facility is substantially compliant with this standard and all of its provisions.</p>
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<b>115.83</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<p><b>Auditor Discussion</b></p> <p>Agency Policy D1-8.13 dictates facility shall offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility. The policy requires that all inmate victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections as medically appropriate and treatment services are provided without financial cost to the inmate. The policy also dictates that the facility attempts to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners.</p> <p>The auditor interviewed medical/mental health staff who confirmed the evaluation</p>

	<p>and treatment of such victims shall include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody. Medical and mental health staff both reported that treatment services provided are consistent with community level care. Medical and mental health staff confirmed they attempt to conduct a mental health evaluations of all known inmate-on-inmate abusers within 60 days of learning of such abuse history.</p> <p>The auditor interviewed 1 inmate who reported sexual abuse in the facility. The inmate reported he was not aware or advised what follow-up or treatment services were available to him after the incident occurred. He was also not aware if he was given information related to tests for sexually transmitted diseases. He also reported he was not aware if he was required to pay for treatment services provided.</p> <p>During the site review process the auditor confirmed through observations and records provided that this was a male facility.</p> <p>Based on a review of the PAQ, provided policies, procedures, documents, site review observations and interviews conducted with staff and inmates, the facility is substantially compliant with this standard and all of its provisions.</p>
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<b>115.86</b>	<b>Sexual abuse incident reviews</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Policy D1-813 requires that the facility shall conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded. The policy requires the sexual abuse incident review team to consist of upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners. Policy requires sexual abuse incident reviews to be completed ordinarily within 30 days of the conclusion of the investigation.</p> <p>The facility provided examples of completed sexual abuse incident reviews which they refer to as a debriefing.</p> <p>The PAQ indicated the facility implements the recommendations for improvement or documents its reasons for not doing so. The PAQ indicated over the past 12 months there have been 12 criminal/administrative investigations of alleged sexual abuse completed at the facility. The facility reported they have completed 12 sexual abuse incident reviews over the past 12 months as a result of those investigations.</p> <p>The auditor reviewed multiple additional examples of sexual abuse incident reviews associated with investigations. The auditor observed that incident reviews were conducted with input from upper-level management officials and they were</p>

	<p>completed within 30 days of the completion of the investigation.</p> <p>The auditor interviewed the facility Warden who confirmed the existence of a sexual abuse incident review team that included all required upper-level management officials and others involved with the incident. The Warden confirmed the review team considers (1) 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.</p> <p>The auditor also interviewed the PREA compliance manager and an incident review team member who also confirmed all of the requirements of the incident review team provisions.</p> <p>Based on a review of the PAQ, provided policies, procedures, documents, site review observations and interviews conducted with staff and inmates, the facility is substantially compliant with this standard and all of its provisions.</p>
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<b>115.87</b>	<b>Data collection</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Policy D1-8.13 dictates how agency shall collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions. The policy mandates the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.</p> <p>The facility PAQ indicated the agency aggregates the incident-based sexual abuse data at least annually. The PAQ indicated the standardized instrument includes, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence (SSV) conducted by the Department of Justice. The PAQ indicated upon request, the agency has provided all such data from the previous calendar year to the Department of Justice no later than June 30. The facility PAQ indicated the agency does not contract for the confinement of its inmates.</p>

	<p>The facility provided a copy of the 2012 PREA Annual Report was reviewed by the auditor. The report illustrated that the agency aggregates incident-based sexual abuse data at least annually.</p> <p>Based on a review of the PAQ, provided policies, procedures, documents, site review observations and interviews conducted with staff and inmates, the facility is substantially compliant with this standard and all of its provisions.</p>
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<b>115.88</b>	<b>Data review for corrective action</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>Information provided in the PAQ indicated the agency reviews data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: (1) Identifying problem areas; (2) Taking corrective action on an ongoing basis; and (3) Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole.</p> <p>The most current annual report was provided through the PAQ. The 2021 annual report included a comparison of the current year’s data and corrective actions with those from prior years and provided an assessment of the agency’s progress in addressing sexual abuse. The PAQ also indicated the agency may redact specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility, but must indicate the nature of the material redacted.</p> <p>The auditor interviewed the agency Director who stated the Department as a whole assesses and improves housing assignments, video monitoring and staffing levels. They provide additional training to staff. In the last 2 years, the PREA Unit representative speaks at every basic training course. The Director reported he reviews and approves the agency’s annual report.</p> <p>The auditor interviewed the PREA Coordinator. He indicated all data from PREA investigations is collected and stored. That information is then used to complete the Annual Survey of Sexual Victimization. He indicated the facility provides much of the data and is a cooperative process between the facility and PREA coordinators office. He also reported the agency takes corrective action on an ongoing basis.</p> <p>The auditor interviewed the PREA Compliance Manager. He reported the facility reviews data collected and aggregated in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training.</p> <p>The auditor reviewed the agency annual report via the public website. The PAQ</p>

	<p>indicated the annual report is approved by the agency Director.</p> <p>Based on a review of the PAQ, provided policies, procedures, documents, site review observations and interviews conducted with staff and inmates, the facility is substantially compliant with this standard and all of its provisions.</p>
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<b>115.89</b>	<b>Data storage, publication, and destruction</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The agency retention schedule related to data collection and retention for PREA related investigations and statistical information outlines how the agency ensures that data collected pursuant to § 115.87 is securely retained. The schedule requires all sexual abuse data collected is maintained for at least 10 years after the date of initial collection.</p> <p>The PAQ indicated that before making aggregated sexual abuse data publicly available, the agency remove all personal identifiers.</p> <p>The auditor interviewed the agency PREA Coordinator who stated the only sources of data is secured in the administration with event files, in IRIS, and Filebound which only investigations and facility administration has access to.</p> <p>During the course of the site review process the auditor observed physical storage locations of information that is documented and collected in hard copy format. All observed areas were locked in offices and double locked in filing cabinets to ensure the privacy and the safety of the information.</p> <p>The auditor reviewed the agency public website and confirmed through observation that the agency makes available aggregated sexual abuse data.</p> <p>Based on a review of the PAQ, provided policies, procedures, documents, site review observations and interviews conducted with staff and inmates, the facility is substantially compliant with this standard and all of its provisions.</p>

<b>115.401</b>	<b>Frequency and scope of audits</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>During the three-year period starting on August 20, 2013, and during each three-year period thereafter, the agency shall ensure that each facility operated by the agency, or by a private organization on behalf of the agency, is audited at least</p>



	<p>once.</p> <p>The auditor reviewed the agency website which illustrated that each facility has been audited, specifically during the three-year audit cycle as required. The agency website also illustrated that at least one-third of each facility types operated by the agency has been audited.</p> <p>The auditor was provided full access to, and had the ability to observe all areas of the facility during the audit.</p> <p>The auditor was permitted to and received copies of any relevant documents (including electronically stored information) during the audit.</p> <p>The auditor was permitted to conduct private interviews with residents during the onsite portion of the audit.</p> <p>The auditor confirmed through photos of audit notices that the facility posted audit notices at least 6 weeks prior to the onsite portion of the audit. Physical notices of the audit were provided by the auditor and were posted in the most commonly spoken languages, English and Spanish.</p> <p>The auditor confirmed through inmate conversations the process of sending and receiving mail. The inmates indicated they could confidentially send correspondence to the auditor using regular mail procedures in advance of the audit.</p> <p>The auditor interviewed random inmates at the facility who confirmed they were aware of the PREA audit.</p> <p>Based on a review of the PAQ, provided policies, procedures, documents, site review observations and interviews conducted with staff and inmates, the facility is substantially compliant with this standard and all of its provisions.</p>
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<b>115.403</b>	<b>Audit contents and findings</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The agency has published on its agency website, all Final Audit Reports. The review period is for prior audits completed during the past three years preceding this audit.</p> <p>The auditor reviewed the agency website and confirmed the existence of all the final PREA audit reports completed within the last 3 years.</p> <p>Based on a review of the PAQ, provided policies, procedures, documents, site review observations and interviews conducted with staff and inmates, the facility is substantially compliant with this standard and all of its provisions.</p>

<b>Appendix: Provision Findings</b>		
<b>115.11 (a)</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
<b>115.11 (b)</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
	Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?	yes
<b>115.11 (c)</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	yes
	Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	yes
<b>115.12 (a)</b>	<b>Contracting with other entities for the confinement of inmates</b>	
	If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	na
<b>115.12 (b)</b>	<b>Contracting with other entities for the confinement of inmates</b>	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure	na

	that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	
<b>115.13 (a)</b>	<b>Supervision and monitoring</b>	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into	yes

	consideration: Any applicable State or local laws, regulations, or standards?	
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes
<b>115.13 (b)</b>	<b>Supervision and monitoring</b>	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	na
<b>115.13 (c)</b>	<b>Supervision and monitoring</b>	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes
<b>115.13 (d)</b>	<b>Supervision and monitoring</b>	
	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes

<b>115.14 (a)</b>	<b>Youthful inmates</b>	
	Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).)	yes
<b>115.14 (b)</b>	<b>Youthful inmates</b>	
	In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)	yes
	In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	yes
<b>115.14 (c)</b>	<b>Youthful inmates</b>	
	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)	yes
	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	yes
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	yes
<b>115.15 (a)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
<b>115.15 (b)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	na
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the	na

	facility does not have female inmates.)	
<b>115.15 (c)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	na
<b>115.15 (d)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility have policies that enables inmates to shower, perform bodily functions, 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?	yes
	Does the facility have procedures that enables inmates to shower, perform bodily functions, 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?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
<b>115.15 (e)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
<b>115.15 (f)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

<b>115.16 (a)</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>	
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are blind or have low vision?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have intellectual disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have psychiatric disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have speech disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other (if "other," please explain in overall determination notes.)	yes
	Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing?	yes
	Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication	yes

	with inmates with disabilities including inmates who: Have intellectual disabilities?	
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: are blind or have low vision?	yes
<b>115.16 (b)</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
<b>115.16 (c)</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>	
	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes
<b>115.17 (a)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who	yes



	may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
<b>115.17 (b)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes
<b>115.17 (c)</b>	<b>Hiring and promotion decisions</b>	
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
<b>115.17 (d)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes

<b>115.17 (e)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes
<b>115.17 (f)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
<b>115.17 (g)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
<b>115.17 (h)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
<b>115.18 (a)</b>	<b>Upgrades to facilities and technologies</b>	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	na
<b>115.18 (b)</b>	<b>Upgrades to facilities and technologies</b>	

	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	na
<b>115.21 (a)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
<b>115.21 (b)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
<b>115.21 (c)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes

	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
<b>115.21 (d)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	na
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
<b>115.21 (e)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
<b>115.21 (f)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	na
<b>115.21 (h)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.)	yes
<b>115.22 (a)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	

	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes
<b>115.22 (b)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	
	Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
<b>115.22 (c)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	na
<b>115.31 (a)</b>	<b>Employee training</b>	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes

	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
<b>115.31 (b)</b>	<b>Employee training</b>	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes
<b>115.31 (c)</b>	<b>Employee training</b>	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
<b>115.31 (d)</b>	<b>Employee training</b>	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
<b>115.32 (a)</b>	<b>Volunteer and contractor training</b>	

	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
<b>115.32 (b)</b>	<b>Volunteer and contractor training</b>	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	yes
<b>115.32 (c)</b>	<b>Volunteer and contractor training</b>	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
<b>115.33 (a)</b>	<b>Inmate education</b>	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
<b>115.33 (b)</b>	<b>Inmate education</b>	
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
<b>115.33 (c)</b>	<b>Inmate education</b>	
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes

	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes
<b>115.33 (d)</b>	<b>Inmate education</b>	
	Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?	yes
<b>115.33 (e)</b>	<b>Inmate education</b>	
	Does the agency maintain documentation of inmate participation in these education sessions?	yes
<b>115.33 (f)</b>	<b>Inmate education</b>	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats?	yes
<b>115.34 (a)</b>	<b>Specialized training: Investigations</b>	
	In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
<b>115.34 (b)</b>	<b>Specialized training: Investigations</b>	
	Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include proper use of Miranda and	yes



	Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	
	Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
<b>115.34 (c)</b>	<b>Specialized training: Investigations</b>	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
<b>115.35 (a)</b>	<b>Specialized training: Medical and mental health care</b>	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or	yes

	suspicious of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	
<b>115.35 (b)</b>	<b>Specialized training: Medical and mental health care</b>	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.)	yes
<b>115.35 (c)</b>	<b>Specialized training: Medical and mental health care</b>	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
<b>115.35 (d)</b>	<b>Specialized training: Medical and mental health care</b>	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)	yes
	Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)	yes
<b>115.41 (a)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
	Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
<b>115.41 (b)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
<b>115.41 (c)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Are all PREA screening assessments conducted using an objective	yes

	screening instrument?	
<b>115.41 (d)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10)	yes

	Whether the inmate is detained solely for civil immigration purposes?	
<b>115.41 (e)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?	yes
<b>115.41 (f)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes
<b>115.41 (g)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Does the facility reassess an inmate's risk level when warranted due to a referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a request?	yes
	Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes
<b>115.41 (h)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes
<b>115.41 (i)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive	yes

	information is not exploited to the inmate's detriment by staff or other inmates?	
<b>115.42 (a)</b>	<b>Use of screening information</b>	
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
<b>115.42 (b)</b>	<b>Use of screening information</b>	
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
<b>115.42 (c)</b>	<b>Use of screening information</b>	
	When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would	yes

	present management or security problems?	
<b>115.42 (d)</b>	<b>Use of screening information</b>	
	Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?	yes
<b>115.42 (e)</b>	<b>Use of screening information</b>	
	Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes
<b>115.42 (f)</b>	<b>Use of screening information</b>	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes
<b>115.42 (g)</b>	<b>Use of screening information</b>	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing	yes

	solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)	
<b>115.43 (a)</b>	<b>Protective Custody</b>	
	Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?	yes
	If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?	yes
<b>115.43 (b)</b>	<b>Protective Custody</b>	
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?	yes
	If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	na
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	na
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	na
<b>115.43 (c)</b>	<b>Protective Custody</b>	

	Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?	yes
	Does such an assignment not ordinarily exceed a period of 30 days?	yes
<b>115.43 (d) Protective Custody</b>		
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?	yes
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?	yes
<b>115.43 (e) Protective Custody</b>		
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes
<b>115.51 (a) Inmate reporting</b>		
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes
<b>115.51 (b) Inmate reporting</b>		
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain	yes



	anonymous upon request?	
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	na
<b>115.51 (c)</b>	<b>Inmate reporting</b>	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
<b>115.51 (d)</b>	<b>Inmate reporting</b>	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
<b>115.52 (a)</b>	<b>Exhaustion of administrative remedies</b>	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	yes
<b>115.52 (b)</b>	<b>Exhaustion of administrative remedies</b>	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
<b>115.52 (c)</b>	<b>Exhaustion of administrative remedies</b>	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from	yes

	this standard.)	
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
<b>115.52 (d)</b>	<b>Exhaustion of administrative remedies</b>	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
<b>115.52 (e)</b>	<b>Exhaustion of administrative remedies</b>	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	yes
<b>115.52 (f)</b>	<b>Exhaustion of administrative remedies</b>	

	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
<b>115.52 (g)</b>	<b>Exhaustion of administrative remedies</b>	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes
<b>115.53 (a)</b>	<b>Inmate access to outside confidential support services</b>	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers,	yes

	including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)	
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
<b>115.53 (b)</b>	<b>Inmate access to outside confidential support services</b>	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
<b>115.53 (c)</b>	<b>Inmate access to outside confidential support services</b>	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
<b>115.54 (a)</b>	<b>Third-party reporting</b>	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes
<b>115.61 (a)</b>	<b>Staff and agency reporting duties</b>	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual	yes

	abuse or sexual harassment or retaliation?	
<b>115.61 (b)</b>	<b>Staff and agency reporting duties</b>	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes
<b>115.61 (c)</b>	<b>Staff and agency reporting duties</b>	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes
<b>115.61 (d)</b>	<b>Staff and agency reporting duties</b>	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
<b>115.61 (e)</b>	<b>Staff and agency reporting duties</b>	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes
<b>115.62 (a)</b>	<b>Agency protection duties</b>	
	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes
<b>115.63 (a)</b>	<b>Reporting to other confinement facilities</b>	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
<b>115.63 (b)</b>	<b>Reporting to other confinement facilities</b>	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes

<b>115.63 (c)</b>	<b>Reporting to other confinement facilities</b>	
	Does the agency document that it has provided such notification?	yes
<b>115.63 (d)</b>	<b>Reporting to other confinement facilities</b>	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
<b>115.64 (a)</b>	<b>Staff first responder duties</b>	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
<b>115.64 (b)</b>	<b>Staff first responder duties</b>	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
<b>115.65 (a)</b>	<b>Coordinated response</b>	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in	yes

	response to an incident of sexual abuse?	
<b>115.66 (a)</b>	<b>Preservation of ability to protect inmates from contact with abusers</b>	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
<b>115.67 (a)</b>	<b>Agency protection against retaliation</b>	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
<b>115.67 (b)</b>	<b>Agency protection against retaliation</b>	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes
<b>115.67 (c)</b>	<b>Agency protection against retaliation</b>	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of	yes

	sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
<b>115.67 (d)</b>	<b>Agency protection against retaliation</b>	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
<b>115.67 (e)</b>	<b>Agency protection against retaliation</b>	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
<b>115.68 (a)</b>	<b>Post-allegation protective custody</b>	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes
<b>115.71 (a)</b>	<b>Criminal and administrative agency investigations</b>	
	When the agency conducts its own investigations into allegations	yes



	of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
<b>115.71 (b)</b>	<b>Criminal and administrative agency investigations</b>	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
<b>115.71 (c)</b>	<b>Criminal and administrative agency investigations</b>	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
<b>115.71 (d)</b>	<b>Criminal and administrative agency investigations</b>	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
<b>115.71 (e)</b>	<b>Criminal and administrative agency investigations</b>	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
<b>115.71 (f)</b>	<b>Criminal and administrative agency investigations</b>	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes

	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
<b>115.71 (g)</b>	<b>Criminal and administrative agency investigations</b>	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
<b>115.71 (h)</b>	<b>Criminal and administrative agency investigations</b>	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
<b>115.71 (i)</b>	<b>Criminal and administrative agency investigations</b>	
	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
<b>115.71 (j)</b>	<b>Criminal and administrative agency investigations</b>	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes
<b>115.71 (l)</b>	<b>Criminal and administrative agency investigations</b>	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	na
<b>115.72 (a)</b>	<b>Evidentiary standard for administrative investigations</b>	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
<b>115.73 (a)</b>	<b>Reporting to inmates</b>	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes

<b>115.73 (b)</b>	<b>Reporting to inmates</b>	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	na
<b>115.73 (c)</b>	<b>Reporting to inmates</b>	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
<b>115.73 (d)</b>	<b>Reporting to inmates</b>	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually	yes

	abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	
<b>115.73 (e)</b>	<b>Reporting to inmates</b>	
	Does the agency document all such notifications or attempted notifications?	yes
<b>115.76 (a)</b>	<b>Disciplinary sanctions for staff</b>	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
<b>115.76 (b)</b>	<b>Disciplinary sanctions for staff</b>	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes
<b>115.76 (c)</b>	<b>Disciplinary sanctions for staff</b>	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes
<b>115.76 (d)</b>	<b>Disciplinary sanctions for staff</b>	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes
<b>115.77 (a)</b>	<b>Corrective action for contractors and volunteers</b>	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes

	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
<b>115.77 (b)</b>	<b>Corrective action for contractors and volunteers</b>	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes
<b>115.78 (a)</b>	<b>Disciplinary sanctions for inmates</b>	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
<b>115.78 (b)</b>	<b>Disciplinary sanctions for inmates</b>	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
<b>115.78 (c)</b>	<b>Disciplinary sanctions for inmates</b>	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
<b>115.78 (d)</b>	<b>Disciplinary sanctions for inmates</b>	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	yes
<b>115.78 (e)</b>	<b>Disciplinary sanctions for inmates</b>	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes
<b>115.78 (f)</b>	<b>Disciplinary sanctions for inmates</b>	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish	yes

	evidence sufficient to substantiate the allegation?	
<b>115.78 (g)</b>	<b>Disciplinary sanctions for inmates</b>	
	If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes
<b>115.81 (a)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).	yes
<b>115.81 (b)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	yes
<b>115.81 (c)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	yes
<b>115.81 (d)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes
<b>115.81 (e)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior	yes

	sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	
<b>115.82 (a)</b>	<b>Access to emergency medical and mental health services</b>	
	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
<b>115.82 (b)</b>	<b>Access to emergency medical and mental health services</b>	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes
<b>115.82 (c)</b>	<b>Access to emergency medical and mental health services</b>	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
<b>115.82 (d)</b>	<b>Access to emergency medical and mental health services</b>	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
<b>115.83 (a)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
<b>115.83 (b)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
<b>115.83 (c)</b>	<b>Ongoing medical and mental health care for sexual abuse</b>	

	<b>victims and abusers</b>	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
<b>115.83 (d)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
<b>115.83 (e)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
<b>115.83 (f)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
<b>115.83 (g)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
<b>115.83 (h)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes



<b>115.86 (a)</b>	<b>Sexual abuse incident reviews</b>	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
<b>115.86 (b)</b>	<b>Sexual abuse incident reviews</b>	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
<b>115.86 (c)</b>	<b>Sexual abuse incident reviews</b>	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
<b>115.86 (d)</b>	<b>Sexual abuse incident reviews</b>	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
<b>115.86 (e)</b>	<b>Sexual abuse incident reviews</b>	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes

<b>115.87 (a)</b>	<b>Data collection</b>	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
<b>115.87 (b)</b>	<b>Data collection</b>	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
<b>115.87 (c)</b>	<b>Data collection</b>	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
<b>115.87 (d)</b>	<b>Data collection</b>	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
<b>115.87 (e)</b>	<b>Data collection</b>	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	na
<b>115.87 (f)</b>	<b>Data collection</b>	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes
<b>115.88 (a)</b>	<b>Data review for corrective action</b>	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant	yes

	to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	
<b>115.88 (b)</b>	<b>Data review for corrective action</b>	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
<b>115.88 (c)</b>	<b>Data review for corrective action</b>	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
<b>115.88 (d)</b>	<b>Data review for corrective action</b>	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
<b>115.89 (a)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
<b>115.89 (b)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
<b>115.89 (c)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
<b>115.89 (d)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
<b>115.401 (a)</b>	<b>Frequency and scope of audits</b>	

	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes
<b>115.401 (b)</b>	<b>Frequency and scope of audits</b>	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	yes
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	na
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	na
<b>115.401 (h)</b>	<b>Frequency and scope of audits</b>	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
<b>115.401 (i)</b>	<b>Frequency and scope of audits</b>	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
<b>115.401 (m)</b>	<b>Frequency and scope of audits</b>	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
<b>115.401 (n)</b>	<b>Frequency and scope of audits</b>	
	Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes
<b>115.403</b>	<b>Audit contents and findings</b>	

<b>(f)</b>		
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)	yes