

PREA Facility Audit Report: Final

Name of Facility: Redgranite Correctional Institution

Facility Type: Prison / Jail

Date Interim Report Submitted: 06/09/2017

Date Final Report Submitted: 07/11/2017

| Auditor Certification | |
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| The contents of this report are accurate to the best of my knowledge. | <input checked="" type="checkbox"/> |
| No conflict of interest exists with respect to my ability to conduct an audit of the agency under review. | <input checked="" 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 checked="" type="checkbox"/> |
| Auditor Full Name as Signed: Yvonne Gorton | Date of Signature: 07/11/2017 |

| AUDITOR INFORMATION | |
|-------------------------------------|----------------------|
| Auditor name: | Gorton, Yvonne |
| Address: | |
| Email: | gortony@michigan.gov |
| Telephone number: | |
| Start Date of On-Site Audit: | 04/02/2017 |
| End Date of On-Site Audit: | 04/03/2017 |

| FACILITY INFORMATION | |
|-----------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Facility name: | Redgranite Correctional Institution |
| Facility physical address: | 1006 County Road EE, PO Box 900, Redgranite, Wisconsin - 54970 |
| Facility Phone | 920-566-2600 |
| Facility mailing address: | |
| The facility is: | <input type="radio"/> County <input type="radio"/> Federal <input type="radio"/> Municipal <input checked="" type="radio"/> State <input type="radio"/> Military <input type="radio"/> Private for profit <input type="radio"/> Private not for profit |
| Facility Type: | <input checked="" type="radio"/> Prison <input type="radio"/> Jail |

| Primary Contact | | | |
|-----------------------|----------------------------|--------------------------|-----------------------------|
| Name: | Kelly Mueske | Title: | Corrections Unit Supervisor |
| Email Address: | Kelly.Mueske@Wisconsin.gov | Telephone Number: | 920-566-3129 |

| Warden/Superintendent | | | |
|-----------------------|-------------------------------|--------------------------|--------------|
| Name: | Michael Meisner | Title: | Warden |
| Email Address: | Michael.Meisner@Wisconsin.gov | Telephone Number: | 920-566-3115 |

| Facility PREA Compliance Manager | | | |
|----------------------------------|--------------|-----------------------|----------------------------|
| Name: | Kelly Mueske | Email Address: | Kelly.Mueske@wisconsin.gov |

| Facility Health Service Administrator | | | |
|---------------------------------------|-----------------------------|--------------------------|-------------------------|
| Name: | Lori Doehling | Title: | Health Services Manager |
| Email Address: | Lori.Doehling@Wisconsin.gov | Telephone Number: | 920-566-3164 |

| Facility Characteristics | | | |
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| Designed facility capacity: | 750 | | |
| Current population of facility: | 1023 | | |
| Age Range | Adults: 19-81 | Youthful Residents: N/A | |
| Facility security level/inmate custody levels: | Medium | | |
| Number of staff currently employed at the facility who may have contact with inmates: | 253 | | |

| AGENCY INFORMATION | |
|--------------------------------------------------------------|---------------------------------------------------------|
| Name of agency: | Wisconsin Department of Corrections |
| Governing authority or parent agency (if applicable): | State of Wisconsin |
| Physical Address: | 3099 East Washington Avenue, Madison, Wisconsin - 53707 |
| Mailing Address: | PO Box 7925, Madison, Wisconsin - 53707 |
| Telephone number: | (608) 240-5000 |

| Agency Chief Executive Officer Information: | | | |
|---------------------------------------------|----------------------------|--------------------------|----------------|
| Name: | Jon Litscher | Title: | Secretary |
| Email Address: | Jon.Litscher@wisconsin.gov | Telephone Number: | (608) 240-5065 |

| Agency-Wide PREA Coordinator Information | | | |
|------------------------------------------|----------------|-----------------------|------------------------------|
| Name: | Patrick Hughes | Email Address: | patrick.hughes@wisconsin.gov |

AUDIT FINDINGS

Narrative:

The auditor's description of the audit methodology should include a detailed description of the following processes during the pre-audit, on-site audit, and post-audit phases: documents and files reviewed, discussions and types of interviews conducted, number of days spent on-site, observations made during the site-review, and a detailed description of any follow-up work conducted during the post-audit phase. The narrative should describe the techniques the auditor used to sample documentation and select interviewees, and the auditor's process for the site review.

The Redgranite Correctional Institution was audited on April 3 and 4, 2017 by DOJ Certified Auditor, Yvonne Gorton, assisted by DOJ Certified Auditor, Kimberly Napier and PREA Analyst, Wendy Hart. A review of the pre-audit documentation was completed prior to the audit. Documentation provided, prior to the audit, was complete and very well organized. Present during the entrance meeting were Leigha Weber, Statewide PREA Program Analyst Advanced, Warden Michael Meisner, Deputy Warden, Sandra Hautamaki, David Tarr, Institution Security Director, and Kelly Mueske, Institution PREA Compliance Manager/Corrections Unit Supervisor.

A tour of the facility included all buildings of the facility and the grounds inside the institution. During the tour, it was noted that the PREA Audit notices and information regarding how to report instances of sexual harassment or sexual abuse, including both inside and outside hotline numbers that are free calls, were posted in all housing units and in other areas of the facility that prisoners frequent. Posters providing a phone number for a free and confidential rape crisis hotline were also posted throughout the facility. Information for families, detailing how to make a third-party report, were posted in the visiting room where they could be easily observed by visitors. The information was readily available and easy to identify.

During the tour of the facility, auditors noted that the servery areas, in the housing units, had a back portion that was separated from the main area by a doorway, that the back portion backed up to a loading dock and that there was a housekeeping closet, with a door, just off the loading dock area. The housekeeping closet was out of direct view of the officer's station, was not monitored by a camera, and was accessed by inmates employed in the servery area. Auditors felt that this constituted a blind spot that could compromise the safety of both prisoners and staff working in that area. In discussion with the Warden and the Facility PREA Compliance Manager, we learned that a recent staffing plan review had resulted in the facility acquiring cameras to be placed in those areas. Upon further discussion, we learned that the cameras had been purchased, were at the facility and installation was planned. In an interview, Security Director, Dave Tarr said, regarding when the installation was planned, "they are on the project list for the electronic tech. They were identified as an issue when I got here and were ordered. They recently arrived and are the list for installation. They are a high priority but there have been emergent items that have also come up. I would say conservatively no more than the next couple of months." Corrective action, consisting of installing cameras in the servery areas of the Housing Units, was accomplished well within the 180 day corrective action period and Standard 115.13, Supervision and Monitoring is now met.

In talking with staff and inmates, during the tour, auditors noted that both groups were very well versed in the Department's zero tolerance policy and how to report instances of sexual abuse or sexual harassment. Inmates were very well aware of their rights and staff were aware of their responsibilities.

Both staff and inmates answered questions readily, and accurately, and reported having been recipients of considerable education on the subject. Their knowledge demonstrated the facility's strong commitment to understand, and comply with, PREA Standards.

Interviewees from lists of both staff and prisoners were interviewed. Interviews included 18 random prisoners, and 21 random staff, including staff from all shifts. Inmates to be interviewed were chosen randomly from Housing Unit rosters provided by staff. In addition to the randomly selected prisoners, interviews included those with hearing disabilities and those with limited English proficiency, which allowed the interviewer an opportunity to ask very specific questions that would help determine if staff had adequately presented the information in a manner the inmates could understand. Auditors ensured that at least two prisoners from each housing unit were interviewed. Staff were chosen from a daily staffing sheet. Auditors ensured that interviews were conducted with staff from each of the Housing Units. In addition to formal interviews, auditors also conducted informal interviews with both inmates and staff, one each from each housing unit, during the tour of the facility. All of them were very well educated about PREA matters.

Ten specialized staff were interviewed, including health care and mental health staff, higher level administrative staff, staff who perform intake screening, the warden, a human resources staff person, the institution PREA Compliance Manager, the volunteer coordinator, training staff, the Food Service Director and various other staff. All interviewees were well versed on PREA information and had no difficulty outlining how the standards are met at the facility. All staff interviewed demonstrated good understanding of the PREA standards and their responsibility in meeting those standards. Their familiarity with the standards, and their quick responses to questions about the standards, was a reflection of the facility's eagerness to comply with standards and to learn what steps they could take to enhance their compliance.

There had been 25 reports of alleged PREA incidents within the last 12 months. All instances were investigated and all were reported to local law enforcement, the Redgranite Police Department. The Redgranite Police Department conducts criminal investigations while facility staff conduct administrative investigations. The Warden, and the facility PREA Compliance Manager, both reported that the facility has a very good working relationship, and almost daily contact, via e-mail or phone call, with the Redgranite Police Department. This added measure of reporting all allegations gives an additional review and greater transparency to the workings of the facility with respect to PREA enforcement.

The Wisconsin Department of Corrections staff, and the staff at Redgranite, were exceptionally well prepared for the audit. All pre-audit materials were in order, and other requested documentation was presented promptly. All required policies, documentation, logs and files were checked for PREA compliance. Interviews with staff indicated that they are a group well educated on PREA standards and a group that is dedicated to compliance with those standards.

AUDIT FINDINGS

Facility Characteristics:

The auditor's description of the audited facility should include details about the type of the facility, demographics and size of the inmate or resident population, numbers and type of staff positions, configuration and layout of the facility, numbers of housing units, description of housing units including any special housing units, a description of programs and services, including food service and recreation.

The Redgranite Correctional Institution encompasses 98 acres of land, of which 22 acres are contained within the secure perimeter. The secure perimeter consists of two high-security fences that are equipped with razor-ribbon wire and a "shock" or "knock-down" feature. The Redgranite Correctional Institution is a medium security facility that houses adult male prisoners. No females, and no males under the age of 18, are incarcerated in the facility.

The facility's stated purpose is, "to maintain secure and safe custody of medium-security offenders committed to Redgranite Correctional Institution (RGCI) while providing opportunities to offenders for cognitive and behavioral development to enhance their future potential as productive members of society."

The facility employs Restorative Justice efforts by allowing inmates to engage in sewing and crocheting projects that enable them to donate many useful items, i.e., hats, mittens and scarves, to be distributed by local helping agencies. Inmates also garden, and produce and herbs they grow are used in the facility food service operation and are also donated to local food banks. Inmate workers built and donated a rocking chair, tables, storage rack, keepsake boxes, business card holders, cribbage boards, clocks and picture frames.

Programming available to prisoners to assist them with their rehabilitative efforts include Thinking for Change (T4C), Anger Management, Domestic Violence/STOP, Grief Recovery, and Sex Offender Therapy. The facility has a large number of volunteers who conduct religious programming and self-help programming such as Alcoholics Anonymous and Narcotics Anonymous.

AUDIT FINDINGS

Summary of Audit Findings:

The summary should include the number of standards exceeded, number of standards met, and number of standards not met, along with a list of each of the standards in each category. If relevant, provide a summarized description of the corrective action plan, including deficiencies observed, recommendations made, actions taken by the agency, relevant timelines, and methods used by the auditor to reassess compliance.

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| Number of standards exceeded: | 2 |
| Number of standards met: | 43 |
| Number of standards not met: | 0 |

The April 3 and 4, 2017, PREA Audit, of the Redgranite Correctional Institution, revealed that the Wisconsin Department of Corrections, and the Redgranite Correctional Institution, have a written zero tolerance policy toward all of forms of sexual abuse and sexual harassment and that they take purposeful steps to protect all prisoners and staff, and to identify, detect, and prevent instances of sexual abuse and harassment.

Number of standards exceeded: 2

115.22 Policies to Ensure Referrals of Allegations for Investigation

115.31 Employee Training

Number of standards met: 40

115.11 Zero Tolerance of Sexual Abuse and Sexual Harassment; PREA Coordinator

115.12 Contracting with Other Entities for the Confinement of Inmates

115.13 Supervision and Monitoring

115.15 Limits to Cross-gender Viewing and Searches

115.16 Inmates with Disabilities and Inmates who are Limited English Proficient

115.17 Hiring and Promotion Decisions

115.18 Upgrades to Facilities and Technologies

115.21 Evidence Protocol and Forensic Medical Examinations

115.32 Volunteer and Contractor Training

115.33 Inmate Education

115.34 Specialized Training: Investigations

115.35 Specialized Training: Medical and Mental Health Care

115.41 Screening for Risk of Sexual Victimization and Abusiveness

115.42 Use of Screening Information

115.43 Protective Custody

115.51 Inmate Reporting

115.52 Exhaustion of Administrative Remedies

115.53 Inmate Access to Outside Confidential Support Services

115.54 Third-party Reporting

- 115.61 Staff and Agency Reporting Duties
- 115.62 Agency Protection Duties
- 115.63 Reporting to Other Confinement Facilities
- 115.64 Staff first Responder Duties
- 115.65 Coordinated Response
- 115.67 Agency Protection Against Retaliation
- 115.68 Post-allegation Protective Custody
- 115.71 Criminal and Administrative Agency Investigations
- 115.72 Evidentiary Standard for Administrative Investigations
- 115.73 Reporting to Inmates
- 115.76 Disciplinary Sanctions for Staff
- 115.77 Corrective Action for Contractors and Volunteers
- 115.78 Disciplinary Sanctions for Inmates
- 115.81 Medical and Mental Health Screenings; History of Sexual Abuse
- 115.82 Access to Emergency Medical and Mental Health Services
- 115.83 Ongoing Medical and Mental Health Care for Sexual Abuse Victims and Abusers
- 115.86 Sexual Abuse Incident Reviews
- 115.87 Data Collection
- 115.88 Data Review for Corrective Action
- 115.89 Data Storage, Publication, and Destruction

Number of standards not met: 0

Number of standards not applicable: 2

115.14 Youthful Inmates

115.66 Preservation of Ability to Protect Inmates From Contact with Abusers

Standards

Auditor Overall Determination Definitions

- Exceeds Standard
(Substantially exceeds requirement of standard)
- Meets Standard
(substantial compliance; complies in all material ways with the stand for the relevant review period)
- Does Not Meet Standard
(requires corrective actions)

Auditor Discussion Instructions

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.

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| 115.11 | Zero tolerance of sexual abuse and sexual harassment; PREA coordinator |
| | <p data-bbox="252 170 895 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 248 523 282">Auditor Discussion</p> <p data-bbox="252 327 1484 745">Executive Directive #72, Section V, Page 4 outlines the Department’s zero tolerance for sexual abuse and sexual harassment and the agency’s approach to preventing, detecting and responding to sexual harassment. It includes definitions of prohibited behavior, sanctions for those found to have participated in prohibited behaviors, and describes agency strategies and responses to reduce and prevent sexual abuse and harassment of inmates. Strategies include training all staff, contractors and volunteers to recognize, respond to, and report sexual abuse and sexual harassment and providing inmates with a comprehensive orientation that details their right to be free from sexual assault, sexual harassment, and report-related retaliation. The agency also provides multiple ways for offenders to report sexual abuse or sexual harassment and provides contact information for a local advocacy agency.</p> <p data-bbox="252 797 1481 1128">State Agency PREA Director, Chrissy Preston, recently took another job and her position will be filled. In the meantime, the Statewide PREA Program Analyst Advanced for the Wisconsin Department of Corrections, Leigha Weber, is filling that role. Leigha reports that her position is a dedicated position and that she has sufficient time and authority to the development and implementation of agency efforts in PREA compliance. An organizational chart was presented identifying the position of PREA Director. The agency has 38 PREA Compliance Managers, at the Correctional Facilities throughout the state, and each of the 38 PREA Compliance Managers has a backup.</p> <p data-bbox="252 1180 1461 1301">The Redgranite Correctional Institution employs a PREA Compliance Manager who identified that 20% of her work time is dedicated to PREA compliance. She reports to the Deputy Warden, Sandra Hautamaki.</p> |

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| 115.12 | Contracting with other entities for the confinement of inmates |
| | <p data-bbox="252 1505 895 1538">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 1583 523 1617">Auditor Discussion</p> <p data-bbox="252 1662 1458 1783">The Wisconsin Department of Corrections contracted with five agencies, for the confinement of inmates, since the last PREA Audit. All of the contracts with these agencies require contractors to adopt and comply with PREA Standards.</p> <p data-bbox="252 1834 1406 1868">The Redgranite Correctional Institution does not contract for the confinement of inmates.</p> |

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| 115.13 | Supervision and monitoring |
| | <p data-bbox="252 168 901 201">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 246 526 280">Auditor Discussion</p> <p data-bbox="252 324 1484 873">Executive Directive #72 stipulates that all department facilities must develop, and make best efforts to comply with, a staffing plan that provides for adequate levels of employees and video monitoring where applicable. Since the last PREA Audit, the average daily number of inmates at the Redgranite Correctional Institution was 1023 inmates. The current staffing plan was predicated on a population of 1028 inmates and, when calculating adequate staffing levels and determining the need for video monitoring, takes into account generally accepted detention and correctional practices, any judicial findings of inadequacy, any findings of inadequacy from Federal investigative agencies, any findings of inadequacy from internal and external oversight bodies, all components of the facility’s physical plant (including “blind spots” or areas where staff or inmates may be isolated), the composition of the inmate population, the number and placement of supervisory staff, institution programs occurring on a particular shift, any applicable State or local laws, regulations, or standards, the prevalence of substantiated and unsubstantiated incidents of sexual abuse, and any other relevant factors.</p> <p data-bbox="252 929 1484 1388">The Executive Directive also requires that all deviations from the staffing plan be documented in written form and all deviations justified. No deviations from the staffing plan occurred in the last 12 months. The agency provided documentation of a March 2017 review of the staffing plan that identified that RGCI staffing patterns do not, and will not, allow for staff shortages. In the event a shift does not have enough staff to cover absences, overtime is used to fill all vacancies. Interviews with the Warden, and with the Facility PREA Compliance manager, also verified that the facility does not deviate from the staffing plan. The facility also presented a log documenting the annual reviews of the staffing plan. Interviews with the Warden, and the Facility PREA Compliance Manager, verified that the staffing plan is reviewed annually. In addition, daily reports are issued that identify vacancies and the need for overtime to fill any vacancies that occur.</p> <p data-bbox="252 1444 1484 2072">During the tour of the facility, auditors noted that the servery areas, in the housing units, had a back portion that was separated from the main area by a doorway, that the back portion backed up to a loading dock and that there was a housekeeping closet, with a door, just off the loading dock area. The housekeeping closet was out of direct view of the officer's station, was not monitored by a camera, and was accessed by inmates employed in the servery area. Auditors felt that this constituted a blind spot that could compromise the safety of both prisoners and staff working in that area. In discussion with the Warden and the Facility PREA Compliance Manager, we learned that a recent staffing plan review had resulted in the facility acquiring cameras to be placed in those areas. Upon further discussion, we learned that the cameras had been purchased, are at the facility, and installation is planned. In an interview, Security Director, Dave Tarr said, regarding when the installation will take place, "they are on the project list for the electronic tech. They were identified as an issue, when I got here, and were ordered. They recently arrived and are on the list for installation. They are a high priority but there have been emergent items that have also come up. I would say, conservatively, no more than the next couple of months."</p> <p data-bbox="252 2128 1420 2161">Redgranite Facility Procedure #900.411.11 requires that intermediate or higher-level staff</p> |

conduct unannounced, non-patterned rounds, covering all shifts, to identify, prevent, and detect sexual abuse and harassment. Rounds are made on all three shifts and are documented in logbooks. Staff are forbidden, by policy, from giving any form of notification that a supervisor is in the process of making rounds. All random staff interviewed identified that they were familiar with the facility procedure that prohibits them from notifying other staff that a supervisor is in the process of making rounds. The facility even removed certain outside camera views from the officers' station, in the housing units, to reduce prior awareness of administrative rounding.

Corrective Action Recommendations: The facility should ensure that this item be given high priority. The cameras should be installed by the end of the 180 day corrective action period and the facility should notify me of the installation.

Corrective Action Completed: Installation of the already purchased cameras, in the serveries, was recommended and the facility accomplished this well within the corrective action period. The Facility Compliance Manager documented the installation with photos of the serveries with the cameras installed. All recommended corrective action was taken and the standard is now met.

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| 115.14 | Youthful inmates |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | This standard is N/A as the Redgranite Correctional Institution does not house any offenders under the age of 18. |

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| 115.15 | Limits to cross-gender viewing and searches |
| | <p data-bbox="252 168 901 201">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 246 526 280">Auditor Discussion</p> <p data-bbox="252 324 1468 750">Executive Directive #72 identifies that, except in exigent circumstances, cross-gender pat-down searches and cross-gender strip searches are not permitted in adult facilities of the Wisconsin Department of Corrections. Additionally, Division of Adult Institutions Policy #306.17.02 outlines that staff directly observing an inmate during a strip search are to be of the same gender as the inmate and that a second staff person is to only observe the staff performing the strip search. The same policy dictates that all body cavity searches of inmates are to be conducted off-site by medical personnel. A Search of Offender Log, that identifies the gender of both the staff and the inmate being searched, is used to record all inmate searches. An interview with higher level supervisory staff revealed that these records are maintained in a location determined by the Warden.</p> <p data-bbox="252 795 1452 1041">Facility procedure 900.104.06 provides for 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. All inmates interviewed verified that they were able to shower, perform bodily functions and change clothing without non-medical staff of the opposite gender viewing them.</p> <p data-bbox="252 1086 1476 1422">Cameras in a Restricted Housing Unit gave a view into two cells and the image was displayed, and was observable, in the Control Center. The facility agreed to digitize the images so that breasts, buttocks and genitalia were no longer visible and on the day of the audit, technology staff, at the facility, were investigating the possibility of employing the digitizing of the specific cameras. Within one week of the conclusion of the audit, confirmation was received, from the Facility PREA Compliance Manager, that the digitizing had been accomplished. This immediate attention to the problem, and the suggested solution, demonstrates the facility's commitment to compliance with PREA standards.</p> <p data-bbox="252 1467 1484 1691">Executive Directive #72 calls for staff of the opposite gender to announce their presence when entering an inmate housing unit. During the tour of the facility, staff explained that the sound of a doorbell ringing, in the Housing Units, indicated that a female was entering the Unit, and all random prisoners interviewed were familiar with the sound of the notification and what it meant. Auditors were able to hear the alert while touring the housing units.</p> <p data-bbox="252 1736 1444 1859">Section X of Executive Directive #72 dictates that facilities may not search or physically examine transgender or intersex inmates for the sole purpose of determining genital status. Redgranite has conducted no such searches in the past 12 months.</p> <p data-bbox="252 1904 1476 2027">Random staff interviews revealed that all custody staffs are trained in cross-gender pat-downs and searches of transgender and intersex inmates in a professional and respectful manner at the Department's training academy and a yearly refresher is standard as well.</p> |

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| 115.16 | Inmates with disabilities and inmates who are limited English proficient |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Executive Directive #72, Section XI, B, 4, page 8, identifies that offenders with disabilities or who have limited English Proficiency shall 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. The agency contracts for translation services for verbal, written and Sign Language and disallows the use of inmates as translators except in exigent circumstances where a delay in providing an interpreter could have a deleterious effect on safety and security of inmates and/or the facility. Postings in Housing Units, and other areas that inmates frequent, were printed in Spanish and English, and the facility will use the contract agency to provide translators for other languages if needed. In the past 12 months, the facility has not used inmates as translators in any circumstances.</p> <p>Hard of hearing, limited English speaking and reading impaired prisoners were interviewed and all indicated that they had been properly informed, in a medium they could understand, of their right to be free from sexual abuse and sexual harassment, how to report abuse or harassment, and their right to be free from retaliation for reporting. They were also aware of their right to have an interpreter provided and all understood that the facility did not use other inmates as translators or interpreters. This was also confirmed during staff interviews.</p> <p>All inmates interviewed were able to answer questions in a manner that demonstrated that they understood the questions, that they were well educated on the agency's zero tolerance policy, and on how to prevent, detect and report sexual abuse and sexual harassment. They cited posters in housing units, information presented during Prisoner Orientation, and described the risk assessment and screenings they had participated in since arriving at the Redgranite Correctional Institution. All of the offenders interviewed indicated that staff will read material to them if they have vision problems or difficulty reading. Staff interviewed during the tour of the housing also verified that they will read information to an offender who cannot read or has difficulty seeing. They then ask pertinent questions designed to ascertain if the prisoner has understood what was read to them.</p> |

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| 115.17 | <p>Hiring and promotion decisions</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Section VI, A, on page 4 of Executive Directive #72, outlines the agency’s prohibition in hiring or promoting anyone who has engaged in sexual abuse in a confinement facility, has been convicted of engaging or attempting to engage in non-consensual sexual activity in the community, or who has been civilly or administratively adjudicated to have engaged in any such activity. The Directive also says that the Department shall consider any incidents of sexual harassment when determining whether to hire, promote or enlist the services of any employee.</p> <p>An interview with a Human Resources staff confirmed that the agency does perform criminal background checks on any employee who may have contact with offenders prior to hiring. The agency uses the CCAP, a Wisconsin court access system to conduct criminal background checks. In the past 12 months the facility engaged in 38 contracts for services and criminal background checks were conducted on all staff covered in the contracts that might have contact with inmates. A review of the files maintained by Human Resources verified this information.</p> <p>The agency does ask all applicants and employees, who may have contact with inmates, directly about any identified previous misconduct in written applications and in interviews for hiring or promotions, and the agency imposes upon employees a continuing affirmative duty to disclose any such misconduct. In addition, the agency provides for fingerprinting services, for all current employees of each of its facilities, on an annual basis, and for criminal background checks every five years. In an interview, Human Resources staff said that Department requires mandatory Personnel File review before hiring employees from another facility or any other state agency. This is currently a phone conversation between HR Directors but Personnel files will soon be electronic so that facility the HR Director will have access and will review.</p> |
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| 115.18 | <p>Upgrades to facilities and technologies</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The agency has not acquired a new facility, made substantial expansion or modification to existing facilities, or installed or updated a video monitoring system, electronic surveillance system or other monitoring technology since the last since the last PREA Audit was conducted in 2014. Interviews with the Warden, and the Agency PREA Coordinator,</p> |
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| 115.21 | Evidence protocol and forensic medical examinations |
| | <p data-bbox="252 170 896 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 248 523 282">Auditor Discussion</p> <p data-bbox="252 327 1484 701">Executive Directive #72, requires the agency to investigate all allegations of sexual abuse and sexual harassment and to refer all criminal sexual abuse investigations to the local law enforcement agency for investigation. A Sexual Abuse Incident Flowchart, provided by the Facility PREA Compliance Manager, identifies how the complaint proceeds through the investigative process. In addition, auditor reviews of administrative investigations, performed by facility investigative staff, revealed that the protocol is followed and documented, and a PREA Investigation tracking sheet showed the process being followed appropriately and timely to completion. Both the Warden, and the facility PREA Compliance Manager reported having a close working relationship with the local law enforcement agency and almost daily contact.</p> <p data-bbox="252 752 1481 1261">Division of Adult Institutions Policy #306.00.14 outlines the uniform evidence protocol that staff are required to follow to maximum the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecution. The protocol calls for securing and protecting the scene, identifying suspects and witnesses and keeping them separated, securing entryways and cordoning off the area using evidence tape, if appropriate, documenting names of individuals in the area and directing them away from the scene, ensuring objects are not touched unless they constitute a risk or danger if not secured, documenting names of individuals in the area and directing them away from the scene, ensuring all inmates and unnecessary staff are kept out of the area, and ensuring notifications are made to the appropriate staff. Staff are also required to complete the DOC-1445 form for proper chain of custody documentation for collecting criminal evidence and documenting, and photographing, evidence collected and the area.</p> <p data-bbox="252 1312 1481 1559">Staff are also instructed to request that the alleged victim not take any actions that could destroy physical evidence such as washing, brushing teeth, changing clothes, urinating, defecating, drinking or eating. This protocol is developmentally appropriate for youth and was adapted from the National Commission on Correctional Health Care-Response to Sexual Abuse (2014). All staff interviewed, even those who were informally interviewed and chosen at random, during the facility tour, were able to articulate the protocol.</p> <p data-bbox="252 1610 1481 2029">Executive Directive #72 says that all victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment, including a forensic medical exam, performed by a SAFE or SANE examiner, and all services are provided at no cost to the inmate. Forensic examinations are not performed at the Redgranite Correctional Facility. Instead, the facility will transport an offender to a local hospital with an available SANE. Zero forensic exams have been conducted in the past 12 months because no reports of sexual abuse were made that indicated a SANE exam should be completed. A phone call to the local hospital verified that a SANE is available there if a prisoner should be assaulted and require access to one. Departmental policy stipulates that such an exam would be performed at no cost to the inmate.</p> <p data-bbox="252 2080 1481 2157">The facility also provides access to an advocacy agency. The advocacy agency recently changed and, at the time of the audit, a new MOU was in the process of being signed. A draft</p> |

of the agreement was presented as documentation but no signed copy was available. Since the audit, the MOU has been signed and a phone conversation with the ASTOP (Assist Survivors, Treatment, Outreach, Prevention) Agency Director confirmed that the MOU is being signed and that the agency will provide advocacy services for the facility. The facility also provides a qualified staff member for such services when none are available in the local community. By policy, any advocate may accompany victims through examinations and provide follow-up services to the victim. An interview with Psychological Services Director, Dr. Nikolaus Werner verified that he has appropriate training and credentials to provide the required services. He also presented documents verifying his training.

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| 115.22 | Policies to ensure referrals of allegations for investigations |
| | Auditor Overall Determination: Exceeds Standard |
| | Auditor Discussion |
| | <p>Executive Directive #72, in Section XVII, B, page 15, identifies that all allegations of sexual abuse and sexual harassment will be investigated by the facility and that all allegations involving potentially criminal behavior are referred to local law enforcement. The facility investigates all allegations and reports all allegations to the Redgranite Police Department who conducts all criminal investigations. This added measure, reporting all allegations to the local law enforcement agency, adds an extra review and greater transparency.</p> <p>In the last 12 months, 25 allegations of PREA related incidents were received, all were investigated by the agency and all were reported to the Redgranite Police Department. Redgranite Police Department is notified via e-mail, voice mail or direct telephone call regarding all allegations. The agency's website identifies that all allegations are investigated and that the department works with local law enforcement agencies on allegations involving potentially criminal behavior. None of the 25 allegations received in the past 12 months were allegations of sexual abuse, thus, no criminal investigations were conducted. Of the 25 allegations made, two were substantiated, nine were unsubstantiated, 12 were unfounded and two are ongoing.</p> <p>An interview with the Agency Head, Cathy Jess, confirmed that the facility conducts investigations on all allegations. Interviews with the Warden and Facility PREA Compliance Manager, as well as with investigative staff, confirmed the very active role the local law enforcement agency plays and the facility's positive working relationship with the agency.</p> |

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| 115.31 | Employee training |
| | Auditor Overall Determination: Exceeds Standard |
| | Auditor Discussion |
| | <p>Executive Directive #72, Section XI, A, a, Page 7 requires all new staff to be trained on the Department's zero tolerance policy and requires all employees to receive training on a biennial basis, and a yearly refresher on current sexual abuse and sexual harassment policies. Employees are trained on inmates' right to be free of abuse and harassment, to be free from retaliation for reporting, on the dynamics of abuse and harassment in confinement, on common reactions, on how to detect and respond to abuse and harassment, how to avoid inappropriate relationships with inmates, on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender-nonconforming inmates. The training lesson plan was reviewed by auditors to verify all required information was included.</p> <p>Staff are also trained on mandatory reporting of sexual abuse and sexual harassment to outside authorities. The training is tailored to the gender of the inmates and staff are given additional information if they transfer from facilities housing the opposite gender inmates. When new policies/directives regarding sexual abuse and sexual harassment are released, all employees who may have contact with inmates are informed.</p> <p>The training is delivered in an online format. Employees are required to complete a quiz, upon completion of the training, which requires their signature, and a minimum allowable passing score, to demonstrate their understanding of the training. All staff who were interviewed verified they had received training annually and auditors reviewed training records of employees that showed their quiz scores and their signatures.</p> |

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| 115.32 | Volunteer and contractor training |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Executive Directive #72 requires that all volunteers and contractors who have contact with inmates be trained on the agency's zero tolerance policy and their responsibilities regarding prevention, detection, and response to allegations of sexual abuse and sexual harassment. The level and type of this training is based on the services provided and the level of contact volunteers and contractors have with inmates.</p> <p>Volunteers attend a Volunteer Orientation where they receive a Volunteer Handbook that outlines the agency's zero tolerance policy and their responsibilities. They also receive a publication entitled, "Sexual Abuse and Sexual Harassment in Confinement: A Guide for Volunteers and Contractors." Another publication geared specifically toward contractors is also used in the training provided contractors.</p> <p>The facility has 605 volunteers and contractors who have completed PREA training appropriate for the contact they have with inmates, all have been educated on the agency's zero tolerance policy, on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures, and all have been educated on how to report instances of sexual abuse and sexual harassment. All volunteer and contractor participants are required to sign form DOC-2786 where their signature verifies that they have received the training and that they understand the training they received. Training records of volunteers and contractors were presented for auditors' review and compliance with the standard was verified through an interview with the Volunteer Coordinator as well.</p> |

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| 115.33 | Inmate education |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Executive Director #72, Section XI, B, 3, page 8, requires that all inmates receive PREA information at the time of intake and that all offenders participate in Orientation within 30 days of arrival at the facility. Interviews with intake staff verified all inmates receive information at intake. In the last 12 months, 405 inmates, were received at the facility and inmate Orientation logs, with offender signatures, verified that all 405 inmates participated in Orientation and received PREA information. The log shows the offenders' date of arrival and date of Orientation, which is conducted weekly. By policy, all prisoners are required to attend.</p> <p>An Orientation outline was presented that verified that offenders receive, at Orientation, comprehensive education on their rights to be free from sexual abuse and sexual harassment, and retaliation for reporting such incidents, and on agency policies and procedures for responding to such incidents. Samples of materials given offenders at Orientation were provided and demonstrated that all required information was provided. Interviews with prisoners verified that they did receive information at intake and more comprehensive information at Orientation, which they attended within 30 days of their arrival at the facility.</p> <p>Inmate Orientation is held weekly and is conducted by a Housing Unit Supervisor and a Staff Social Worker. Orientation information presented to inmates includes information outlining their right to be safe from sexual violence, defines sexual misconduct, and gives inmates information on how to report an incident of sexual misconduct or sexual assault. Inmates are informed that they can file a complaint using the DOC-400, Offender Complaint Form, or that they can write directly to the Warden or Agency Head. Inmates are also given information on what to do if they are assaulted. Form POC-418 outlines supportive resources available to inmate victims of sexual abuse and harassment.</p> <p>Facility Procedure #900.103.05 outlines the process for educating all inmates at Intake and for providing comprehensive education within 30 days. Sample curriculum was provided that demonstrated that the inmate information was available in Spanish, in Braille, and on audio recording to meet the needs of hearing and sight disabled inmates and those with limited English proficiency. All prisoners interviewed acknowledged having been presented with information at intake and at Prisoner Orientation. All of them answered questions appropriately to demonstrate good knowledge of PREA matters.</p> <p>All inmates interviewed said they were educated about PREA and all answered specific questions with answers that demonstrated that they understood their rights, knew how to report, and understood mandatory reporting requirements of staff. During the tour of the facility, it was noted that PREA information was posted in all housing units, in the Library, Health Services waiting area and other areas of the facility where prisoners gather, including free numbers prisoners can call to report incidents.</p> <p>The Redgranite Inmate Handbook is available in both English and Spanish and the facility has an arrangement to provide translators, or obtain video recordings of the information, in other languages if needed. The information is available in print for prisoners who are hearing</p> |

disabled and on audio recording for prisoners who are sight disabled. A hard of hearing prisoner interviewee indicated that he had been provided a handbook with PREA information to read, a limited English speaking prisoner interviewee answered questions in a manner that demonstrated good understanding of the agency's zero tolerance policy, his rights, and how to report any incidence of sexual abuse or sexual harassment if necessary. A developmentally disabled prisoner interviewee said he remembered the information being presented in a manner he could understand and, during the interview, he demonstrated good comprehension of the agency's zero tolerance policy, of his right to be safe from sexual violence, and of the different ways he could report an incident if he needed to. Social Worker, Kari Shear, in an interview, said, "we make sure they receive the information in the language they understand . We tell them they can report it verbally or in writing, or to a family member. We have Spanish available and we would read it to them. I would ask questions as I was doing it, to ensure they understand what is being told to them."

Agency Head, Cathy Jess, said in an interview, "We have disability coordinators in our institutions who assess individual needs and make accommodations, contacts with language assistance, a person on contract that does all manuals, postings, PREA, or anything. She translates them into Spanish. Or in the library we have a Spanish interpreter, Braille, close captioned those types of things."

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| 115.34 | Specialized training: Investigations |
| | Auditor Overall Determination: Meets Standard |
| | <p>Auditor Discussion</p> <p>Executive Directive #72, Section IX, A, 4, page 8 requires that staff who investigate incidents of sexual abuse and sexual harassment receive specialized training on techniques for interviewing sexual abuse victims, proper use of Miranda, Garrity and Oddsen warnings, evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecutorial referral.</p> <p>All such training is documented and a lesson training plan and training records were presented for review during the audit. Interviews with investigative staff verified specialized training was received by them and that the specialized training in conducting such investigations in confinement settings was in addition to the general training provided to all employees. Sample certificates of training completion were presented as documentation of the specialized training for investigators.</p> |

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| 115.35 | Specialized training: Medical and mental health care |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Executive Directive #72, Section XI, A, 5 requires that all medical and mental health care practitioners who regularly work in Wisconsin DOC facilities be trained on how to detect and assess signs of abuse and harassment, how to preserve physical evidence, how to respond effectively and professionally and how to report allegations or suspicions. Copies of training completions and certifications were presented as documentation during the audit and interviews with medical and mental health staff confirmed that the training was provided, by the agency, as a web based module, in addition to the PREA training all employees receive. An interview with Dr. Werner, Psychological Services Director, verified that all health care staff receive the appropriate training. Dr. Werner also verified that any contracted medical or mental health staff also receive the training mandated for volunteers and contractors. A training curriculum, PREA for Healthcare Workers, was provided for auditors' review. An interview with the Facility Health Service Administrator, Lori Doehling, also verified their training.</p> |

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| 115.41 | Screening for risk of victimization and abusiveness |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Executive Directive #72, Section XIII, Page 8, requires that offenders be assessed, during an initial screening, within 72 hours of arrival at the facility and upon transfer to another facility. The facility documented that 100% of the 405 inmates, who arrived at the facility in the last 12 months, were properly assessed within 72 hours of intake.</p> <p>All screenings are done using an appropriate PREA SCREENING TOOL that includes the inmate's criminal history, the Screener's observation of the inmate's appearance, questions based on inmates' self-report of variables such as age, height, and weight, whether they consider themselves to be gay, lesbian, bisexual, transgender or whether they have an intersex condition. It also contains questions about their history of having been abused in the community or in confinement, their history of any of their own abusive behavior, their perception of their safety in the facility, and whether they are detained solely for civil immigration purposes. A copy of the assessment tool was provided for review.</p> <p>The screenings are performed by Psychological Services staff who have implemented a robust multi-disciplinary team approach to conducting each 72-hour risk assessment for incoming prisoners. This system includes psychological and social worker staff, as well as housing and medical staff. A description of the process by staff demonstrated that the assessment process is very thorough and carefully focused on the needs of each prisoner. It was obvious that staff take the risk assessments very seriously and it is felt that their process exceeds standards in the level of professional staff that are involved in the assessment of each prisoner and the expertise they bring to the process.</p> <p>The same Executive Directive also requires that inmates be reassessed, within 30 days of intake, based upon any additional, relevant information received by the facility since the intake screening. The PAQ indicates that all 405 inmates received at the facility, in the last 12 months, were reassessed within 30 days based on additional, relevant information. However, interviews with specialized staff members, with the Agency PREA Coordinator, and the facility PREA Compliance Manager, revealed that 30-day reassessments were only conducted with inmates for whom additional information was received within the 30 day period. All 405 inmates were considered for reassessment, within 30 days, but only those for whom additional, relevant information had been obtained were actually reassessed.</p> <p>Facility staff were very responsive to auditors' concerns about their 30-day review process and immediately developed a plan for housing unit staff to conduct the 30-day risk assessment reviews, on all prisoners received at the facility, while the Wisconsin Department of Corrections seeks greater clarification on the standard from the PRC. A directive was issued to staff and a tracking tool was developed. Samples of both were provided to the auditors. Auditors felt that the very thorough, and very well developed, assessment done at intake demonstrated strong commitment to meeting PREA standards at the facility. Therefore, we determined that any necessary corrective action had already been taken before the audit was completed and no further corrective action was necessary.</p> |

Executive Directive #72 also requires that after the 30 day reassessment, an offender'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 offender's risk of sexual victimization or abusiveness.

Executive Directive #72 requires that appropriate controls be placed on the dissemination of information and prohibits disciplining prisoners for not answering questions or not disclosing complete information. An interview with the facility PREA Compliance Manager confirmed that access to the information is restricted to staff who need that information to complete their jobs and interviews with investigative staff also verified that access to information obtained during screening is restricted to staff who need the information to perform their jobs.

An interview with the Agency PREA Coordinator revealed that determination of who should have access to the information involved a conversation with Health Services, Social Services and Records. It was decided that the best place for the information was the Social Services section, with the information stored in a large, confidential envelope that no one has access to except those who need the information to do their jobs, i.e., Social Work staff. The Department is moving to a process where the screening tool will be electronic only so that will offer greater ability to limit access to those who need it to perform their jobs.

| 115.42 | Use of screening information |
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| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Executive Directive #72, Section XIII, A, Page 10 requires that information obtained from the initial or follow-up screening be used to assign housing, bed, work, education and program assignments with the purpose of keeping offenders at high risk of being sexually victimized separated from those at high risk of being sexually abusive. A demonstration of the computerized housing assignment system, used by the facility, showed how the system is structured to prohibit unintentionally housing together inmates with incompatible PREA risk assessment scores.</p> <p>Additionally, the facility makes individualized determinations about how to ensure the safety of each inmate. The agency does not have dedicated facilities, or wings of facilities, for transgender or intersex inmates but considers each inmate's health and safety needs on a case-by-case basis. Redgranite Correctional Institution does not currently house any transgender inmates, or inmates who have been diagnosed with an intersex condition, but the facility does have the ability to allow such prisoners to shower separately from other inmates should any be received at the facility. This was evident during the facility tour</p> |

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| 115.43 | Protective Custody |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Executive Directive #72 , Section XIII, B, 1, Page 10, requires that offenders at high risk for sexual abuse not be involuntarily separated from the general population unless there is no available means of separation from likely abusers. If an assessment cannot be conducted immediately, the facility, by policy, may separate the offender involuntarily from the general population for less than 24 hours while completing the assessment. Redgranite Correctional Facility will use every other means of separating/protecting inmates prior to involuntarily segregating. Those means include changing housing unit assignments, transferring to another facility or using single cells, in one of two wings inside a Restricted Housing Unit, that have been converted for General Population use. Auditors visited these wings and noted that prisoners housed there have all the privileges of general population prisoners but have greater security than in a regular housing unit.</p> <p>The facility has not held any inmates, at risk of sexual victimization, in involuntary segregated housing in the past 12 months. Interviews with the Warden, Staff who supervise prisoners in Segregation, and the Facility PREA Compliance Manager verified this. In an interview, the Warden verified that they would use any other means available, i.e., moving, "across the street," to another housing unit, or even to another facility," prior to placing an inmate in segregation for protection.</p> <p>Agency policy also stipulates that if this type of situation were to occur, the separated inmate(s) would be afforded a review to determine whether there is a continued need for separation every 30 days.</p> |

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| 115.51 | Inmate reporting |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Executive Directive #72, Section XIV, Page 11 identifies multiple ways, including third party reporting, for offenders to privately report sexual abuse and sexual harassment, retaliation for reporting, and instances of employee neglect or violation of responsibilities that may have contributed to such incidents. A handbook provided to offenders instructs them that they can talk to a staff member to report sexual abuse and also outlines other ways to make a private report including filing an Offender Complaint, writing directly to the Warden, the Division of Adult Institutions Administrator or to the DOC Secretary, or by making a report directly to the local law enforcement agency themselves or through a third party.</p> <p>During the tour, it was noted that there are many postings in the facility providing prisoners phone numbers they can call to report sexual abuse. Phone numbers are available, 777 and 888, on the inmate phones, to report to facility officials and to an outside agency as well. These phone calls do not require an Inmate Pin, and are free, and that information is included on the postings which are posted in both English and Spanish.</p> <p>Prisoners who were interviewed described the various methods they can use to report sexual abuse. All of the interviewed prisoners were familiar with all methods of reporting, including third party reporting and the free phone numbers they can call. It was not unusual at all, for a prisoner, when asked if he was aware of ways he could report sexual abuse, to say that he could call his mother and ask her to report it. They also referred to the postings and the information on them.</p> <p>Executive Directive #72, Section XIV, C, Page 11, outlines that employees are, by policy, obligated to accept reports made verbally, in writing, anonymously, and from third parties, to promptly document any verbal reports, and immediately report to supervisory staff 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 DOC. Staff are also obligated to report any incidents of retaliation against offenders or employees who reported such an incident, and/or any employee neglect or violation of responsibilities that may have contributed to an incident or retaliation. All staff interviewed verified that they are obligated to accept any report of sexual abuse or sexual harassment or retaliation for having reported, from any offender and to document all reports received.</p> <p>The same Executive Directive outlines that the DOC shall provide a method for employees to privately report sexual abuse and sexual harassment of offenders. Examples of reports written by staff were provided for review. All examples had identifying information redacted.</p> |

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| 115.52 | Exhaustion of administrative remedies |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Executive Directive # 72, Section XV, Page 12, outlines that all sexual abuse and sexual harassment complaints filed through the Inmate Complaint Review system are to be immediately redirected and referred for investigation, that inmates will be notified within 30 days that the investigation has been commenced and that the Inmate Complaint Review Process has ended.</p> <p>The Executive Directive also says that a time limit may not be imposed on when an inmate may file a complaint regarding an allegation of sexual abuse or sexual harassment, that the complaint process shall not include a mandatory informal resolution requirement, that each facility shall ensure that an offender who alleges sexual abuse or harassment may submit a complaint without submitting it to an employee who is the subject of the complaint and that any such complaint is not referred to an employee who is the subject of the complaint.</p> <p>The agency does not have an emergency grievance procedure but the Executive Directive provides that an inmate who is at risk of imminent sexual abuse may contact any employee who is not the subject of the complaint to make a report and that staff is, by policy, obligated to immediately forward the complaint to facility leadership for immediate corrective action. In addition, third parties may, by policy, assist an inmate in filing complaints. Agency policy also requires that an offender not be disciplined for filing a complaint alleging sexual abuse or sexual harassment unless the complaint was filed in bad faith. The facility has disciplined three inmates, in the last 12 months, for filing sexual abuse complaints in bad faith. An example of a report of sexual abuse that was filed in bad faith was provided to show that because it could be proven through investigation that the sexual assault the inmate reported could not have happened either when or where he stated, the inmate had lied to staff and was disciplined.</p> |

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| 115.53 | Inmate access to outside confidential support services |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Executive Directive #72, Section XVI, 8, 5, Page 14 outlines the facility's responsibility to provide offenders with access to outside victim advocates, at the local, state and national level, by providing mailing addresses and phone numbers, and to enable reasonable communication between offenders and agencies in as confidential a manner as possible, meaning the phone calls are not recorded. The facility is also responsible for notifying inmates, in advance of their contacting any such agency, the extent to which reports of abuse will be subjected to mandatory reporting laws.</p> <p>The Inmate Handbook contains the names and contact information of the three closet rape crisis centers located in nearby Oshkosh, Neenah, and Beaver Dam, Wisconsin. Postings in Housing Units contain the same information. The information also identifies Staff Psychologist, Dr. Werner, as the facility crisis intervention specialist and provides a national rape crisis line number that prisoners can call. The facility had an MOU with a local agency, Reach Counseling Services, in Neenah, Wisconsin, but the advocacy agency has recently changed and a new MOU was in process at the time of the audit. The new agency is ASTOP, Assist Survivors, Treatment, Outreach and Prevention. A draft of the MOU was provided and an e-mail sent subsequent to the audit confirmed that leadership is actively pursuing the signing of the MOU. A phone call to ASTOP, subsequent to the audit, verified that the MOU has been signed and that the agency will provide advocacy services to offenders requesting those services.</p> <p>All of the inmates interviewed said they were aware of a local advocacy agency, and the hotlines that they could call, because the information was presented to them at Orientation and was posted on bulletin boards in days rooms, in the Health Services area, and in the Library. All of them interviewed were aware of the 777 and 888 numbers and that they were free calls. None of them said they had used the agency, or called the hotline numbers, but it was noted that at least some of the investigations done by the facility were generated from prisoners having called the 888 number.</p> <p>The Wisconsin Department of Corrections does not detain persons solely for civil immigration purposes.</p> |

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| 115.54 | Third-party reporting |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>The Wisconsin Department of Correction's web site contains information for third party reporting of sexual abuse and sexual harassment, provides instructions on how to report, and lists phone numbers to call to make a report. The same information is also posted in areas where visitors can see it such as the front lobby and the Visiting Room. Interviews with both staff and inmates indicated that all reports are taken seriously and investigated, including third party reports. Prisoners interviewed felt comfortable that if someone contacted the facility on their behalf staff would investigate.</p> |

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| 115.61 | Staff and agency reporting duties |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Executive Directive #72, Section, XIV, C, 1, Page 11 requires all staff to accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously and from third parties, to promptly document any verbal reports and to immediately report any knowledge, suspicion or information, any incidents of retaliation and any employee neglect that may have led to an incident.</p> <p>The Directive also requires that staff not reveal any information to anyone other than to supervisors, investigators and designated officials and that such information be limited to information necessary to make treatment, investigation and other security and management decisions. Staff interviews confirmed that all allegations are immediately reported to supervision and investigated. They indicated that complaints would only be shared with staff as necessary to respond to the allegation.</p> <p>All staff interviewed understood their duty to report all allegations immediately and to protect the confidentiality of all such reports from anyone other than to supervisor and staff designated to investigate, and those charged with security and the making of management decisions.</p> |

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| 115.62 | Agency protection duties |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Executive Directive #72, Section XVI, Page 13 requires department and facility staff to take immediate action to protect an offender when they learn that an offender is subject to a substantial risk of imminent sexual abuse. In the last 12 months, this situation has not occurred.</p> <p>Staff interviewed said that if they had received information, or for any reason believed, that a prisoner was subject to imminent sexual abuse, they would separate the inmate from the perpetrator if known, and/or place the potential victim in a safe spot where they could be closely monitored by staff. The facility has housing options to separate a victim from a potential known abuser, if the risk is imminent, including GP wings in a Restricted Housing Unit and moving an inmate to another housing unit.</p> <p>In an interview, the Warden identified that any prisoner believed to be in immediate danger of sexual abuse would be placed where he could be closely observed if the perpetrator was unknown. If the believed perpetrator was known, that inmate would be moved to separate the two. The Warden identified different options available when it is necessary to separate specific prisoners. Those options include moving one prisoner to another side of the complex, to a General Population cell inside a protective housing unit, or even by moving a threatening prisoner to a Temporary Segregation cell to protect other prisoners.</p> |

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| 115.63 | Reporting to other confinement facilities |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Executive Directive #72, Section XIV, C, Page 8 requires that within 72 hours of receiving an allegation that an inmate was sexually abused at another facility, staff will report the information to the head of the facility where the alleged abuse occurred and that reports of sexual abuse received from other facilities and agencies will be investigated in accordance with the PREA standards. The Executive Directive also requires that the appointing authority that receives the notification will document it and ensure that the allegation is investigated.</p> <p>In the last 12 months, the facility has received one report of sexual abuse that alleged occurred at Redgranite Correctional Institution, from another facility. That report was investigated in accordance with PREA Standards. Documentation provided included a copy of an Incident Report that detailed the investigative work that was done at Redgranite and was forwarded to the institution where the inmate who made the allegation is currently confined.</p> <p>In the past 12 months, the facility has notified another agency head, on six occasions, of reports made by prisoners alleging sexual assault that occurred at other institutions. The notifications were made within 72 hours of receipt of the allegation and were documented on the PREA Investigation Tracking Tool used by the Office of Special Operations. The allegations were investigated, Incident Reports were prepared and all information was forwarded to the appropriate institution. In an interview, the Warden verified that he does reort</p> |

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| 115.64 | Staff first responder duties |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Executive Directive #72, Section XVI, A, I, Page 13 identifies that the first security staff member to respond to an allegation of sexual abuse must separate the alleged victim and abuser, preserve and protect any crime scene, collect any physical evidence possible by requesting that the victim and abuser not change clothes, use the bathroom, smoke, drink or eat or take any other actions that could destroy physical evidence. If the first responder is not a security staff, the Executive Directive requires them to request that the alleged victim not take any actions that could destroy physical evidence and the notify security staff. In the past 12 months, eight allegations of sexual abuse were made and in each of those cases, Security staff were the first responders and they separated the victim and abuser as required by Departmental Executive Directive. None of the allegations was made timely for physical evidence collection.</p> <p>All staff interviewed were well versed in the agency's policy regarding First Responder responsibilities. Staff carry First Responder pocket cards to be used as a quick refresher. Interviews with all random staff demonstrated that knowledge of these requirements is consistent throughout the facility.</p> |

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| 115.65 | Coordinated response |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>The facility has a Coordinated Response Plan that gives step by step directions to be followed, by staff First Responders, Security Supervisors or the Security Director, non-staff First Responders, Medical Staff, Mental Health Staff, the PREA Compliance Manager, the Victim Services Coordinator, Investigators, the Appointing Authority/Designee, and the Sexual Incident Review Team. The plan also contains a Coordinated Response Plan contact list of staff to be contacted if such an incident occurs. Samples of the Redgranite Coordinated Response Plan and the Redgranite Coordinated Response Plan contact list were provided</p> |

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| 115.66 | Preservation of ability to protect inmates from contact with abusers |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>This standard is N/A because the State of Wisconsin has not entered into any Collective Bargaining agreements in the last 12 months.</p> |

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| 115.67 | Agency protection against retaliation |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Executive Directive #72, Section XVIII, A and B, Page 16, requires each facility to designate staff to monitor retaliation to ensure that all offenders and employees involved in the reporting or investigation of sexual abuse and/or sexual harassment are protected. Security Director, David Tarr, and Psychological Services Supervisor, Dr. Nicholas Werner, are designated as employees to monitor retaliation at Redgranite Correctional Institution. Monitoring continues for at least 90 days and longer if warranted. Agency Director, Cathy Jess, said in an interview, "The time frame is 90 days but it could be longer than that depending on the status review with the inmate victim, making sure there are no conduct reports, housing moves, or anything that looks like there may have been retaliation and these efforts are documented."</p> <p>Wisconsin DOC Form 2767, the Sexual Abuse and Sexual Harassment Incident Victim Services Coordinator Response Checklist, is used to track the facility's response to allegations of sexual abuse and sexual harassment, starting with interviewing the victim as soon as possible after receiving the referral, moving through all the steps of the process, and ending with the monitoring period that includes q30 day status checks with the alleged victim through a minimum of a 90 day monitoring period.</p> <p>Wisconsin DOC Form 2805, Sexual Abuse Allegation Staff Retaliation Monitoring, requires staff designated with monitoring to document, in writing, efforts to monitor staff for retaliation, for at least 90 days, following a report of staff-on-offender or offender-on-offender sexual abuse. In addition to conversations with staff, monitoring may include reviews of performance evaluations or reassignments to determine if retaliation has occurred. The facility has had no incidents of retaliation in the past 12 months.</p> |

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| 115.68 | Post-allegation protective custody |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Executive Directive #72, Section XVI, A, 5, Page 14, requires that a inmate who is alleged to have suffered sexual abuse shall be separated involuntarily from the general population only if no other suitable alternatives exist. The separation will only be until an alternative becomes available and will ordinarily not last longer than 30 days. Any such placement that does last longer than 30 days will require an evaluation every 30 days using Wisconsin DOC Form 30, the Review of Inmate in Restrictive Housing form. In the past 12 months, no inmates were involuntarily separated from the general population due to allegations of having suffered sexual abuse. In interviews, both the Warden and the Facility PREA Compliance Manager said that the Redgranite Correctional Institution has never involuntarily segregated a prisoner for protection and identified alternative measures they would use including moving a prisoner to another part of the compound, to another housing unit, to a cell in a General Population wing of a Segregation Unit and even to another facility.</p> <p>Through review of the agency policy, and interviews with the facility staff, in which they described the restricted housing process, the facility is found to be compliant with this standard.</p> |

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| 115.71 | Criminal and administrative agency investigations |
| | <p data-bbox="252 170 896 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 248 523 282">Auditor Discussion</p> <p data-bbox="252 327 1469 658">Executive Directive #72, Section XVII, Page 15, requires staff who have received specialized training to conduct an investigation for all allegations of sexual abuse and sexual harassment, regardless of how the allegation was received, and stipulates that allegations that involve potentially criminal behavior will be referred to local law enforcement for investigation. An interview with investigative staff confirmed that all allegations are investigated and that investigations begin as soon as the report is received with staff conducting initial interviews, preserving evidence, sending the offender to be examined by a SANE, reviewing video footage and reviewing all available facts pertinent to the case.</p> <p data-bbox="252 712 1477 1043">The policy requires staff to gather and preserve direct and circumstantial evidence, including any physical and DNA evidence, and requires them to interview alleged victims, suspected perpetrators, and witnesses, and to review any prior complaints and reports of sexual abuse involving the suspected perpetrator. The Executive Directive also says that the credibility of an alleged victim, suspect, or witness shall be assessed on an individual basis and shall not be determined by the person's status as offender or employee. The Department also shall not require an offender who alleges sexual abuse to submit to a polygraph or other truth-telling device as a condition for proceeding with the investigation of the allegation.</p> <p data-bbox="252 1097 1445 1384">The Executive Directive also says that administrative investigations must include an effort to determine whether staff actions or failures to act contributed to the abuse and shall be documented in a written report that shall be retained for as long as the alleged abuser is incarcerated or employed by the Wisconsin Department of Corrections plus 10 years. Administrative investigations shall include a description of the physical and testimonial evidence, the reasoning behind credibility assessments and the investigative facts and findings.</p> <p data-bbox="252 1438 1477 1599">The departure of an alleged abuser or victim from employment or incarceration with the facility or the recantation of the allegation, will not constitute a basis for terminating any investigation. When outside agencies investigate an allegation of abuse, the facility will cooperate with the investigation.</p> <p data-bbox="252 1653 1477 1899">Following an investigation of an allegation of sexual abuse, the facility is responsible for informing the alleged victim and documenting the notification, as to whether the allegation has been substantiated, unsubstantiated, or unfounded. If the agency did not conduct the investigation, it shall request the relevant information from the investigative agency in order to inform the complainant. The DOC's obligation to report shall terminate if the alleged victim is released from custody.</p> <p data-bbox="252 1953 1477 2157">If an offender brings an allegation of sexual abuse against an employee, the agency will, after investigation, notify the offender when the staff person is no longer posted in the offender's housing unit, when the employee is no longer employed at the facility, or when the agency learns that the employee has been indicted on, or convicted of, a charge related to the original allegation of sexual abuse.</p> |

Following an offender's allegation of sexual abuse by another offender, the agency shall inform the offender when it is learned that alleged abuser has been indicted on, or convicted of, a charge related to sexual abuse.

The Redgranite Correctional Institution conducts administrative investigations on all allegations of sexual abuse and sexual harassment and refers all allegations to the Redgranite Police Department. Samples of investigations that are kept in the Security Director's office were reviewed during the audit. The facility retains records as long as the alleged abuser is employed by the DOC, or is incarcerated by the DOC, plus 10 years, which exceeds the requirement of the standard. In the past 12 months the Redgranite Correctional Facility has not had any instances of substantiated allegations of conduct that appear to be criminal that were referred for prosecution.

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| 115.72 | Evidentiary standard for administrative investigations |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | Executive Directive #72, XVII, G, Page 16, says that the Wisconsin Department of Corrections shall impose no standard higher than a preponderance of the evidence in determining if allegations of sexual abuse or sexual harassment are substantiated. Interviews with investigative staff and Security Director, Dave Tarr, confirmed that. |

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| 115.73 | Reporting to inmates |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Executive Directive #72, XVII, K, Page 16 requires that alleged victims be informed of the outcome of all investigations done by the facility whether the allegation has been determined to be substantiated, unsubstantiated or unfounded. Staff presented templates of memos that are used to notify alleged victims. The templates include information about available advocacy services, how to access those services and how to report any retaliation that an inmate might experience. The Executive Directive also requires the agency to request relevant information from any investigation that was investigated by another agency in order to inform the alleged victim. This reporting is documented.</p> <p>If an offender brings an allegation of sexual abuse against an employee, the agency will, after investigation, notify the offender when the staff person is no longer posted in the offender's housing unit, when the employee is no longer employed at the facility, or when the agency learns that the employee has been indicted on, or convicted of, a charge related to the original allegation of sexual abuse.</p> <p>Following an offender's allegation of sexual abuse by another offender, the agency shall inform the offender when it is learned that alleged abuser has been indicted on, or convicted of, a charge related to sexual abuse.</p> <p>In the past 12 months seven reports of sexual abuse were received by the facility and all seven were investigated administratively and none were investigated by an outside agency. All seven complainants were notified of the findings and the notifications were documented.</p> |

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| 115.76 | Disciplinary sanctions for staff |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Executive Directive #72, Section XIX, A, Page 17 provides that any staff who are found in violation of the Wisconsin Department of Correction's sexual abuse, sexual harassment, and retaliation policies will be subjected to sanctions up to and including termination, that termination is the presumptive disciplinary action for such a violation, and that all terminations, including resignations that would have resulted in termination, will be reported to any relevant licensing bodies.</p> <p>In the past 12 months, Redgranite Correctional Institution has not terminated any employees, and has not disciplined any employees short of termination, for violating the Department's sexual abuse or sexual harassment policies. The same Executive Directive requires that any terminations for violations for agency sexual abuse or harassment policies would be reported to local law enforcement, unless the activity was clearly not criminal.</p> |

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| 115.77 | Corrective action for contractors and volunteers |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Executive Directive #72, Section, A, 4, Page 17 holds that any volunteer or contractor who engages in sexual abuse will be prohibited from contact with inmates and will be reported to relevant licensing bodies. There have been no applicable allegations of volunteers or contractors reported to local law enforcement, or relevant licensing bodies, for violations of the agency's sexual abuse policies. Interviews with staff confirmed their understanding and willingness to take required action according to this standard.</p> |

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| 115.78 | Disciplinary sanctions for inmates |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Executive Directive #72, Section XIX, B, Page 17 holds that offenders who have committed offender-on-offender sexual abuse are subject to disciplinary sanctions pursuant to a formal disciplinary process. The disciplinary process will consider whether mental illness or mental disability of the perpetrator may have contributed to the behavior, when determining a sanction, and the facility will consider requiring a perpetrator to participate in therapy or counseling sessions.</p> <p>An offender may be disciplined for sexual contact with an employee only if it is determined that the employee did not consent to the contact and if an investigation reveals that an unfounded allegation was made in good faith, the offender will not be disciplined. Consensual sexual contact between offenders will not be considered sexual abuse if it can be determined that the activity was not coerced.</p> <p>In the past 12 months, the facility has not experienced any administrative findings of inmate-on-inmate sexual abuse that occurred at the facility and has not experienced any criminal findings of guilt for inmate-on-inmate sexual abuse that have occurred at the facility.</p> |

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| 115.81 | Medical and mental health screenings; history of sexual abuse |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>At the Redgranite Correctional Institution, the Psychological Services Unit is responsible for completing the screenings and risk assessments of prisoners that take place within 72 hours of intake and the reassessment that is done within 30 days of arrival at the institution. Executive Directive #72, and Facility Procedure #900.507.03 both provide that if either of those assessments indicates that an offender has experienced prior sexual victimization, or has perpetrated sexual abuse, regardless of where it occurred, the offender will be offered a follow-up meeting with a mental health provider within 14 days of the screening. A PREA database is used to ensure all such cases are offered a follow-up within 14 days.</p> <p>Facility staff indicated that 100% of offenders who indicated they had been sexually abused or had been an abuser, were referred for a follow-up meeting with a mental health provider. Documentation included the PREA Database Tracking sheet that shows offender name and number, date of arrival, date of PREA screen and whether the inmate was a victim or perpetrator of abuse, whether a follow-up was offered and the date of the follow up meeting with mental health staff, unless the inmate declined. Also submitted was WDOC form 3473, the Psychological Services Clinical Contact form that is used to document all psychological services contacts.</p> |

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| 115.82 | Access to emergency medical and mental health services |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Executive Directive #72, Section XVI, B, 2, Page 14 dictates that victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services and that if no qualified medical or mental health staff are on duty, security staff first responders shall take the first steps to protect the victim and immediately notify the appropriate medical and mental health staff. In an interview, Dr. Werner, Psychological Services Director said that physicians and nurses are on call 24/7, as are mental health staff and psychologists, and would be called in if needed.</p> <p>Inmates are provided timely access to medical care and sexually transmitted disease prophylaxis. Services provided by qualified medical or mental health staff are deemed appropriate based on their professional judgment and all services will be provided at no cost to the offender.</p> <p>WDOC form 1923 explains the limits to confidentiality of information given by an inmate and explains in detail the concept of mandatory reporting.</p> |

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| 115.83 | Ongoing medical and mental health care for sexual abuse victims and abusers |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Executive Directive #72, Section XVI, B, 6, Page 15, says, "The facility shall offer medical and mental health evaluation and, as appropriate, treatment to all offenders who have been victimized by sexual abuse in any confinement setting. The evaluation 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." The Directive also outlines that the facility will attempt to conduct a mental health evaluation of any inmate-on-inmate abuser within 60 days of learning of the incident of abuse. Dr. Werner, Psychological Services Director said that appropriate medical and mental health evaluation and treatment would include, "a review of the case and current documentation, and a determination of who is the most qualified to provide treatment, who care provide trauma informed care, finding out the facts of the case and sitting down with the prisoner to determine which symptoms they are experiencing and then developing a treatment plan to treat those symptoms." Dr. Werner also said that he feels that the medical and mental health treatment services offered are consistent with the community level of care, "if not higher."</p> <p>The facility also provides education and testing for STDs as necessary depending on the circumstances. No females are incarcerated at Redgranite Institution so no pregnancy tests are necessary. The directive stipulates that all such services shall be provided at no charge to the offender.</p> |

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| 115.86 | Sexual abuse incident reviews |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Redgranite Facility Procedure #: 900.103.11 calls for a review to be conducted within 30 days of the date of the conclusion of every sexual abuse investigation unless the allegation was determined to be unfounded. The review is to include medical and mental health staff, upper level management staff including supervisors and investigators. The team is required to consider any motivation for the incident or allegation such as race, gender identity, gang affiliation, etc. They are also to consider whether any department policies need to be changed to better detect, prevent and respond, whether there are any physical barriers in the area where the alleged incident occurred that may have contributed to the incident, if the facility staffing levels are adequate and whether monitoring technology should be deployed or augmented.</p> <p>The team is required to submit their report to the Warden and the PREA Compliance Manager, along with any recommendations, and the facility is obligated to follow the recommendations or demonstrate in writing the reasons for not doing so.</p> <p>Three sexual abuse incident reviews were completed in the last 12 months and were offered as documentation during the audit. An interview with the Warden revealed that the incident reviews help identify needed policy or practice changes, additional training that might be needed and, if multiple unsubstantiated allegations appear to come from the same area inside the facility, a need for additional video monitoring equipment. Confirmation of this process was also demonstrated through staff interviews.</p> |

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| 115.87 | Data collection |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Executive Directive #72 Section XXI, A, 1, Page 18 requires the agency to collect accurate, uniform data from incident-based reports, investigation files and sexual abuse incident reviews for every allegation of sexual abuse within facilities, including any facilities it contracts with for the confinement of offenders, using a standardized instrument and set of definitions. The data includes the information to answer all questions from the Department of Justice Survey of Sexual Victimization. The data, aggregated annually, is reported to the Department of Justice and is posted to the agency website annually. Public identifiers are removed prior to posting to the web site.</p> |

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| 115.88 | Data review for corrective action |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Executive Directive #72 calls for the data collected and aggregated to be analyzed to assess and improve effectiveness of the agency's policies regarding sexual abuse prevention, detection and response, to improve training efforts by identifying problem areas, and to take corrective action on an ongoing basis. It also calls for an annual report to be prepared of findings and of corrective actions for facilities and for the department as a whole, for the data to be compared to previous years findings and for the report to be posted on the agency website. Agency head, Cathy Jess, said in an interview, "We do an after action on it on every incident. Investigators and health team victim services coordinator look at the factors to see if there is something we can do with policy, cameras, more staffing in these areas, or even physical plant modification in the area. The data is compiled and kept by our PREA office. "</p> <p>A copy of the annual report was presented as documentation and the report is published on the agency website. Review of the agency website demonstrated the multi-year practice of posting an annual PREA statistical report, including information related to the Survey on Sexual Victimization.</p> |

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| 115.89 | Data storage, publication, and destruction |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Executive Directive #72, Section XXI, A, Page 19 calls for all data to be securely retained and maintained for at least 10 years after the date of initial collection. An interview with the Agency PREA Coordinator verified that the agency makes all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public as least annually through its website. Before making aggregated sexual abuse data publicly available, the agency removes all personal identifiers.</p> |

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| 115.401 | Frequency and scope of audits |
| | <p data-bbox="252 168 901 201">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 246 526 280">Auditor Discussion</p> <p data-bbox="252 324 1484 448">Redgranite Correctional Institution was audited in October of 2015. The current audit was conducted on April 2nd and 3rd, 2017. The report from the October, 2015 audit is available on the agency website. All facility PREA audit reports are published on the web site.</p> <p data-bbox="252 492 1484 996">Auditors reviewed all relevant agency-wide policies, procedures, reports internal and external audits, and accreditations for the facility. Auditors reviewed a sampling of relevant documentation and other records for the past 12 months. Much of the documentation was provided electronically, prior to the audit and staff provided all documentation asked for during the audit. A representative sample of inmates, staff and supervisors was interviewed. Random inmates were chosen for interview selecting two from each housing unit and by interviewing prisoners randomly during a tour of the facility. Staff were chosen randomly from daily assignment sheets and during the tour of the facility. Interviews were private and inmates were provided an address to send confidential information or other correspondence to the auditor. Two letters were received by the auditor, one prior to the audit and one after the audit was concluded. Both were followed up on with the facility. A phone call to a local agency verified that they were in the process of signing an MOU with the facility for advocacy services.</p> |

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| 115.403 | Audit contents and findings |
| | <p data-bbox="252 1205 901 1238">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 1283 526 1317">Auditor Discussion</p> <p data-bbox="252 1361 1388 1395">The agency publishes all completed facility PREA Audit Reports on the agency website.</p> |

Appendix: Provision Findings

| 115.11 (a) | Zero tolerance of sexual abuse and sexual harassment; PREA coordinator | |
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| | 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 |

| 115.11 (b) | Zero tolerance of sexual abuse and sexual harassment; PREA coordinator | |
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| | 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 |

| 115.11 (c) | Zero tolerance of sexual abuse and sexual harassment; PREA coordinator | |
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| | 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 |

| 115.12 (a) | Contracting with other entities for the confinement of inmates | |
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| | 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.) | yes |

| 115.12 (b) | Contracting with other entities for the confinement of inmates | |
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| | Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure 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 OR the response to 115.12(a)-1 is "NO".) | yes |

| 115.13 (a) | Supervision and monitoring | |
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| | Does the agency ensure that each facility has developed a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse? | yes |
| | Does the agency ensure that each facility has documented a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse? | yes |
| | Does the agency ensure that each facility's staffing plan takes into consideration the generally accepted detention and correctional practices in calculating adequate staffing levels and determining the need for video monitoring? | yes |
| | Does the agency ensure that each facility's staffing plan takes into consideration any judicial findings of inadequacy in calculating adequate staffing levels and determining the need for video monitoring? | yes |
| | Does the agency ensure that each facility's staffing plan takes into consideration any findings of inadequacy from Federal investigative agencies in calculating adequate staffing levels and determining the need for video monitoring? | yes |
| | Does the agency ensure that each facility's staffing plan takes into consideration any findings of inadequacy from internal or external oversight bodies in calculating adequate staffing levels and determining the need for video monitoring? | yes |
| | Does the agency ensure that each facility's staffing plan takes into consideration all components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated) in calculating adequate staffing levels and determining the need for video monitoring? | yes |
| | Does the agency ensure that each facility's staffing plan takes into consideration the composition of the inmate population in calculating adequate staffing levels and determining the need for video monitoring? | yes |
| | Does the agency ensure that each facility's staffing plan takes into | yes |

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| | consideration the number and placement of supervisory staff in calculating adequate staffing levels and determining the need for video monitoring? | |
| | Does the agency ensure that each facility's staffing plan takes into consideration the institution programs occurring on a particular shift in calculating adequate staffing levels and determining the need for video monitoring? | yes |
| | Does the agency ensure that each facility's staffing plan takes into consideration any applicable State or local laws, regulations, or standards in calculating adequate staffing levels and determining the need for video monitoring? | yes |
| | Does the agency ensure that each facility's staffing plan takes into consideration the prevalence of substantiated and unsubstantiated incidents of sexual abuse in calculating adequate staffing levels and determining the need for video monitoring? | yes |
| | Does the agency ensure that each facility's staffing plan takes into consideration any other relevant factors in calculating adequate staffing levels and determining the need for video monitoring ? | yes |

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| 115.13 (b) | Supervision and monitoring | |
| | 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 |

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| 115.13 (c) | Supervision and monitoring | |
| | 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 |

| 115.13 (d) | Supervision and monitoring | |
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| | 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 |

| 115.14 (a) | Youthful inmates | |
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| | 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).) | na |

| 115.14 (b) | Youthful inmates | |
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| | 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).) | na |
| | 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).) | na |

| 115.14 (c) | Youthful inmates | |
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| | 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).) | na |
| | 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).) | na |
| | 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).) | na |

| 115.15 (a) | Limits to cross-gender viewing and searches | |
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| | 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 |

| 115.15 (b) | Limits to cross-gender viewing and searches | |
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| | Does the facility always refrain from conducting cross-gender pat-down searches of female inmates in non-exigent circumstances? (N/A here for facilities with less than 50 inmates before August 20,2017.) | 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 here for facilities with less than 50 inmates before August 20,2017.) | na |

| 115.15 (c) | Limits to cross-gender viewing and searches | |
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| | 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? | no |

| 115.15 (d) | Limits to cross-gender viewing and searches | |
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| | Does the facility implement a policy and practice 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 |

| 115.15 (e) | Limits to cross-gender viewing and searches | |
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| | 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 |

| 115.15 (f) | Limits to cross-gender viewing and searches | |
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| | 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 |

| 115.16 (a) | Inmates with disabilities and inmates who are limited English proficient | |
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| | 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 | yes |

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|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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? | |
| | 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 with inmates with disabilities including inmates who: Have intellectual disabilities? | 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: 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 |

| 115.16 (b) | Inmates with disabilities and inmates who are limited English proficient | |
|------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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 |

| 115.16 (c) | Inmates with disabilities and inmates who are limited English proficient | |
|------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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 |

| 115.17 (a) | Hiring and promotion decisions | |
|------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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 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 |
| | 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 |

| 115.17 (b) | Hiring and promotion decisions | |
|------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | Does the agency consider 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? | yes |

| 115.17 (c) | Hiring and promotion decisions | |
|------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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 |

| 115.17 (d) | Hiring and promotion decisions | |
|------------|------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates? | yes |

| 115.17 (e) | Hiring and promotion decisions | |
|------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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 |

| 115.17 (f) | Hiring and promotion decisions | |
|------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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 |

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| 115.17 (g) | Hiring and promotion decisions | |
| | Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination? | yes |

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| 115.17 (h) | Hiring and promotion decisions | |
| | 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 |

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|-------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|
| 115.18 (a) | Upgrades to facilities and technologies | |
| | 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 |

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|-------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|
| 115.18 (b) | Upgrades to facilities and technologies | |
| | 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 |

| 115.21 (a) | Evidence protocol and forensic medical examinations | |
|------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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 |

| 115.21 (b) | Evidence protocol and forensic medical examinations | |
|------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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 |

| 115.21 (c) | Evidence protocol and forensic medical examinations | |
|------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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 |

| 115.21 (d) | Evidence protocol and forensic medical examinations | |
|------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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? | yes |
| | Has the agency documented its efforts to secure services from rape crisis centers? | yes |

| 115.21 (e) | Evidence protocol and forensic medical examinations | |
|------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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 |

| 115.21 (f) | Evidence protocol and forensic medical examinations | |
|------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating entity 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.) | yes |

| 115.21 (h) | Evidence protocol and forensic medical examinations | |
|------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|
| | 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 attempts to make a victim advocate from a rape crisis center available to victims per 115.21(d) above.) | na |

| 115.22 (a) | Policies to ensure referrals of allegations for investigations | |
|------------|---------------------------------------------------------------------------------------------------------------------------|-----|
| | 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 |

| 115.22 (b) | Policies to ensure referrals of allegations for investigations | |
|------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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 |

| 115.22 (c) | Policies to ensure referrals of allegations for investigations | |
|------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | If a separate entity is responsible for conducting criminal investigations, does such publication 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).) | yes |

| 115.31 (a) | Employee training | |
|------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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 |

| 115.31 (b) | Employee training | |
|------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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 |

| 115.31 (c) | Employee training | |
|------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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 |

| 115.31 (d) | Employee training | |
|------------|---------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | Does the agency document, through employee signature or electronic verification, that employees understand the training they have received? | yes |

| 115.32 (a) | Volunteer and contractor training | |
|------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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 |

| 115.32 (b) | Volunteer and contractor training | |
|------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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 |

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| 115.32 (c) | Volunteer and contractor training | |
| | Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received? | yes |

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| 115.33 (a) | Inmate education | |
| | 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 |

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|-------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| 115.33 (b) | Inmate education | |
| | 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 |

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|-------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| 115.33 (c) | Inmate education | |
| | Have all inmates received such education? | 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 |

| 115.33 (d) | Inmate education | |
|------------|-----------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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 |

| 115.33 (e) | Inmate education | |
|------------|---------------------------------------------------------------------------------------------|-----|
| | Does the agency maintain documentation of inmate participation in these education sessions? | yes |

| 115.33 (f) | Inmate education | |
|------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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 |

| 115.34 (a) | Specialized training: Investigations | |
|------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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 have received 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 |

| 115.34 (b) | Specialized training: Investigations | |
|------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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 Garrity warnings? (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 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 |

| 115.34 (c) | Specialized training: Investigations | |
|------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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 |

| 115.35 (a) | Specialized training: Medical and mental health care | |
|------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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? | 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? | 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? | 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 suspicions of sexual abuse and sexual harassment? | yes |

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|-------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|
| 115.35 (b) | Specialized training: Medical and mental health care | |
| | 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.) | na |

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| 115.35 (c) | Specialized training: Medical and mental health care | |
| | 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? | yes |

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| 115.35 (d) | Specialized training: Medical and mental health care | |
| | Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? | yes |
| | Do medical and mental health care practitioners contracted by and volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? | yes |

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| 115.41 (a) | Screening for risk of victimization and abusiveness | |
| | 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 |

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|-------------------|----------------------------------------------------------------------------------------|-----|
| 115.41 (b) | Screening for risk of victimization and abusiveness | |
| | Do intake screenings ordinarily take place within 72 hours of arrival at the facility? | yes |

| 115.41 (c) | Screening for risk of victimization and abusiveness | |
|------------|---------------------------------------------------------------------------------------|-----|
| | Are all PREA screening assessments conducted using an objective screening instrument? | yes |

| 115.41 (d) | Screening for risk of victimization and abusiveness | |
|------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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) Whether the inmate is detained solely for civil immigration purposes? | yes |

| 115.41 (e) | Screening for risk of victimization and abusiveness | |
|------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when 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, when 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, when known to the agency: history of prior institutional violence or sexual abuse? | yes |

| 115.41 (f) | Screening for risk of victimization and abusiveness | |
|------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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 |

| 115.41 (g) | Screening for risk of victimization and abusiveness | |
|------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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 a: Incident of sexual abuse? | yes |
| | Does the facility reassess an inmate's risk level when warranted due to a: Receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness? | yes |

| 115.41 (h) | Screening for risk of victimization and abusiveness | |
|------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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 |

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| 115.41 (i) | Screening for risk of victimization and abusiveness | |
| | 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 information is not exploited to the inmate's detriment by staff or other inmates? | yes |

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| 115.42 (a) | Use of screening information | |
| | 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 |

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|-------------------|---------------------------------------------------------------------------------------------------|-----|
| 115.42 (b) | Use of screening information | |
| | Does the agency make individualized determinations about how to ensure the safety of each inmate? | yes |

| 115.42 (c) | Use of screening information | |
|------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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 present management or security problems? | yes |

| 115.42 (d) | Use of screening information | |
|------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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 |

| 115.42 (e) | Use of screening information | |
|------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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 |

| 115.42 (f) | Use of screening information | |
|------------|-----------------------------------------------------------------------------------------------------|-----|
| | Are transgender and intersex inmates given the opportunity to shower separately from other inmates? | yes |

| 115.42 (g) | Use of screening information | |
|------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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? | 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? | 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? | yes |

| 115.43 (a) | Protective Custody | |
|------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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 |

| 115.43 (b) | Protective Custody | |
|------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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 access to programs, privileges, education, or work opportunities, does the facility document: The opportunities that have been limited? | yes |
| | If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The duration of the limitation? | yes |
| | If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The reasons for such limitations? | yes |

| 115.43 (c) | Protective Custody | |
|------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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 |

| 115.43 (d) | Protective Custody | |
|------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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 |

| | | |
|-------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| 115.43 (e) | Protective Custody | |
| | 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 |

| | | |
|-------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| 115.51 (a) | Inmate reporting | |
| | 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 |

| | | |
|-------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| 115.51 (b) | Inmate reporting | |
| | 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 anonymous upon request? | yes |
| | 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? | yes |

| 115.51 (c) | Inmate reporting | |
|------------|---------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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 |

| 115.51 (d) | Inmate reporting | |
|------------|---------------------------------------------------------------------------------------------------------------|-----|
| | Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates? | yes |

| 115.52 (a) | Exhaustion of administrative remedies | |
|------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|
| | 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. | no |

| 115.52 (b) | Exhaustion of administrative remedies | |
|------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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 |

| 115.52 (c) | Exhaustion of administrative remedies | |
|------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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 this standard.) | yes |
| | 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 |

| 115.52 (d) | Exhaustion of administrative remedies | |
|------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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 |

| 115.52 (e) | Exhaustion of administrative remedies | |
|------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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 |

| 115.52 (f) | Exhaustion of administrative remedies | |
|------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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 |

| 115.52 (g) | Exhaustion of administrative remedies | |
|------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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 |

| 115.53 (a) | Inmate access to outside confidential support services | |
|------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? | yes |
| | Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible? | yes |

| 115.53 (b) | Inmate access to outside confidential support services | |
|------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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 |

| 115.53 (c) | Inmate access to outside confidential support services | |
|------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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 |

| 115.54 (a) | Third-party reporting | |
|------------|-----------------------------------------------------------------------------------------------------------------------------|-----|
| | 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 |

| 115.61 (a) | Staff and agency reporting duties | |
|------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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 abuse or sexual harassment or retaliation? | yes |

| 115.61 (b) | Staff and agency reporting duties | |
|------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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 |

| 115.61 (c) | Staff and agency reporting duties | |
|------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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 |

| 115.61 (d) | Staff and agency reporting duties | |
|------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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 |

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| 115.61 (e) | Staff and agency reporting duties | |
| | 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 |

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| 115.62 (a) | Agency protection duties | |
| | 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 |

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| 115.63 (a) | Reporting to other confinement facilities | |
| | 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 |

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| 115.63 (b) | Reporting to other confinement facilities | |
| | Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation? | yes |

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| 115.63 (c) | Reporting to other confinement facilities | |
| | Does the agency document that it has provided such notification? | yes |

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| 115.63 (d) | Reporting to other confinement facilities | |
| | Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards? | yes |

| 115.64 (a) | Staff first responder duties | |
|------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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 |

| 115.64 (b) | Staff first responder duties | |
|------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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 |

| 115.65 (a) | Coordinated response | |
|------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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 response to an incident of sexual abuse? | yes |

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| 115.66 (a) | Preservation of ability to protect inmates from contact with abusers | |
| | 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 |

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| 115.67 (a) | Agency protection against retaliation | |
| | 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 |

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| 115.67 (b) | Agency protection against retaliation | |
| | 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 |

| 115.67 (c) | Agency protection against 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 the conduct and treatment of residents 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 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? | 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 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 |

| 115.67 (d) | Agency protection against retaliation | |
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| | In the case of inmates, does such monitoring also include periodic status checks? | yes |

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| 115.67 (e) | Agency protection against retaliation | |
| | 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 |

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| 115.68 (a) | Post-allegation protective custody | |
| | 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 |

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| 115.71 (a) | Criminal and administrative agency investigations | |
| | When the agency conducts its own investigations into allegations 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).) | yes |
| | 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 |

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| 115.71 (b) | Criminal and administrative agency investigations | |
| | 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 |

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| 115.71 (c) | Criminal and administrative agency investigations | |
| | 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 |

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| 115.71 (d) | Criminal and administrative agency investigations | |
| | 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 |

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| 115.71 (e) | Criminal and administrative agency investigations | |
| | 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 |

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| 115.71 (f) | Criminal and administrative agency investigations | |
| | 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 |

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| 115.71 (g) | Criminal and administrative agency investigations | |
| | 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 |

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| 115.71 (h) | Criminal and administrative agency investigations | |
| | Are all substantiated allegations of conduct that appears to be criminal referred for prosecution? | yes |

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| 115.71 (i) | Criminal and administrative agency investigations | |
| | 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 |

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| 115.71 (j) | Criminal and administrative agency investigations | |
| | 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 |

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| 115.71 (l) | Criminal and administrative agency investigations | |
| | 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).) | yes |

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| 115.72 (a) | Evidentiary standard for administrative investigations | |
| | 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 |

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| 115.73 (a) | Reporting to inmates | |
| | 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 |

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| 115.73 (b) | Reporting to inmates | |
| | 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.) | yes |

| 115.73 (c) | Reporting to inmates | |
|------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | Following a 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 posted within the inmate's unit? | yes |
| | Following a 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 a 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 a 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 |

| 115.73 (d) | Reporting to inmates | |
|------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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 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? | yes |

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| 115.73 (e) | Reporting to inmates | |
| | Does the agency document all such notifications or attempted notifications? | yes |

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| 115.76 (a) | Disciplinary sanctions for staff | |
| | Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies? | yes |

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| 115.76 (b) | Disciplinary sanctions for staff | |
| | Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse? | yes |

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| 115.76 (c) | Disciplinary sanctions for staff | |
| | 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 |

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| 115.76 (d) | Disciplinary sanctions for staff | |
| | 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 |

| 115.77 (a) | Corrective action for contractors and volunteers | |
|------------|--------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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 |

| 115.77 (b) | Corrective action for contractors and volunteers | |
|------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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 |

| 115.78 (a) | Disciplinary sanctions for inmates | |
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| | 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 |

| 115.78 (b) | Disciplinary sanctions for inmates | |
|------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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 |

| 115.78 (c) | Disciplinary sanctions for inmates | |
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| | 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 |

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| 115.78 (d) | Disciplinary sanctions for inmates | |
| | 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 |

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| 115.78 (e) | Disciplinary sanctions for inmates | |
| | 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 |

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| 115.78 (f) | Disciplinary sanctions for inmates | |
| | 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 evidence sufficient to substantiate the allegation? | yes |

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| 115.78 (g) | Disciplinary sanctions for 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 |

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| 115.81 (a) | Medical and mental health screenings; history of sexual abuse | |
| | 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? | yes |

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| 115.81 (b) | Medical and mental health screenings; history of sexual abuse | |
| | 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 |

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| 115.81 (c) | Medical and mental health screenings; history of sexual abuse | |
| | 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? | yes |

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|-------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| 115.81 (d) | Medical and mental health screenings; history of sexual abuse | |
| | 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 |

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| 115.81 (e) | Medical and mental health screenings; history of sexual abuse | |
| | Do medical and mental health practitioners 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? | yes |

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| 115.82 (a) | Access to emergency medical and mental health services | |
| | 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 |

| 115.82 (b) | Access to emergency medical and mental health services | |
|------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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 |

| 115.82 (c) | Access to emergency medical and mental health services | |
|------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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 |

| 115.82 (d) | Access to emergency medical and mental health services | |
|------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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 |

| 115.83 (a) | Ongoing medical and mental health care for sexual abuse victims and abusers | |
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| | 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 |

| 115.83 (b) | Ongoing medical and mental health care for sexual abuse victims and abusers | |
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| | 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 |

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| 115.83 (c) | Ongoing medical and mental health care for sexual abuse victims and abusers | |
| | Does the facility provide such victims with medical and mental health services consistent with the community level of care? | yes |

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| 115.83 (d) | Ongoing medical and mental health care for sexual abuse victims and abusers | |
| | Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if all-male facility.) | yes |

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| 115.83 (e) | Ongoing medical and mental health care for sexual abuse victims and abusers | |
| | 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.) | yes |

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| 115.83 (f) | Ongoing medical and mental health care for sexual abuse victims and abusers | |
| | Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate? | yes |

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| 115.83 (g) | Ongoing medical and mental health care for sexual abuse victims and abusers | |
| | 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 |

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| 115.83 (h) | Ongoing medical and mental health care for sexual abuse victims and abusers | |
| | 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 |

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| 115.86 (a) | Sexual abuse incident reviews | |
| | 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 |

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| 115.86 (b) | Sexual abuse incident reviews | |
| | Does such review ordinarily occur within 30 days of the conclusion of the investigation? | yes |

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| 115.86 (c) | Sexual abuse incident reviews | |
| | Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners? | yes |

| 115.86 (d) | Sexual abuse incident reviews | |
|------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | 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 |

| 115.86 (e) | Sexual abuse incident reviews | |
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| | Does the facility implement the recommendations for improvement, or document its reasons for not doing so? | yes |

| 115.87 (a) | Data collection | |
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| | 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 |

| 115.87 (b) | Data collection | |
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| | Does the agency aggregate the incident-based sexual abuse data at least annually? | yes |

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| 115.87 (c) | Data collection | |
| | 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 |

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| 115.87 (d) | Data collection | |
| | 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 |

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| 115.87 (e) | Data collection | |
| | 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.) | yes |

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| 115.87 (f) | Data collection | |
| | 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 |

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| 115.88 (a) | Data review for corrective action | |
| | 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 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? | yes |

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| 115.88 (b) | Data review for corrective action | |
| | 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 |

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| 115.88 (c) | Data review for corrective action | |
| | 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 |

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| 115.88 (d) | Data review for corrective action | |
| | 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 |

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| 115.89 (a) | Data storage, publication, and destruction | |
| | Does the agency ensure that data collected pursuant to § 115.87 are securely retained? | yes |

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| 115.89 (b) | Data storage, publication, and destruction | |
| | 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 |

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| 115.89 (c) | Data storage, publication, and destruction | |
| | Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available? | yes |

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| 115.89 (d) | Data storage, publication, and destruction | |
| | 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 |

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| 115.401 (a) | Frequency and scope of audits | |
| | During the three-year period starting on August 20, 2013, and during each three-year period thereafter, 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.? (N/A before August 20, 2016.) | yes |

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| 115.401 (b) | Frequency and scope of audits | |
| | During each one-year period starting on August 20, 2013, 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? | yes |

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| 115.401 (h) | Frequency and scope of audits | |
| | Did the auditor have access to, and the ability to observe, all areas of the audited facility? | yes |

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| 115.401 (i) | Frequency and scope of audits | |
| | Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)? | yes |

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| 115.401 (m) | Frequency and scope of audits | |
| | Was the auditor permitted to conduct private interviews with inmates, residents, and detainees? | yes |

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| 115.401 (n) | Frequency and scope of audits | |
| | 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 |

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| 115.403 (f) | Audit contents and findings | |
| | The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports within 90 days of issuance by auditor. The review period is for prior audits completed during the past three years PRECEDING THIS AGENCY AUDIT. In the case of single facility agencies, the auditor shall ensure that the facility's last audit report was published. 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 that there has never been a Final Audit Report issued.) | yes |