

PREA Facility Audit Report: Final

Name of Facility: Wisconsin Resource Center

Facility Type: Prison / Jail

Date Interim Report Submitted: 05/07/2017

Date Final Report Submitted: 07/21/2017

Auditor Certification	
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: Kimberly Napier	Date of Signature: 07/21/2017

AUDITOR INFORMATION	
Auditor name:	Napier, Kim
Address:	
Email:	NapierK@michigan.gov
Telephone number:	
Start Date of On-Site Audit:	04/05/2017
End Date of On-Site Audit:	04/07/2017

FACILITY INFORMATION	
Facility name:	Wisconsin Resource Center
Facility physical address:	1505 North Drive, PO Box 16, Winnebago, Wisconsin - 54985
Facility Phone	920-426-4310
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:	Brian Bantleon	Title:	Security Director
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Warden/Superintendent			
Name:	Byran Bartow	Title:	Institution Director
Email Address:	Byran.Bartow@dhs.wisconsin.gov	Telephone Number:	920-426-4310 ext 418

Facility PREA Compliance Manager			
Name:	Brian Bantleon	Email Address:	Brian.Bantleon@dhs.wisconsin.gov

Facility Health Service Administrator			
Name:	Dr. Deborah Walrath	Title:	Director of Nursing
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Facility Characteristics			
Designed facility capacity:	385		
Current population of facility:	373		
Age Range	Adults: 19-71	Youthful Residents:	
Facility security level/inmate custody levels:	Medium/Maximum		
Number of staff currently employed at the facility who may have contact with inmates:	637		

AGENCY INFORMATION	
Name of agency:	Wisconsin Department of Health Services
Governing authority or parent agency (if applicable):	
Physical Address:	1 West Wilson St, Madison, Wisconsin - 53703
Mailing Address:	
Telephone number:	

Agency Chief Executive Officer Information:			
Name:		Title:	
Email Address:		Telephone Number:	

Agency-Wide PREA Coordinator Information			
Name:	Christine Preston	Email Address:	Christine.Preston@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 Prison Rape Elimination Act (PREA) audit for the Wisconsin Resource Center (WRC) and the Wisconsin Women's Resource Center (WWRC) in Winnebago, Wisconsin was audited on April 5th, 6th and 7th, 2017 the facility was audited by Department of Justice (DOJ) Certified PREA Auditors Kimberly Napier with the assistance of DOJ auditor Yvonne Gorton and MDOC PRE Analyst Wendy Hart. The audit was conducted to assess the facility compliance with the DOJ PREA standards as part of a consortium agreement between the states of Wisconsin, Maryland, Pennsylvania and Michigan. This is the first time that WRC and WWRC was audited by a DOJ certified PREA auditor. Note: Operating as one facility, WRC has male inmates and WWRC has female inmates. The audit process encompassed three phases, the pre-audit, on-site audit and post audit.

On February 7, 2017 during the pre-audit phase, agency statewide PREA Director Christine Preston was provided an audit notification flyer to post throughout WRC and WWRC. The auditor requested that the facility post the notification within every housing unit and any other area that inmates have access. The audit notification provided staff, inmates and the public with the auditor's contact and audit information to send confidential correspondence to the auditor prior to the on-site audit. The auditor did receive one letter prior to the audit from an inmate at WRC on March 1, 2017 and another letter from the same inmate post-audit on April 10, 2017.

The facility PREA Compliance Manager Brian Bantleon submitted a pre-audit questionnaire to the auditor on March 10, 2017. The pre-audit questionnaire consisted of the agency and facility contact information, facility characteristics, organizational chart, agency and facility policy and procedures, physical plant diagrams, staffing plan, memorandum of understanding between Wisconsin Department of Health Services (DHS) and Wisconsin Department of Corrections (DOC), female offender training curriculum, and DOC training documents. A review of the pre-audit documents and the facility website was completed prior to the on-site audit.

On March 20, 2017, the auditor was notified that the agency appointed Leigha Weber as the interim statewide PREA Director who would be assisting the auditor until a replacement was identified. Currently, Ms. Weber is the agency's PREA Program & Policy Analyst. Ms. Weber assisted the auditor in scheduling an interview with the agency's head designee Cathy Jess prior the on-site audit.

On April 5, 2017 at 1:00pm during the on-site audit phase, the auditors were greeted and introductions were made by the administrative staff at WRC in Director Byran Bartow's conference room located in a secure area in the administration building. WRC staff in attendance during the meeting was Leigha Weber, interim statewide PREA Director; Steve Wierenga, Director of Office of Special Operations; Bryan Bartow, WRC Director; Brian Bantleon, PREA Compliance Manager/Security Director; Wallace Bump, Captain and Joel Kalata, Captain. The purpose of the audit and the plan for the three days was also discussed. The three day audit consisted of a complete tour of the facility on April 5th and 6th, interviews

on April 6th and 7th along with documentation reviews, and a post-audit meeting on April 7 at 2:00pm. During the introductory meeting, Director Bartow presented the auditors with additional facility documentation and an overview of the facility operations. The documentation consisted of a WRC overview pamphlet, a binder with a facility staff telephone directory for WRC and WWRC, PREA staff contact information, employee daily staff rosters, inmates unit rosters, and PREA screening tools for both male and female inmates. Following this meeting, a facility tour was conducted.

On April 5 and 6, 2017, a facility tour of all areas that staff and inmates have access was conducted under the escort of the facility PREA Compliance Manager/Security Director. The officer at the information desk located in the front lobby area, instructed auditors to sign in; present identification card and checked to ensure we were clear to enter into the facility prior to marking the hand of each auditor. Before entering the secure area of the facility, control center staff checked the identification cards and then auditors marked hands under an ultra-violet light. This process gave insight to the auditors on staff procedures for processing persons in and out of the facility.

The tour included the administration building, human resource office, control center, intake, all housing units in both WRC and WWRC, staff offices, observation cells, wet cells, unit camera control booths, dining hall, healthcare, dental, visiting room, chapel, classrooms, inmate yard, recreation rooms, laundry room, shower and toilet areas.

During the tour, the auditor observed the PREA audit notification (English and Spanish) and the agency PREA informational signs for inmates posted in all housing units as well as other locations to which staff, inmates and the public have access. The auditor was able to review several housing unit logbooks, supervisory rounding logs, incident reports, a PREA assessment screening tool, video monitoring systems located in the unit control booths and control center. The auditor was able to conduct multiple random informal interviews of staff and inmates during the tour to assess the facility practice and compliance with DOJ PREA standards. All inmates interviewed knew how to report an allegation of sexual abuse or sexual harassment internally or externally. All prisoners interviewed knew of at least one way to report through dialing 777 or 888 from the inmate phone system. When speaking with facility staff, they stated they were trained on the agency's PREA policy, knew the protocol for reporting and how to protect an inmate from sexual abuse and sexual harassment. These informal interviews gave the auditors insight into assessing the facility's culture and compliance with DOJ standards.

The auditors observed the facility security staff closely monitor the camera system and check points at every gate throughout the prison; including the security cameras within the control center where the entire facility was being monitored. All unit control booths and the control center were controlled by security staff. The auditor was able to observe how security staff controlled the separation of the male inmate sally port from the female inmate sally port and how they conducted security rounds within the housing units, hallways, dining hall, visiting room, chapel, intake, shower and toilet areas.

The auditor also observed inmate interactions between the Psychiatric Care Technicians (PCT), Psychiatric Care Supervisors (PCS), psychological staff and security staff in the housing units, day rooms, hallways and healthcare. One observation was during a karaoke event that was being held in the WWRC program room.

The auditor reviewed several inmate files for risk screening and inmate education that verified both are being completed. Also, the auditor was able to verify through a random sample that employees' training records and background checks were in compliance. Interestingly, the facility has a higher staff to inmate ratio with 637 DHS and DOC staff compared to the inmate population of 375.

The facility staff and inmate interviews were conducted on April 5th, 6th and 7th, 2017. The interviews were conducted utilizing the DOJ PREA Compliance Audit instrument interview guides for agency head, facility warden, random staff and inmates, specialized staff, agency PREA Coordinator and facility PREA Compliance Manager. All interviews were conducted in a private setting to protect the confidentiality of each interview. At the time of the on-site audit, there were 333 inmates at WRC and 42 inmates at WWRC for a total of 375 inmates. The auditor randomly selected and interviewed 12 inmates from WRC and WWRC by highlighting the name of an inmate from unit locators provided by facility staff. In addition, the auditor interviewed one disabled inmate, one inmate that disclosed sexual victimization during risk screening and one inmate that mailed a letter to the auditor prior to the on-site audit. Using the DOJ audit instrument interview guides, the auditor was able to query inmates about their understanding of PREA, reporting protocols at the facility and services available to them outside of the facility.

The auditor selected and interviewed ten random staff one from each gender population which included a minimum of two correctional staff on first, second and third shift by highlighting their names from the daily rosters from WRC and WWRC. In addition, the auditor selected and interviewed 19 specialized staff. The specialized staff consisted of: two higher level facility staff; three medical and mental health staff; one investigative staff; two first responders; two incident review team members; two retaliation monitors; two intake staff; one human resource staff; one staff that perform risk screening; and one staff that supervised segregated housing. Also, the auditor visited the Oshkosh Correctional Facility located in Oshkosh, Wisconsin to interview two human resource staff that manage the personnel files for the 107 DOC staff that work at WRC and WWRC. The auditor was able to review an employment application and background check document. Background checks are completed every five years. Using the DOJ audit instrument interview guides, the auditor was able to query staff regarding the agency's Executive 72 Sexual Abuse and Sexual Harassment PREA policy and the facility's procedures for responding, reporting and investigating sexual abuse and sexual harassment in confinement. The auditor was not able to conduct a formal interview with a volunteer or contractor as none were available during the on-site audit. Also, the auditor was not able to interview specialized staff that supervise youthful inmates or education and program staff who work with youthful inmates as youthful inmates are not housed at WRC or WWRC.

On April 7, 2017, a post audit meeting was conducted with facility administrative staff. The administrative staff in attendance was Leigha Weber, Steve Wierenga, Byran Bartow, Brian Bantleon, Wallace Bump, and Joel Kalata. During the post audit meeting, auditors provided facility staff with findings, observations and recommendations. The auditor recommended that the facility digitize the observation cells that have cameras or remove all staff of the opposite gender from working in the camera control booths in the unit and control center that monitor inmates via video camera who may be performing a bodily function. The facility staff strongly believe that because of the acute population at WRC and WWRC that cross gender viewing was an exigent circumstance and they should not have to digitize the observation camera or remove staff of the opposite gender from the control center or unit control booths. This concern and information was shared with PREA Resource Center.

During the pre-audit, on-site audit and post audit the auditors were able communicate openly through interviews, phone calls and emails with facility staff. WRC staff were prepared and organized for the audit and made all documentation available to the auditors for review. The auditors would like to thank Director Bartow and his staff at the Department of Health Services and the Wisconsin Department of Corrections security personnel for their unwavering commitment to making WRC and WWRC a sexually safe environment.

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 Wisconsin Resource Center (WRC) opened in 1983 and is located on the western shore of Lake Winnebago, Wisconsin approximately three miles north of Oshkosh, Wisconsin. The facility occupies approximately 28 acres of land on a campus which also includes the Winnebago Mental Health Institute, a hospital for the treatment of mental illness managed by the Department of Health Services (DHS). The Department of Health Services (DHS) in partnership with the Wisconsin Department of Corrections (DOC) manages the inmate population at WRC. WRC staff evaluate, treat, and provide educational services in a secure treatment center to medium and maximum security male and female inmates. These inmates are transferred from DOC to WRC if their behavior presents a serious problem to themselves or others in the state prison system. Inmates are referred to WRC based on their individualized treatment plans. The age range of inmates is 19-71. At the time of the audit, there were no youthful inmates being held at the WRC.

The housing units for male and female inmates are separated by male and female sally port gates. There are three female units in WWRC, W-20, W-21 and W-22. Each unit is unique in the type of services provided to female inmates. Unit W20 is a specialized Treatment Unit for 20 women that focus on various trauma symptoms. Unit W21 is a moderate acuity unit that provides interdisciplinary treatment for ten women that are in general population and segregation. Unit W22 is a high acuity unit that attempts to reduce symptoms of serious mental illness. All cells are single occupancy and have sinks and toilets in the cell. The showers are located in another area within the units.

There are 14 male units, A1, A2, A3, A4, B5, B6, B7, B8, F11, F12, H15, H16, H17 and H18. At the time of the audit, units 9, 10, 13 and 14 were vacant. Like the female unit, each male unit is unique in the type of services provided to the inmates in each unit. A1 is a non-violent secure treatment unit, A2 is an immediate psychiatric 25 bed unit with focus on stabilization of a major mental illness, A3 is an Alcohol and other Drug abuse (AODA) release unit with focus on re-entry services and independent living, A4 is a high management security unit with focus on management interventions to prevent harm to self and others, B5 is a AODA Release and alternative to revocation (ATR) unit that focuses on re-entry planning and individualized treatment plans, B6 is AODA Re-entry 30 bed unit for inmates with chronic mental illness, B7 is a medium custody service unit that focus on rule compliance and promotes self-growth, B8 is a pre-release and ATR unit with focus on re-entry planning; F11 is a program security unit that provides a behavioral controlled environment; F12 is a psychiatric services daily incentive program unit that focuses on needs through group and individual programming. F12 also houses long term inmates that are chronically ill or poorly adjusted. H15 is a psychiatric admissions/acute unit that processes the admissions for inmates that require psychiatric services, H16 is a maximum custody service unit that focuses on coping skills for inmates with poor institutional adjustment, H17 and H18 are maximum custody service area units that focus on the physical, mental social and emotional health of inmates. All cells are single occupancy and have sinks and toilets in the cell. The showers are located in another area within the units. The units have dayrooms, outdoor recreation, base area, unit manager office, officer desk and social worker in every unit. The facility has dining halls and kitchens, a new visiting room and chapel, gym, healthcare unit, and dental unit. Each housing unit is separated by security gates.

The facility has a uniquely large staff population. The staff is employed by both Department of Health Services (DHS) and Wisconsin Department of Corrections (DOC). There are 530 DHS staff and 107 DOC staff. The correctional staff positions are captain, sergeant, and corrections officer. The correctional staff work in the control center, visiting room, dining hall, intake, housing units, gate post and transportation. The DHS staff positions are warden, deputy warden, security director, psychologist, psychiatric care technicians (PCT), psychiatric Care Supervisors (PCS), social workers, unit supervisors, medical staff, dentist, dental hygienist, victim services coordinator and physical therapist. There are 637 staff compared the inmate population of 375 at WRC. During the audit, there were 333 male inmates and 42 female inmates for a total count of 375 on April 5th and April 6th. On April 7th, there were 333 male inmates and 40 female inmates for a total count of 373.

WRC has evidence based programs that inmates may participate in based off referrals and their individualized treatment plans. Applying Wellness and Recovery Everyday (AWARE), coping skills, dialectical behavior therapy, illness management and recovery, individual trauma therapy, trauma recovery, pre-release, Successful Treatment and Recovery (STAR), and treat to competency.

The facility has a video monitoring system that is controlled by the correctional staff in the administration building control center and the unit control booths in every housing unit. There are 255 cameras throughout WRC and WWRC that record and monitor the inside and outside of the prison.

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.

Number of standards exceeded:	1
Number of standards met:	44
Number of standards not met:	0

Wisconsin Department of Corrections and the Wisconsin Resource Center has a written PREA policy for Zero-Tolerance for sexual abuse and harassment. Agency Executive Directive 72 and WRC 3.2.13 Sexual Abuse and Sexual Harassment in Confinement (PREA).

Number of standards exceeded: 0

Number of standards met: 40

Number of standards not met: 1

Number of standards not applicable: 2

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

115.22 Policies to ensure referrals of allegations for investigation.

115.31 Employee training.

115.32 Volunteer and contractor training.

115.33 Inmate education.

115.34 Specialized training: Investigations.

115.35 Specialized training: Medical and mental health care.

115.42 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: 1

115.41 Screening for risk of victimization and abusiveness

Number of standards not applicable: 2

115.14 Youthful Inmates- WRC does not have inmates under the age of 18.

115.66 Preservation of ability to protect inmates from contact with abusers

Exigent Circumstance: 115.15 (d)

WRC observation cell unit security booth and control center cameras does not prevent staff of the opposite gender from viewing inmates while performing bodily functions.

Auditors provided facility staff with findings, observations and recommendations for a non-compliant standard 115.15 (d) Cross Gender viewing. The auditor recommended that the facility digitized the observation cells that have cameras or remove all staff of the opposite gender from working in the camera control booths in the unit and control center that monitor inmates that maybe performing a bodily function. The facility staff strongly believed that because of the acute population at WRC and WWRC that cross gender viewing was an exigent circumstance and they should not have to digitize the observation camera or remove staff of the opposite gender from the control center or unit control booths. Further review with PREA Resource Center (PRC) determined that due to the acute population housed at WRC and the ability for staff not being able to safely protect inmates from self harm, WRC has been provided an exigent circumstance for provision 115.15 (d).

The facility has not demonstrated compliance with provision 115.41 (f). The facility is not conducting a reassessment within 30 days of initial screening.

CORRECTIVE ACTION NEEDED:

1. The facility develop a tracking form to document reassessments within 30 days of arrival.
2. The facility will need to begin reassessing inmates within 30 days of arrival.

3. The facility will submit to the auditor a written process for tracking and conducting reassessment that are within 30 days of arrival at intake.
4. After 30 days of tracking reassessments, the facility will submit reassessment tracking for all the housing units from both male and female populations.

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.

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Wisconsin Department of Corrections provided agency policy Executive Directive #72 Sexual Abuse and Sexual Harassment in Confinement Prison Rape Elimination Act (PREA), revised on January 11, 2016. Executive Directive #72 states the Department's has zero tolerance for sexual abuse, sexual harassment and report-related retaliation in its facilities. The agency's is committed to preventing, detecting and responding to sexual abuse and sexual harassment. Executive Directive #72 outlines the administrative sanctions for employees and offenders who have engaged in sexual abuse and sexual harassment (a).</p> <p>The Agency employed a Agency-Wide PREA Coordinator (Christine Preston) who recently vacated her position on March 17, 2017. In the interim, the agency employed an acting Agency-Wide PREA Coordinator (Leigha Weber) who is also the PREA Program & Policy Analyst Advanced for the Wisconsin Department of Corrections. She 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. The agency has 38 PREA Compliance Managers, throughout the state, and each of them have a backup. As the Agency-Wide PREA coordinator, she interacts with all of the PREA Compliance Managers (b).</p> <p>The Wisconsin Resource Center employs an upper level administrator (Security Inspector Brian Bantleon) as the PREA Compliance Manager. Security Inspector Bantleon states he has enough time to manage all his PREA related responsibilities and is dedicated to PREA compliance. The organizational chart verifies that the facility has designated Security Inspector Bantleon who reports directly to the Director Byran Bartow (c).</p> <p>Based on the evidence, the facility has demonstrated compliance with the standard.</p>

115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The Wisconsin Department of Corrections (DOC) has a Memorandum of Agreement between LAC county and DOC for the temporary housing of doc inmates within the Fond du Lac County Sheriff Jail. The contract term of agreement is October 17, 2016 to October 17 2017. The DOC has included the jail's obligation to comply with the PREA standards. The DOC contract is with ten county jails for the confinement of DOC inmates. The county jails provides temporary hold and overflow beds for DOC inmates. All of these contracted agencies are required to comply with PREA Standards (a).</p> <p>A review of the agreement confirms that the agency does have an obligation to comply with the Prison Rape Elimination Act (PREA). The jail shall have policies and procedures in place for responding to sexual abuse or sexual harassment allegations as defined by PREA and shall have policies and procedures for maintaining reports and records necessary for reporting data consistent with PREA (a).</p> <p>The contract includes the DOC process on conducting compliance reviews. The review may include an examination of the Sheriff's incident and offender records related to sexual abuse and sexual harassment. The agency monitors compliance by having each jail submit a summary of the PREA compliance (b).</p> <p>A review of the agency compliance letters and THE PREA compliance summary is consistent with provision (b).</p> <p>The Wisconsin Resource Center (WRC) does not contract for the confinement of inmates.</p> <p>Based on the evidence, the facility has demonstrated compliance with the standard.</p>

115.13	Supervision and monitoring
	<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 1465 488">The Wisconsin Department of Corrections agency policy Executive Directive #72 states that each facility shall develop, document and make its best efforts to comply with a staffing plan that provides for adequate levels of employees, video monitoring to protect offenders against sexual abuse (a)-1.</p> <p data-bbox="252 539 1481 786">The Wisconsin Resource Center (WRC) Department of Health Services Sexual Abuse in Confinement Staffing Plan dated February 15, 2017 was provided for review. The staffing plan contains offender populations, physical plant, camera placement, staff supervision of inmates, staffing levels, security measures, volunteer/contractor supervision, staff shortages, finding of inadequacy, offender transportation, rounding, prevalence of sexual abuse incidents, inmate treatment and programs.</p> <p data-bbox="252 837 1481 954">The average daily number of inmates on which the staffing plan was predicated was 377. The daily number of inmates on April 5 and 6, 2017 was 375 and on April 7, 2017 it was 373 (a)-2 - 3.</p> <p data-bbox="252 1010 1485 1301">The staffing plan reveals that cameras are installed in all common areas with inmate access and are available to be monitored and recorded by security staff, this includes passage in the North tunnel, which connects the North building to the South. There are a total of 255 cameras in use at WRC, with 204 designated for the inside of the facility and 51 for the outside. Camera placement takes in account of blind spots and areas where inmates may be isolated to augment staff supervision. Additional gates and mirrors have also been installed to address blind spots(a).</p> <p data-bbox="252 1352 1485 1816">WRC is allotted a total of 8 Captains and 31 Psychiatric Care Supervisors (PCS). One Captain and one PCS are assigned to each shift. WRC has thirteen Institution Unit Supervisors (IUS) and two Nursing Supervisors and two Clinical Coordinators who also function in a similar capacity. Each is assigned one housing unit and oversees the PCT and Professional Staff Monday through Friday. WRC is assigned 71 correctional officers, 31 sergeants and 8 security supervisors (Captain) which are employed by the Wisconsin Department of Corrections. The DOC security staff are assigned to the cores, perimeter vehicle and utility posts. WRC is also staffed with the following staff: 241 Psychiatric Care Technicians; 31 Psychiatric Care Supervisors; and 13 Institution Unit Supervisors registered nurse supervisors and clinical Coordinators. There are two Food service supervisors that provide daily supervision with simultaneous coverage. WRC has two times the staffing to inmate ratio (a).</p> <p data-bbox="252 1868 1474 2114">Inmate programs are are offered within housing units and in classrooms or group rooms throughout the facility, and are facilitated by psychological services and social services staff. Offenders may participate in between 25 to 40 hours of programming per week. Security staff and PCTs conduct periodic rounds to monitor for security and safety. In addition to the unit assigned PCTs, there are 66 utility PCT positions who are assigned to assist, support and provide back up to the units and off unit activities (a).</p>

The staffing plans takes into consideration the prevalence of sexual abuse incidents. A review of facility investigation revealed that there were a total of three sexual abuse allegations; one was determined unsubstantiated and two were determined unfounded (a).

WRC has not had any judicial finding of inadequacy from internal or external oversight bodies to confirm the agency's practice (a).

During interview, PREA Coordinator stated that at minimum the agency is consulted regarding the staffing plan. If there are changes, the agency receives notification from the facility (a)(c).

Interview with the Warden and PREA Coordinator reveal that there was no deviations from the staffing plan that would confirm the agency's practice (b).

The staffing levels are adequate for the population. The facility indicated that they have more staff than a typical DOC facility and they use the staff to balance out patterns and needs. The camera system enhances what they have with the staffing levels and the video helps in this process. The facility reports having a DVD that give them the ability to go back and review for 30 days (b).

WRC Staffing Plan reveals that rounds are conducted no less than once per half hour by PCTs in each housing unit, with more frequent rounds on the high management units (A4, F11 and W22). The whereabouts and activity of all unit residents is accounted for during these half hour rounds. Unannounced rounds are conducted by Psychiatric Care Supervisors and Captains once per shift and documented in each housing unit's logbook. Additionally, those deemed Administrators On Call (AOC), document unannounced rounds in designated areas within the institution and encompass 1st, 2nd and 3rd shifts (d).

During the tour, PREA rounding logs and housing unit log books reveal that intermediate-level and higher level staff are making required rounds consistent with this provision (d).

During an interview with higher level staff, staff are not aware when a supervisor is coming into the unit. The layout of the facility lends itself well to being able to chose where to go quickly so staff can not anticipate to notify others. Staff indicate that they do rounds twice per week in the whole facility (d).

Based on the evidence, the facility has demonstrated compliance with this standard.

115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Wisconsin Resource Center (WRC) Policy 3.2.13 Safety and emergency procedures for Sexual Abuse and Sexual Harassment states youthful inmates shall not be placed in a housing unit in which they have sight, sound or physical contact with any adult offender through use of a shared dayroom or other common space, shower area or sleeping quarters. In areas outside of housing units, WRC shall either: maintain sight and sound separation between youthful inmates and adult offenders or provide direct staff supervision when youthful inmates and adult offenders have sight, sound or physical contact. WRC shall make best efforts to avoid isolating youthful inmates to comply with this provision. Absent exigent circumstances, WRC shall not deny youthful inmates daily large muscle exercise and any legally required special education services to comply with this provision. Youthful inmates shall also have access to other programs and work opportunities to the extent possible. Such exigent circumstances leading to the denial of large-muscle exercise, legally required education services and/or other programming shall be documented.</p> <p>The Wisconsin Department of Corrections (DOC) and the Wisconsin Department of Health Services (DHS) had a memorandum of understanding for on youthful offender. The purpose was to provide one bed for a period of 90 days with a possible extension on 30 days. The agreement required DHS to comply with the Prison Rape Elimination Act of 2003 to protect, detect and respond to prison rape. The MOU also required DHS to complete Justice Statistics annual survey on sexual violence and individual incident forms and notify the DOC if an PREA violation is alleged. DOC will be permitted to conduct compliance reviews and have immediate access to DHS records.</p> <p>During an interview with staff, the Wisconsin Resource Center reported that in a rare instance one youthful inmate (age 15) was housed at the facility during the last 12 months. During the audit, no youthful offender was housed at WRC that would confirm the agency's practice. Youthful inmates being housed at WRC is not regular occurrence. The facility provided documentation regarding the youthful offender being housed at WWRC. The information provided confirmed that the facility provided sight, physical and sound separation for the youthful inmate which is consistent with this provision.</p> <p>During the tour of the facility, it was demonstrated that there would be sight, physical and sound separation from adult inmates in the event that youthful inmates are housed in WRC.</p> <p>Based on the evidence, the facility has demonstrated compliance with this standard.</p>

115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Wisconsin Resource Center (WRC) Policy 3.1.18 Security and Control Searches and Inspections specifically states that except under exigent circumstances, strip searches of female offenders will only be completed by a same gender employee. Any cross gender strip search of a female offender will be documented on an incident report. This also applies to youthful inmates that except under exigent circumstances, strip searches of juvenile offenders will only be completed by a same gender employee. Any cross gender strip search of a juvenile offender will be documented on an incident report (a)(c).</p> <p>A review of the housing unit search logs confirm that searches are being conducted in compliance with this provision. (c). Also, except under exigent circumstances, personal searches of female offenders will only be completed by a same gender employee. Any cross gender personal search of a female offender will be documented on an incident report and except under exigent circumstances, personal searches of juvenile offenders will only be completed by a same gender employee. Any cross gender personal search of a juvenile offender will be documented on an incident report (a)(b).</p> <p>Interviews with staff reveal that cross gender strip searches is a part of their training and they have yearly updates. There were no instances cross-gender strip searches, body cavity searches, within the last 12 months. This information was verified through random staff, inmate interviews and review of search logs. A review of training records verified that all custody staff are trained consistent with this provision (a)(c).</p> <p>WRC Policy 3.2.13 Safety and emergency procedures for Sexual Abuse and Sexual Harassment specifically states the facility enable offenders to shower, perform bodily functions and change clothing without non-medical employees of the opposite gender viewing their breasts, buttocks or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. Employees of the opposite gender shall announce their presence when entering an offender housing unit. If opposite gender status quo changes during that shift then another announcement is required (d).</p> <p>There are 255 cameras in use in WRC and only 204 cameras monitoring inside the facility. WRC also has 53 segregation cells for both male and female inmates. During the audit tour, the audit team was able to see the segregation cells in both the male and female housing units. Each segregation cell is equipped with a camera for viewing an inmate in the cell. There are also monitors for viewing in each housing unit control station and in the control center located in the administration building. All cameras have the ability to record and pan. The viewing via video camera allows staff of the opposite gender to view inmates on both the male and female segregation cells from the control stations and control center in the administration building.</p> <p>On 4/6/17, a call was placed to PRC regarding any possible exception granted to WRC for the facility housing an acute population. PRC advised that there is no exception to this standard. On 4/7/17, the facility was advised that they were not compliant with standard 115.15 (d) and</p>

was given two recommendations that would bring the facility into compliance with the standard. The recommendations given was to digitize the segregation cell camera so that breast, buttocks and genitalia were no longer visible or reassign all staff monitoring inmates of the opposite gender from working in the control station and control center.

The facility provided incident reports for both male and female incidents from 2017, 2016, 2015, 2014 that they believed supported their position regarding not digitizing the camera for compliance. A review of the incident reports from both male and female segregation unit were evaluated. In regards to the male incident reports, during the last 12 months seven out of 15 incidents that involved harm to the genitalia was not observed via video camera. In 2015 there was one incident and in 2014 there were seven incidents all self reported to staff by inmate and not observed via video camera. In regards to female incident reports, during the last 12 months 18 incident reports that involved harm to the genitalia was not observed via video camera, 13 of those incidents were reported directly to staff by the inmate and two of the incidents were not in observation cells. It appears that in none of the incidents inmates were either showering or performing bodily functions. At the conclusion of the audit, the facility stated they would not be doing either recommendation (d).

The auditor consulted with PRC subject matter experts regarding the acute population housed at WRC and that digitizing the cameras would be a safety risk for suicidal inmates in segregation. PRC reviewed and determined that this was an exigent circumstance (d).

During the tour, staff explained the process of the use of the doorbell for staff announcement of the opposite gender entering the housing unit. Staff explained if a staff of the opposite gender is in the housing unit, then a second announcement is not required until there is no staff member of the opposite gender in the housing unit. This was confirmed during the tour and through interviews with staff and inmates (d).

Policy 3.2.13 states it is not permitted to search or physically examine a transgender or intersex offender for the sole purpose of determining the offender's genital status. Also, all security staff shall be trained on how to conduct cross-gender pat-down searches and searches of transgender and intersex offenders to ensure professionalism and to utilize the least intrusive manner possible consistent with security needs (e).

During the audit tour, this information was verified through random staff, inmate interviews and review of search logs. Staff have indicated that this training is part of WDOC academy training and they also have yearly updates. Training records were reviewed to verify that all custody staff are trained. WRC has not conducted these searches in the last 12 months that would confirm the facility's practice (e)(f).

Based on the evidence, the facility has demonstrated compliance with this standard.

115.16	Inmates with disabilities and inmates who are limited English proficient
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Wisconsin Resource Center (WRC) Policy 3.2.13 Safety and emergency procedures for Sexual Abuse and Sexual Harassment states offenders with disabilities or who have limited English proficiency shall have an equal opportunity to participate in or benefit from all aspects of WRC’s efforts to prevent, detect and respond to sexual abuse and sexual harassment. This includes providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary, in addition to the provision of offender education in formats accessible to all. Written materials shall be provided in formats or methods that ensure effective communication with offenders with disabilities (a).</p> <p>Inmates with disabilities or limited English were interviewed and verified that they have received pamphlets and reviewed PREA auditor notification and PREA information posted in their housing unit regarding their right to be free from sexual abuse and harassment. (a).</p> <p>Staff were also interviewed and verified that inmate interpreter or translators are not used. WRC ensures that key information is continuously and readily available or visible to offenders through posters, handbooks or other written formats. Auditor notification posters were available in English and Spanish and posted in all housing unit and other areas that staff and inmates have access consistent with this provision (a).</p> <p>WRC policy 3.5.9 states the facility will provide a written translation and oral interpretation to LEP residents to ensure meaningful and equal access to benefits and services. This includes providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary, in addition to the provision of offender education in formats accessible to all. Written materials shall be provided in formats or methods that ensure effective communication with offenders with disabilities (b).</p> <p>WRC policy 3.5.09 states the LEP Coordinator evaluate, update and submit the institution LEP plan to the Division’s LEP Coordinator, for review and approval by the AA/CRC Office, ensure posting of appropriate LEP signage throughout the institution, and make available “I Speak” cards to any staff upon request, approve and process all invoices for translator requests, track quarterly spending for interpretation services as well as use of throughout the institution for the purpose of monitoring services and needs, conduct semi-annual audits to ensure institution compliance with the LEP requirements, maintain a listing of staff interpreter resources, ensure that all LEP inmates have access to PREA orientation materials and the PREA Inmate Handbook in varying languages, 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, including steps to provide interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary (b) (c).</p> <p>A review of the PREA Inmate Orientation guide for WRC and the PREA Prevention and Intervention Resource for inmates handbook provide written materials regarding an inmates</p>

right to be free from sexual abuse and sexual harassment (b).

Interview with the agency head's designee revealed that the facility has ADA standards and limits English proficiency standards. We identify inmates at intake and disability coordinators in the institutions assess individual needs, make accommodations, contacts with language assistance on contract. The contractor does all the manuals, posting, PREA and translates them into Spanish. Staff stated in the library they have a Spanish interpreter, braille and closed captioned (b).

The facility reported that there was no instance in the last 12 months where an inmate interpreter provided assistance in a case where extended delay in obtaining another interpreter could compromise an inmates safety that would confirm the agencies practice (c).

Interviews with staff indicated that inmate interpreters or translators are not used for investigations unless it was an emergency but was not aware of an instance when an inmate interpreter was used. The facility has a language line for interpretation. If an interpreter is needed, they would call the language line(c).

Interview with Inmates that were heading impaired were aware that if they needed an interpreter one would be provided and that inmates are not utilized as translators or interpreters (c).

Based on the evidence, the facility has demonstrated compliance with this standard.

115.17	Hiring and promotion decisions
	<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 573">WRC 3.2.13 policy states the facility shall not hire or promote anyone who has engaged in sexual abuse in a confinement facility; has been convicted of engaging or attempting to engage in nonconsensual sexual activity in the community; or has been civilly or administratively adjudicated to have engaged in activity described above. WRC shall consider any incidents of sexual harassment when determining whether to hire, promote or enlist the services of any employee (a)(b)(f).</p> <p data-bbox="252 622 1485 869">WRC 1.3.21 policy states employees must undergo a caregiver background check at least every four years or at any time within that period the agency has reason to believe a check should be obtained. Regardless of the date of the employee’s last background check, a new background check will be conducted for all employees who move positions between employing agencies. A new background check will be conducted for all employees who promote to a new position within WRC (c)(d)(e).</p> <p data-bbox="252 925 1477 1301">WRC policy 1.3.21 states employees are required to report any arrest, pending charge or conviction, as well as any investigation related to abuse or neglect– as soon as reasonably possible after the occurrence but no later than before the start of the employee’s next shift - via verbal notification to their supervisor (or designee) and Human Resources Director. Staff are also required to send an email summary to the supervisor and Human Resources Director as soon as is reasonably possibly by the end of the following shift. Failure to notify the supervisor/designee and Human Resources Director in a timely manner as identified above is considered a work rule 1 violation, for which disciplinary action may occur up to and including discharge (g).</p> <p data-bbox="252 1357 1461 1514">WRC policy 1.3.21 states HR to HR or P File Check is for candidates who are current or past State of Wisconsin employees only. In compliance with PREA Standards, WRC will make the best effort possible to obtain substantiated allegations of sexual abuse or harassment or any resignation during a pending investigation of a sexual abuse allegation for consideration (h).</p> <p data-bbox="252 1570 1485 1771">The DHS caregiver background check law application for employees and arrest and conviction employment application supplement was reviewed. Employees and contractors complete the application for consideration of employment. This application requires a unique identifier like the social security number to prevent incorrect matches or hiring, promoting or enlisting services which is not consistent with this provision (a)(b)(c)(d)(e)(f)).</p> <p data-bbox="252 1827 1477 2152">Interviews with Human Resource (HR) staff from both WRC and Oshkosh verified that back ground checks are being completed on both WRC and Oshkosh staff assigned to WRC. In the past 12 months, 72 contracts for services where criminal background record checks were conducted on all staff covered in the contract who might have contact with inmates. HR does conductor incidents of sexual harassment in determining whether to hire or promote anyone, or enlist the services of any contractor who may have contact with inmates. Background checks are conducted every four years. The agency provides the facility with a list of staff that have to have background checks every five years, Central office in Madison does the</p>

background check and we complete the fingerprint and return it to DOC central office(a)(b)(c)(d)(e)(f)).

Interview with HR staff reveal that they use a background check form. A HR to HR check is completed along with a check for pending discipline, PREA complaint, concerns, performance evaluations prior to job change. Discipline that had been documented in the p-file is also reviewed (g). DOC does not authorize contractors for DHS. DOC processes only new DOC promotions, demotions or classification changes. DHS processes only DHS employees. Like DOC , DHS also conducts background checks consistent with this provision (g).

Interview with Human resource staff reveal that Human Resource to Human Resource check is completed on former employees applying for a job at another facility. There is no law prohibiting this information to be shared (h).

Based on the evidence, the facility has demonstrated compliance with this standard.

115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>WRC staffing plan states the facility has a total of 255 cameras in use at WRC and WWRC. 204 cameras monitor inside the facility while 51 cameras monitor the outside of the facility. All of the cameras have the ability to record and pan. Cameras are installed in all common areas with inmate access and are available to be monitored and recorded by security staff which includes the North tunnel to the South building. Cameras are also placed in special cells to supplement the security and observation rounds for offenders that are at risk to themselves or for medical observation. These cameras are monitored by security staff. Vulnerable areas with minimal security staff supervision include: chapel, laundry, and food services. Security staff have increased rounds in these identified areas. WRC has acquired new video cameras. Proper placement of the cameras enhanced the facilities efforts in protecting inmates from sexual abuse and sexual harassment. The additional cameras help eliminate blind spots and enhance staff supervision.</p> <p>A review of the camera diagram, cameras are appropriately placed to augment staff supervision and rounding. The facility has eliminated multiple blindspots with the placement of the camera system.</p> <p>During the facility tour, there was upgrades to the physical plant and consideration given to the layout of the camera placement throughout the facility. The auditor observed control center cameras as well as unit control booth cameras that were fixed on observation cells or monitored hallways.</p> <p>During an interview with the agency head's designee and WRC Director, they added cameras in areas that had blind spots. The facility has had video technology since 1983 and continuously monitor for possible cameras upgrades. There has been new video monitoring additions to the gate house and perimeter security. The facility considered the location where incidences of sexual abuse and sexual harassment allegations occurred to determine if an additional cameras is needed.</p> <p>Based on the evidence, the facility has demonstrated compliance with this standard.</p>

115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>WRC policy 3.2.13 Safety and Emergency Procedures Sexual Abuse and Sexual Harassment in Confinement (PREA) states that WRC shall ensure that an investigation is completed for all allegations of sexual abuse and sexual harassment, including those received from third-parties and anonymous sources (a).</p> <p>WRC policy 3.2.13 states the facility shall follow a uniform evidence protocol that maximizes the potential for preserving and/or collecting usable physical evidence for administrative proceedings and criminal prosecutions. Such protocol shall be developmentally appropriate for youth. When WRC is not responsible for investigating allegations of sexual abuse, WRC shall request that the investigating law enforcement agency follow the requirements(a).</p> <p>A review of four facility investigations show that the facility does conduct PREA investigations consistent with this provision. However, all investigations are referred to the local law enforcement agency. During the last 12 months, the facility had 13 PREA allegations that was investigated. The facility had no substantiated cases of sexual abuse or sexual harassment. The facility has a investigation tracker that documents all of sexual abuse and sexual harassment for inmate on inmate and staff on inmate allegations.</p> <p>The facility sends all original file documentation to central office in Madison Wisconsin and keeps a copy at WRC (a). The agency does not conduct criminal sexual abuse investigations but instead reports all allegations to local law enforcement for potential investigation. Oshkosh Police department is contacted for criminal sexual abuse allegations (a).</p> <p>During interviews with ten random staff, staff understood the agency’s protocol for obtaining usable physical evidence if an inmate alleges sexual abuse. Most knew to contact supervisor, separate the alleged victim from the alleged suspect, secure the crime scene, preserve evidence, advise alleged victim not to brush teeth, take a shower, wash clothes, label and bag evidence. Some staff were able to identify the investigators (a).</p> <p>WRC policy 3.2.13 Sexual Abuse and Sexual Harassment in Confinement (PREA) outlines the evidence for preserving and collecting usable physical evidence which is developmentally appropriate for youth and adapted from a comprehensive and authoritative protocol developed after 2011(b).</p> <p>WRC policy 3.2.13 states all victims shall be offered access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiary or medically appropriate. Such examinations shall be performed by Sexual Assault Nurse Examiners (SANEs) where possible. If SANEs cannot be made available, the examination can be performed by other qualified medical practitioners. The facility shall document its efforts to provide SANEs (c).</p> <p>Interview with staff revealed that WRC does not conduct forensic medical examinations. Inmates that need a SANE/SAFE examiner would be transported to the local hospital Neenah and Appleton Wisconsin. No reports of sexual abuse exams have been conducted in the last 12 months that would confirm the agency’s practice (c).</p> <p>WRC policy 3.2.13 states WRC shall attempt to make available to the victim an advocate from</p>

a local sexual assault service provider to accompany and support the victim through the forensic medical examination process and investigatory interviews. As requested by the victim, such a person shall also provide emotional support, crisis intervention, information and referrals. If a sexual assault service provider is not available to provide victim advocate services, WRC shall make available a member who has been screened for appropriateness to serve in this role and has received education concerning sexual assault and forensic examination issues. WRC shall document efforts to secure services from a local sexual assault service provider (d).

WRC has REACH Counseling that provides victim advocate services for inmates at WRC and WWRC (d).

A review of the agency's website <https://www.reachcounseling.com> indicates that the agency does provide services consistent with the provision. A review of PREA screening tools indicate that inmates who were offered victim services after reporting they were a victim of sexual abuse in the community or while incarcerated refused follow up services (d). The auditor contacted REACH ((920) 722-8150 post audit and they were able to verify that they do provide services upon request to WRC and WWRC inmates.

WRC shall attempt to make available to the victim an advocate from a local sexual assault service provider to accompany and support the victim through the forensic medical examination process and investigatory interviews. As requested by the victim, such a person shall also provide emotional support, crisis intervention, information and referrals (e).

REACH will accompany a victim and provide support services (e). The support services that they provide include accompanying and supporting the victim through a SANE/SAFE exam, investigators interviews before and after, provide emotional support all consistent with this provision (e). Interview with Victim Services Coordinator confirmed that REACH provides services for WRC inmates that request a victim advocate (e).

When WRC is not responsible for investigating allegations of sexual abuse, WRC shall request that the investigating law enforcement agency follow the requirements outlined (f). The Oshkosh Police Department is contacted for all allegations of sexual abuse (f).

WRC had one investigation involving a sexual abuse allegation during the last 12 months, which was verified that the facility did notify Oshkosh police department (f).

WRC shall make available a member who has been screened for appropriateness to serve in this role and has received education concerning sexual assault and forensic examination issues (h). WRC contacts REACH that provides victim advocate services for inmates at WRC and WWRC (h).

Based on the evidence, the facility is complaint with this standard.

115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>WRC policy 3.2.13 states that the facility shall ensure that an investigation is completed for all allegations of sexual abuse and sexual harassment, including those received from third-parties and anonymous sources. of sexual abuse or sexual harassment that involve potentially criminal behavior shall be referred for investigation to local law enforcement. All referrals to law enforcement are documented. The facility investigates all allegations of sexual abuse and sexual harassment. Also, all PREA allegations are referred to Oshkosh police department. In the last 12 months, 13 investigations were referred to the Oshkosh police department and investigated by the facility. WRC can contact them by phone and email. Interview with investigative staff and review of investigative reports confirm that WRC contact Oshkosh Police Department by phone and email.</p> <p>Based on the evidence, the facility is in compliance with this standard.</p>

115.31	Employee training
	<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 1461 528">WRC policy 3.2.13 Sexual Abuse and Harassment in Confinement (PREA) states that all new staff members shall be trained on WRC's zero-tolerance policy for sexual abuse and sexual harassment. All staff members shall receive training every two years in which a staff member does not receive such refresher training, WRC provides refresher information on current sexual abuse and sexual harassment policies (a)(b)(c)(d).</p> <p data-bbox="252 584 1477 999">WRC policy 1.4. on Employee Orientation and Development states training programs are structured to deliver proper job instruction and professional development for all staff members with emphasis on assuring staff competence, promoting a safe and secure environment, enhancing inmate care, and maximizing internal and external customer satisfaction. Establish employee orientation and staff development available to all employees at the Wisconsin Resource Center. Training may be provided at the institution or away from the institution, facilitated by institution staff, or sponsored by other agencies or facilities. These activities include but are not limited to: Preservice Training, New Employee Training, continuing education courses, clinical and non-clinical education, and annual updates (a)(b)(c)(d).</p> <p data-bbox="252 1055 1485 1514">The staff training curriculum and records reveal that staff are trained in the agency zero tolerance policy on sexual abuse and sexual harassment. Training consisted of the PREA training model, PREA lesson plan, Training is also conducted with volunteers and contractors that may have contact with inmates. Since WRC is a male and female facility, staff also receive female offender training. A review of the female training manual reveal that staff receive training on gender differences, common characteristic of female offenders, effective tactics for working with female offenders and female offender facilities and history. Staff also receive gender identify, sexual orientation and pregnancy in prison. All staff must sign a training roster that documents the type of training they received, the acknowledgment of the content and requirements of PREA, and the training class record. Training records were reviewed that verified staff did receive required PREA training (a)(b)(c)(d).</p> <p data-bbox="252 1570 1485 1816">During interviews, all staff stated they have received the required training. Staff stated the training consisted of the dynamics of sexual abuse and sexual harassment in confinement, how to detect, respond to signs of sexual abuse. How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender and intersex, most staff stated that the training consisted of computer based training as well as classroom training (a)(b)(c)(d).</p> <p data-bbox="252 1872 1342 1906">Based on the evidence, the facility has demonstrated compliance with the standard.</p>

115.32	<p>Volunteer and contractor training</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>WRC policy 1.7.4 Citizen Involvement/Volunteers Contractor Services, WRC policy 1.7.02 Citizen Involvement/Volunteers volunteer services and WRC Fraternalization Policy #1.3.8, requires that all volunteers and contractors be trained regarding sexual abuse and sexual harassment (a)(b)(c).</p> <p>WRC Contractor policy 1.7.4 states at no time shall a contractor engage with a WRC offender either verbally or physically. Any contractor who engages in sexual harassment or sexual contact will be prohibited from contact with offenders and will be reported to relevant licensing bodies and authorities. Appropriate remedial measures shall be taken by WRC to ensure the safety of offenders in contact with contractors (b).</p> <p>The facility has 72 volunteers and contractors who have completed PREA training appropriate for the contact with inmates, all have been trained on the agency's zero tolerance policy, how to report instances of sexual abuse and sexual harassment. Since WRC is a male and female facility, staff also receive female offender training. A review of the female training manual reveal that staff receive training on gender differences, common characteristic of female offenders, effective tactics for working with female offenders and female offender facilities and history. Staff also receive gender identify, sexual orientation and pregnancy in prison. All staff must sign a training roster that documents the type of training they received, the acknowledgment of the content and requirements of PREA, and the training class record. Training records were reviewed that verified staff did receive required PREA training.</p> <p>Documentation provided and interviews with facility staff supported that this training is being completed with volunteers and contractors. A formal interview with a contractor or volunteer could not be completed during the onsite audit as no volunteer or contractor was working that day that would confirm the agency's practice.</p> <p>Based on the evidence, the facility has demonstrated compliance with standard.</p>
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115.33	Inmate education
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>WRC policy 4.1.2 Reception and Orientation and WRC 3.2.13 Safety and Emergency Procedures Sexual Abuse and Sexual harassment in confinement (PREA) provides that during intake offenders shall receive information detailing WRC and DOC's zero tolerance policy regarding sexual abuse and sexual harassment and how to report such incidents or suspicions and WRC and DOC's zero tolerance policy, including offenders right to be free of sexual abuse, sexual harassment and disclosure-related retaliation (a).</p> <p>At intake inmates receive an red PREA handbook that explains the agency's zero- tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment. The PREA handbook also explains the inmates right to be free from sexual abuse and sexual harassment. With in one week of arrival inmates attend orientation in the housing unit where they watch a PREA video and receive a PREA orientation handout. The orientation handout tells inmates the how to use the reporting hotline number 777 and how to call outside the agency using reporting hotline number 888. The facility reported that 573 inmates within the last 12 months was given this information at intake (a)(b)</p> <p>The facility reported that 570 inmates received a comprehensive education within 30 day on their right to be free From both sexual abuse and sexual harassment and retaliation for reporting such incidents (b).</p> <p>Interview with Intake staff described the process of orientation at WRC. Staff indicated that inmates receive the red PREA handbook at intake and orientation within on the first Monday after their arrival to the facility. At orientation inmates are shown the PREA what you need to know video that emphasize the agency's stance on sexual abuse and sexual harassment. Inmates also have PREA posting in the housing unit that provides additional information about the agency's zero tolerance policy on sexual abuse and sexual harassment. Additional PREA posters are in the health services area, library, dining hall and visiting room (a)(b).</p> <p>During the tour, posting were located throughout the facility in every housing unit, health services area, library, dining hall and visiting room. The posting had the numbers 777 and 888 that inmates could call from the phones in the housing unit to report internally or externally any allegation of sexual abuse and sexual harassment (a)(b).</p> <p>WRC policy 4.1.02 Reception and Screening/Orientation states that upon transfer another facility, offenders shall receive education specific to the facility's sexual abuse, sexual harassment and report-related retaliation policies and procedures to the extent they differ from previous facility (c).</p> <p>During the onsite audit, there were no inmates that were not oriented within 30 days or arrival at intake that would confirm the agency's practice (c).</p> <p>WRC policy 3.5.09 Limited English Proficiency ensure that all LEP inmates have access to PREA orientation materials and the PREA Inmate Handbook in varying languages. Take</p>

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, including steps to provide interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary. WRC has contracted with the Certified Languages International Language Line, which is a telephonic language interpreter service for immediate access to oral interpreters. To contact and access a foreign language interpreter, staff will follow this guideline procedure for use of the Language Line (d).

WRC policy 3.2.13 Sexual Abuse and Sexual Harassment in Confinement (PREA) states offenders with disabilities or who have limited English proficiency shall have an equal opportunity to participate in or benefit from all aspects of WRC's efforts to prevent, detect and respond to sexual abuse and sexual harassment. This includes providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary, in addition to the provision of offender education in formats accessible to all. Written materials shall be provided in formats or methods that ensure effective communication with offenders with disabilities (d) (f).

At intake inmates receive a red PREA handbook that explains the agency's zero- tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment. The PREA handbook also explains the inmates right to be free from sexual abuse and sexual harassment. Within one week of arrival inmates attend orientation in the housing unit where they watch a PREA video and receive a PREA orientation handout. The orientation handout tells inmates the how to use the reporting hotline number 777 and how to call outside the agency using reporting hotline number 888 the auditor did not review orientation materials that was in any other language than English that would confirm the agency's practice. However the certified language line allows inmates to access a foreign language interpreter (d).

During the tour, PREA posters in English and Spanish were located throughout the facility in every housing unit, health services area, library, dining hall and visiting room. The posting had the numbers 777 and 888 that inmates could call from the phones in the housing unit to report internally or externally any allegation of sexual abuse and sexual harassment. The PREA auditor notification was also in English and Spanish (d).

WRC policy 4.1.2 Reception and Orientation shall maintain documentation of offender participation in these education sessions (e).

Interviews with inmates revealed that they did receive PREA orientation guide and a red book at WRC. Inmates also stated they received the same book and orientation at Dodge Correctional. Inmates stated that they were aware on how to report an allegation of sexual abuse or sexual harassment. They were also aware of the agency's policy on their right to be free from sexual abuse and sexual harassment. Auditor was able to review orientation documentation to verify it was being completed (e).

Based on the evidence, the facility has demonstrated compliance with this standard.

115.34	<p>Specialized training: Investigations</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Wisconsin Department of Corrections agency policy Executive Directive #72 requires 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 Oddsden warnings, sexual abuse evidence collection in confinement settings and the criteria and evidence required to substantiate a case for administrative action or prosecutorial referral. This policy further requires that the agency maintain documentation of training completion (a).</p> <p>The facility does keep documentation of the required training. A review of training records confirmed that staff were trained to conduct PREA investigations consistent with provision. WRC has 13 trained PREA investigators that conduct investigations(a)(c).</p> <p>This was verified during interviews with staff that conduct sexual abuse and sexual harassment investigations. Staff was able to describe in detail how long the training was, what was involved in the training and the referral process for criminal investigations. Auditor reviewed four PREA investigation and verified that the investigator conducting the investigation had been trained prior to being assigned to investigate the PREA allegation (a)</p> <p>Interview with PREA investigators revealed that they received a specialized three day training with the PREA compliance Manager two years prior. The training consisted of scenarios, how to talk to a person to get information, standards and role playing. Training topics included techniques for interviewing sexual abuse victims proper use of miranda and Garrity warning, sexual abuse collection in confinement settings and criteria and evidence required to substantiate a case for administrative or prosecution referral (a)(b).</p> <p>Based on the evidence, the facility has demonstrated compliance with this standard.</p>
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115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>WRC policy 3.2.135, requires all medical and mental health care practitioners who work regularly at WRC shall be trained on how to detect and assess signs of sexual abuse and sexual harassment, preserve physical evidence of sexual abuse, respond effectively and professionally to victims of sexual abuse and sexual harassment and whom to report allegations or suspicions of sexual abuse and sexual harassment. WRC policy also requires that the facility maintain documentation that such training has been received (a)(c)(d).</p> <p>There are 54 medical and mental health care practitioners who work regularly at this facility who received the training required by agency policy. 100 percent of the medical and mental health staff who work regularly have received the required training on how to detect and access signs of sexual abuse and sexual harassment, how to preserve physical evidence of sexual abuse, how to respond effectively and professionally to victims of sexual abuse and sexual harassment and how to report allegations or suspicions of sexual abuse and sexual harassment (a).</p> <p>A review of training records and interview with staff verifies that staff have receive required training. Training records for WRC staff is located at the facility training office (a)(c).</p> <p>Medical staff do not conduct forensic exams at WRC this would confirm the agency's practice with this provision. zAny inmate needing a SANE/SAFE examination would be transported to the local hospital (b).</p> <p>Interview with medical staff confirmed that they do not conduct forensic examinations. Staff stated that the training they received consisted of how to detect and access signs of sexual abuse and sexual harassment, how to preserve physical evidence of sexual abuse, how to respond effectively and professionally to victims of sexual abuse and sexual harassment and how to report allegations or suspicions of sexual abuse and sexual harassment (c).</p> <p>Based on the evidence, the facility is in compliance with this standard.</p>

115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>WRC policy 4.1.2 Reception and Orientation outlines requirement that inmates be screened for risk of sexual victimization or risk of sexually abusing other inmates within 72 hours of their intake. All offenders shall be assessed during an initial screening within 72 hours of arrival at the facility, and again upon transfer to another facility, for risk of being sexually abused by other offenders or sexually abusive towards other offenders. Inmates are also reassessed within 30 days when warranted for a referral, request, incident of sexual abuse or additional information received that may impact an inmates risk of sexual victimization or abusiveness (a).</p> <p>In review of documentation, The facility documented that 599 inmates entered the facility in the last 12 months and was assessed within 72 hours of arrival at intake. Review of risk assessment screening verify that referrals to mental health are offered. Risk assessments for both male and female inmates show staff are screening inmates within 72 hours of arrival and again upon transfer to another facility. WWRC uses a specific PREA screening tool for male inmates (DOC-2780A) and female inmates (DOC2780B). Also, the facility uses a specific PREA screening tool for reassessment male (DOC 2781A) and female (DOC2781B). The risk screening tools uses screeners observation, age, height, weight, mental health, developmental or physical ability sexual orientation, LGBTI status, convictions of violent offenses, conviction of sexual offense, confinement, conduct for physical assault, victim of unwarranted sexual contact, sexual contact with someone without consent, sexual assault conducted while confined, fears of safety in the facility and sole detained for civil immigration purposes (b)(c)(d)(e).</p> <p>Interviews with staff who perform PREA risk assessments confirm that all factors such as age, physical build, inmates on perception of safety, LGBTI, prior victimization in community or prison, mental illness, convictions of violent or sexual offenses, perpetrator of sexual abuse and misconducts for physical assault are considered. Staff indicate that they get risk screens completed in a day sometimes two days but always with 72 hours (a)(c)(d)(e).</p> <p>WRC policy 4.1.2 Reception and Orientation Offenders may not be disciplined for refusing to answer or for failing to disclose information in regards to assessment questions related to the presence of a mental, physical or developmental disability, age, physical build, previous incarceration, exclusively nonviolent criminal history (h).</p> <p>Interview with staff who perform risk screening stated no inmates are not disciplined for refusing to answer the risk assessment screen questions. We anticipate that some inmates do not want to disclose but we have no issue with that (h).Inmates interviewed stated that if they did not want to talk about something they were not forced. (h).</p> <p>WRC 4.1.02 Policy Reception and Screening states appropriate controls shall be placed on the dissemination of information gathered from the initial and follow-up screenings to ensure that sensitive information is not exploited to the offenders detriment by employees or other offenders (i).</p>

PREA screening is always done by psychological staff, psychologist or clinical social worker. Risk screening information is kept in the confidential section of the social services file (i)

WRC 4.1.02 Policy Reception and Screening states in addition to the initial screening, within 30 days of arrival, WRC PSU staff shall reassess the offender's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the initial screening. Thereafter, an offender's risk level shall 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 (f).

Interviews with staff that conduct risk screening revealed that the facility understanding of reassessment will only take place if initiated by some event or additional information that has been received. The facility is not reassessing the offenders risk for victimization or abusiveness within 30 days since the initial screening. Each inmate at WRC and WWRC is on a treatment plan and the psychological, psychologist and clinical staff have daily contact.

Given the high number of treatment staff at WRC the auditor determined that the contact alone would demonstrate compliance with this provision. However, after further review the auditor could not verify if the daily contact included any conversation regarding an inmates risk of victimization or risk of abusiveness. There was no documentation to review as the facility is not completing 30 day reassessments. Therefore, the auditor could not confirm the agency's practice and compliance with this provision.

The auditor contacted the agency regarding this provision with the recommendation to begin the 30 day reassessments. The auditor has not been able to verify or review documentation that the facility has started completing 30 reassessments after the initial screening for risk of victimization and risk of abusiveness.

The facility provided a list of 24 inmates and documentation of inmates who were reassessed for the offender's risk of victimization or abusiveness within 30 days after intake. A review of the documents reveal that the inmates were being assessed within 72 hours and reassessed within 30 days.

Based on the evidence discussed, the facility has demonstrated compliance with provision (f).

115.42	Use of screening information
	<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 1477 786">WRC policy 3.2.13 and WRC policy 4.1.02 outlines how information obtained from the initial or follow-up screening shall inform housing, bed, work, education and program assignments with the goal of keeping separate those offenders at high risk of being sexually victimized from those at high risk of being sexually abusive. For the purposes of education, programming, work, and recreation activities, line-of-sight monitoring by staff is sufficient to maintain separation. Individualized placement determinations shall be made for each offender. Also, WRC policy provides that when making facility, cell/unit housing and programmatic assignments for transgender or intersex offenders WRC shall consider on a case-by-case basis whether a placement would ensure the offender's health and safety and whether the placement would present management or security problems in addition to serious consideration of the offender's own views with respect to their own safety (a)(b)(c)</p> <p data-bbox="252 842 1461 1133">A review of a computerized tracking system show how inmates are assessed, housed and tracked so not to have incompatible PREA risk assessment score when placed in the same unit. PREA risk assessments for male and female inmates were reviewed by the auditor. The risk assessments provide a list of screening questions that determine a inmates risk of abusiveness and a risk of victimization. Having this screening tool helps staff identify the appropriate placement for each inmate. The risk screening tools are secured in the psychologist office file to keep inmate information confidential (a)(b)(c).</p> <p data-bbox="252 1189 1477 1391">Interviews with staff revealed that each inmate is assessed by the treatment team every two months. The treatment team can consist of a minimum of four to eight professional staff. Also, it was demonstrated during the tour that transgender inmates are given the opportunity to shower separately from other inmates. WRC has a high staff to inmate ratio which can assist in inmate safety (a)(b)(c)(f).</p> <p data-bbox="252 1447 1461 1738">According to staff interviewed, in making housing decision they have to determine whether to cell individuals together. WRC has a large staffing level so we can monitor work assignments closely. Our assignments only occurs in the classroom with a teacher in the room to monitor the prisoners. Transfer inmates are assessed by treatment team every two months for any threats to safety. Transgender and intersex inmates views are given serious consideration as well as the risk screening. The facility does not have dedicated units or wings solely on the basis of their sexual orientation, genital status or gender identify (d)(e)(g).</p> <p data-bbox="252 1794 1437 1861">Interviews with random inmates confirmed that they were asked a series of questions upon intake. They stated they were asked the same questions at previous facilities.</p> <p data-bbox="252 1917 1158 1951">Based on the evidence, the facility is in compliance with this standard.</p>

115.43	Protective Custody
	<p data-bbox="248 168 898 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="248 248 523 284">Auditor Discussion</p> <p data-bbox="248 329 1461 573">WRC policy 4.1.02 outlines that offenders at high risk for sexual victimization shall not be separated from the general population 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. If an assessment cannot be conducted immediately, the facility may separate the offender involuntarily from the general population for less than 24 hours while completing the assessment (a).</p> <p data-bbox="248 584 1437 786">WRC Policy 4.1.02 states offenders separated from the general population for this purpose shall have access to programs privileges, education or work opportunities to the extent possible. If the facility restricts access to programs, privileges, education and work opportunities the facility shall document the opportunities limited, the reason for such limitations and the duration of the limitation (b).</p> <p data-bbox="248 797 1485 913">WRC Policy 4.1.02 states involuntary separation from the general population shall only be until alternative means of separation from likely abusers can be arranged and shall not ordinarily exceed 30 calendar days (c).</p> <p data-bbox="248 925 1466 1041">WRC Policy 4.1.02 states if an offender is involuntarily separated from the general population the facility shall document the basis for the facility’s concern for the offender’s safety and the reason an alternate placement cannot be arranged (d).</p> <p data-bbox="248 1052 1469 1169">WRC Policy 4.1.02 states every 30 days, the facility shall review the offender’s circumstances to determine whether there is a continuing need for separation from the general population and document accordingly (e).</p> <p data-bbox="248 1227 1441 1344">A review of facility PREA investigations, Investigation tracking system and PREA screening tools show that there was no an inmate placed in involuntary segregation during the last 12 months for a risk of sexual victimization.</p> <p data-bbox="248 1402 1469 1603">In an interview with the Director, the facility does not use segregation for the purpose of involuntarily segregating inmates because they have too many other options. There was no circumstance in which segregated housing was used to protect an inmate who was alleged to have suffered sexual abuse. During the last 12 months, they facility reported that there were no inmates at risk of sexual victimization held in involuntary segregated housing (a).</p> <p data-bbox="248 1662 1481 1989">Staff that supervised segregated housing stated that the facility does not put alleged victims in segregated housing. If there was a need to separate an alleged victim from and alleged abuser they would use general population unit 11. In unit 11, inmates have the same access to programs, education, work, and privileges as any other inmate. If we were to restrict access to programs, privileges, education or work opportunities we would document it in an individualized care plan. The auditor reviewed segregation, general population and PREA rounding logs and did not see any entries where a prisoner was placed in segregation involuntarily (a)(b)(c)(d).</p> <p data-bbox="248 2047 1485 2114">Every 30 days the facility shall review the offender’s circumstances to determine whether there is a continuing need for separation from the general population and document accordingly.</p> <p data-bbox="248 2125 1469 2157">The auditor was not able to confirm the agency’s practice on this provision as the agency has</p>

denied placing inmates into segregation involuntarily Also, the auditor was not able to interview an inmate that was placed in segregated housing for risk of sexual victimization or alleged sexual abuse (e).

Based on the evidence, the facility is in compliance with this standard.

115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>WRC policy 3.2.13 outlines that WRC shall provide multiple ways for offenders to privately report sexual abuse and sexual harassment, retaliation by other offenders or employees for reporting sexual abuse and sexual harassment, and employee neglect or violation of responsibilities that may have contributed to such incidents. In addition, WRC shall provide at least one way for offenders to report sexual abuse and sexual harassment to a public or private entity that is not part of WRC or DOC (a)(b)(c).</p> <p>WRC policy 3.5.01 Resident's Rights outlines the inmate complaint process for all sexual abuse and sexual harassment complaints filed through the Inmate Complaint Review System will be immediately redirected and referred for sexual abuse and/or sexual harassment investigation(a)(c)</p> <p>Staff interviews revealed that there are multiple ways for inmates to report sexual abuse and sexual harassment. One way of reporting is inmates can call the 777 for central office in Madison Wisconsin. or 888 Oshkosh police department. Also, inmates can use the complaint system. Which is an internal mailbox that inmates can complete an interview request form and third shift will pick up the form. Inmates can kite the PREA Compliance Manager directly by completing a request.</p> <p>The PREA handbook for inmates provides information about reporting sexual abuse allegations to staff member. Each inmate is issued a PREA handbook at intake. If staff receive an allegation of sexual abuse or sexual harassment they report it immediately to their supervisor (a)(b)(c)(d).</p> <p>During the tour, there were PREA posting in every housing unit that list the local hotline number 777 and the outside hotline number 888 in English and Spanish. The PREA auditor notification signs was posted in every housing unit including other areas that prisoners have access in English and Spanish (a)(d).</p> <p>During random inmate interviews, inmates were aware of the many ways to report an allegation of sexual abuse or sexual harassment. Many mentioned that there was a PREA hotline number they could call anonymously by dialing 777 or 888, you could write a letter, ask to speak to security staff, call home and report it to family (a)(b)(c)(d).</p> <p>Based on the evidence, the facility is in compliance with this standard.</p>

115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>WRC Policy 3.5.01 Inmate Compliant Procedures outlines that all sexual abuse and sexual harassment complaints filed through the Inmate Complaint Review System shall be immediately redirected and referred for sexual abuse and/or sexual harassment investigation. Inmates shall be notified within 30 days of the initial complaint that an investigation into the portion of the complaint alleging sexual abuse or sexual harassment has commenced and the Inmate Complaint Review process has concluded and a time limit shall not be imposed on when an offender may submit a complaint regarding an allegation of sexual abuse or sexual harassment though other applicable time limits may still apply to any portion of the complaint that does not allege an incident of sexual abuse or sexual harassment. The complaint process shall not include a mandatory informal resolution requirement. Each facility shall ensure that an offender who alleges sexual abuse or sexual harassment may submit a complaint without submitting it to an employee who is the subject of the complaint and that such a complaint is not referred to an employee who is the subject of the complaint. WRC will conduct the investigation and make recommendation for decision within 20 working days. The reviewing authority will render a decision within 10 working days following receipt of recommendation. The inmate will receive a copy of the investigation report and reviewing authorities decision. The offender may use an alternate method of filing. WRC also provides a method for third-parties to report sexual abuse and sexual harassment on behalf of an offender. Information on how to report sexual abuse and sexual harassment on behalf on an offender is posted publicly. WRC may discipline an offender for a complaint filed alleging sexual abuse or sexual harassment only where WRC demonstrates that the complaint was filed in bad faith (a)(b)(c)(d)(e)(f).</p> <p>During the tour, all housing unit displayed PREA posters has multiple ways in in which an inmate can report an allegation of sexual abuse and sexual harassment. One way of reporting is through the Inmate Complaint Review System (ICRS). The inmate complaint review system provides a process by which inmates may raise grievances concerning rules, living conditions, and staff actions. Sexual abuse and sexual harassment complaints filed through the ICRS shall be immediately redirected and referred for investigation (a).</p> <p>In review of facility investigations during the last 12 months, there has not been an incident where inmates had filed a complaint through the ICRS. Review of PREA investigations and PREA tracking database show all complaints were reported to staff and not through ICRS. The PREA handbook and orientation handout provides inmates information on filing a grievance if they are a victim of sexual abuse and sexual harassment. It also provides information on notification of investigation decision, no time limits on filing a complaint and multiple ways of filing a complaint including third party (b)(d)(e)</p> <p>WRC Policy 3.5.01 Inmate Compliant Procedures has established procedures for filing an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse (f). The agencies policy has a procedure for discipline an offender for a complaint filed alleging sexual abuse or sexual harassment only where WRC demonstrates that the complaint was filed in bad faith(g). Also, the agency policy shall not require an inmate to use any</p>

informal grievance process or otherwise attempt to resolve with staff, of an alleged indecent of sexual abuse (b)(c).

During the last 12 months, WRC did not have a complaint filed through ICRS. Therefore, the auditor cannot confirm the agency's practice.

Based on the evidence, the facility is in compliance with this standard.

115.53	Inmate access to outside confidential support services
	<p data-bbox="248 168 928 203">Auditor Overall Determination: Exceeds Standard</p> <p data-bbox="248 248 523 284">Auditor Discussion</p> <p data-bbox="248 329 1469 701">WRC policy 3.2.13 Sexual Abuse, Sexual Harassment and Retaliation in Confinement (PREA) outlines that WRC shall provide offenders with access to outside victim advocates, with whom WRC shall maintain or attempt to enter into memoranda of understanding with, for emotional support services related to sexual abuse. Access includes giving offenders mailing addresses and telephone numbers, including toll-free hotline numbers where available (a). WRC shall enable reasonable communication between offenders and these organizations and agencies, in as confidential a manner as possible and, in advance, provide notification to offenders of the extent to which such conversations will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws (b).</p> <p data-bbox="248 757 1469 1003">During the tour, sexual abuse and sexual harassment posting in each housing unit and other areas in the facility provide inmates access to the PREA reporting hotline phone numbers 777 for making calls inside DOC locations and hotline phone number 888 for calls outside DOC. The hotline number does not require inmates to utilize their pin number which provides a way inmates can communicate in a confidential manner. This information is also available in the inmate handbook that inmates receive at intake and again during inmate orientation (a)(b).</p> <p data-bbox="248 1059 1469 1216">Interviews with staff and inmates indicate that inmates know how to report an incident of sexual abuse and sexual harassment. Staff in intake provide the red Sexual Abuse and Sexual Harassment Prevention and Intervention handbook. Inmates knew the reporting phone numbers 777 and 888 for making a sexual abuse or sexual harassment complaints (a)(b).</p> <p data-bbox="248 1272 1469 1776">WRC and DOC has an Memorandum of Understanding (MOU). The purpose of this MOU is for DHS-WRC to comply with Prison Rape Elimination Act (PREA). DOC is leading the PREA compliance efforts for the State of Wisconsin. The WRC is administered by DHS; however, WRC is legally designated as a prison and functions as a component of the Wisconsin prison system, which is administered by DOC. As a prison, WRC is required to comply with the PREA. WRC has adopted a policy of compliance with the PREA, which is documented in policy number 3.2.13 "Sexual Abuse, Sexual Harassment, and Retaliation in Confinement (PREA)." This policy is substantively equivalent to the DOC Executive Directive #72 "Sexual Abuse and Sexual Harassment in Confinement (PREA)." The PREA has requirements for system-level direction and coordination, and the spirit of this is best met by WRC coordinating with and using the system-level functions established by DOC as a framework for PREA compliance for the Wisconsin prison system (c).</p> <p data-bbox="248 1832 1469 2112">In an Interview with Victims Services Coordinator, WRC mental health and medical staff provide inmates with the highest level of care. The Sexual Abuse and Sexual Harassment Prevention and Intervention handbook provides inmates with the National Sexual Assault Hotline number 1(800) 656-HOPE (4673) operated by Rape Abuse Incest National Network (RAINN) that provides confidential emotional support services related to sexual abuse. Inmate victim may call the national hotline for support and referral to local resources. The auditor was able to call and verify the phone number c).</p>

During the tour, sexual abuse and sexual harassment posting for RAINN was available in every housing unit (c).

Based on the evidence, the facility is in compliance with this standard.

115.54	Third-party reporting
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>WRC policy 3.2.13 outlines that the facility shall provide a method for third-parties to report sexual abuse and sexual harassment on behalf of an offender. Information on how to report sexual abuse and sexual harassment on behalf on an offender shall be posted publicly. The Wisconsin Department of Corrections website contains information for third party reporting of sexual abuse and sexual harassment. Those agencies are National PREA Resource Center, Wisconsin Coalition Against Sexual Assault and Just Detention International.</p> <p>During the tour, there was information posted in areas throughout the facility in view of the public for reporting sexual abuse and sexual harassment (visiting room, front lobby) (a).</p> <p>During the random inmate interviews, inmates expressed knowing how to report a sexual abuse or sexual harassment allegation with someone other than the facility staff (a).</p> <p>Based on the evidence, the facility is in compliance with this standard.</p>

115.61	Staff and agency reporting duties
	<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 1465 1003">WRC policy 3.2.13 outlines how employees shall accept reports made verbally, in writing, anonymously, and from third parties; promptly document any verbal reports, reports shall be immediately reported to a supervisor who is not the subject of the allegation, unless reporting to such person compromises the safety of the alleged victim, witness or reporter (a). In those instances a report shall be made to the Office of Special Operations, the PREA Office, local law enforcement or submitted electronically via the DOC's internet site, all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, shall be reported, employees shall not reveal any information related to a sexual abuse or sexual harassment report to anyone other than to supervisors, investigators and designated officials (b)(e). Such information shall be limited to information necessary to make treatment, investigation and other security and management decisions and Medical and mental health practitioners shall be required to report sexual abuse and to inform offenders of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of service (c). Also, if the alleged victim is under the age of 18 or considered a vulnerable adult in accordance with State or local statute, WRC and DOC shall report the allegation to the designated State or local services agency under applicable mandatory reporting laws (d).</p> <p data-bbox="252 1055 1469 1301">During Interviews, staff knew how to report an allegation of sexual abuse or sexual harassment The agency would notify the local law enforcement agency in the county. Also, staff knew the agency's policy on reporting any and all allegations of sexual abuse and sexual harassment and the confidentiality of such allegations to their supervisor (a)(b). Mental health staff were aware of their duty to report sexual abuse and sexual harassment complaints that were reported to them by inmates and informed the inmate of their duty to report (a)(b)(c).</p> <p data-bbox="252 1352 1474 1473">The Sexual Abuse and Sexual harassment Prevention and Intervention handbook provided inmates information on reporting sexual abuse and sexual harassment complaints to staff and confidentiality of those reports (a)(b).</p> <p data-bbox="252 1525 1485 1688">The Sexual Abuse and Sexual harassment Prevention and Intervention handbook provided inmates explains the staff duty to report to the appropriate protection agency for anyone under the age of 18 (c). WRC does not house inmates under the age of 18. Therefore, the auditor could not confirm the agency's practice with this provision (d).</p> <p data-bbox="252 1740 1158 1774">Based on the evidence, the facility is in compliance with this standard.</p>

115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>WRC policy 3.2.13 outlines what steps staff are to take when they learn that an offender is subject to a substantial risk of imminent sexual abuse and how they will take immediate action to protect the offender (a).</p> <p>In the past 12 months, WRC has not had an inmate that was subject to a substantial risk of imminent sexual abuse (a).</p> <p>An interview with staff, staff would remove the inmate from the area for protection, identify the threat and abuser, move to a direct housing unit or institution. They may stay in the area where they feel safe. Thee treatment team would be involved in the process (a).</p> <p>Based on the evidence, the facility has demonstrated compliance with this standard.</p>

115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>WRC policy 3.2.13 outlines that within 72 hours of receiving an allegation that an offender was the victim of sexual abuse while confined at another facility, the information shall be reported by the head, or designee, of the facility to the head, or designee, of the facility where the alleged abuse occurred and all notifications shall be documented and the appointing authority that receives such notification shall ensure that the allegation is investigated (a)(b)(c)(d).</p> <p>In the past 12 months, WRC had one inmate allegations that the facility received while the inmate was confined at another facility. WRC gathered information, submitted an Incident Report, refer the allegation to the head of the facility of the alleged abuse within 72 hours and assist with investigation, as needed(a)(b)(c).</p> <p>During an interview, the facility confirmed that the PREA office or Warden of facility would be notified and an investigation would commence (d).</p> <p>Based on the evidence, the facility is in compliance with this standard.</p>

115.64	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>WRC policy 3.2.13 outlines that upon learning of an allegation that an offender was sexually abused, the first security staff member to respond to the report shall be required to, at a minimum separate the alleged victim and abuser, preserve and protect any crime scene until appropriate steps can be taken to collect any evidence, if the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking or eating; and if the abuse occurred within a time period that still allows for the collection of physical evidence, ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking or eating (a).</p> <p>If the first employee responder is not a security staff member, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff (b).</p> <p>PREA Investigation reports were reviewed and verified that security and non security staff responded according to policy in reporting allegations to supervisor and separating alleged victim from alleged suspect (a)(b). When an incident occurred within a time period that did not allow for the collection of physical evidence, staff preserved the available video evidence of the area for further review.</p> <p>During the last 12 months, there was no allegation in which security staff member was able to protect the crime scene or request the alleged victim to take actions not to destroy physical evidence the would confirm the agency’s practice with this provision(a).</p> <p>During interviews, first responders described the action they would take in an allegation of sexual abuse. Facility staff knew how to preserve the crime scene and evidence, advise the inmate not to eat, drink, shower, brush their teeth or use the bathroom (a).</p> <p>Non-security first responders knew how to notify supervisor, security personnel and PREA coordinator. Separate the alleged victim and alleged suspect, do not let them shower, do laundry, secure the room or location, remove other inmates from the area, write a report, secure the evidence, and keep the victim safe (b).</p> <p>Based on the evidence, the facility is in compliance with this standard.</p>

115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>WRC policy 3.1.24 and 3.2.13 outlines whenever a staff member becomes aware of a Signal event, he/she shall immediately implement the First Responder Philosophy according to training. This shall include notification of the Security Supervisor, HSU and the inmate/patient's designated unit Supervisor. The staff member initially on scene shall also ensure the start of documentation using the Chronological Log-Emergency form and the Checklist- Emergency form. Also, if the first employee responder is not a security staff member, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff and first responders shall immediately notify the appropriate medical and mental health practitioner (a).</p> <p>In an interview with the director, the facility has a written plan in WRC policy 3.1.24 and 3.2.13 to coordinate actions taken in response to an incident of sexual abuse, among staff first responders, medical and mental health practitioners, investigators and facility leadership (a).</p> <p>Based on the evidence, the facility is in compliance with this standard.</p>

115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>WRC policy 3.2.13 outlines that neither WRC nor any other governmental entity responsible for collective bargaining on WRC's behalf shall enter into or renew any collective bargaining agreement or other agreement that limits WRC's ability to remove alleged staff sexual abusers from contact with any offenders pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted.</p> <p>In an interview with the agency's head designee, WRC is not under a collective bargaining agreement.</p> <p>Based on the evidence, the facility is in compliance with this standard.</p>

115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>WRC policy 3.2.13. Sexual Abuse, Sexual Harassment and Retaliation in Confinement (PREA) outlines that WRC shall designate an employee 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, for at least 90 days following a report of sexual abuse, the designated facility-based employees shall monitor the conduct and treatment of the offenders or employees who reported the sexual abuse and the offenders who was reported to have experienced sexual abuse to determine if retaliation occurred (a)(c). For offenders, such monitoring shall include periodic status checks (d). Employees shall act promptly to remedy any such retaliation. Monitoring beyond 90 days shall continue if the initial monitoring indicates a continuing need. For offenders or employees who express fear of retaliation and shall take appropriate protective measures (e) and WRC's obligation to monitor shall terminate if WRC determines that the allegation is unfounded (f).</p> <p>During the last 12 months in review of facility PREA investigations, WRC had no reported incidents of retaliation that occurred in the past 12 months (a)(c)(d). The facility did employ protective measures by moving the alleged abuser to another housing unit away from the alleged victim feared retaliation (b)(e).</p> <p>WRC has designated four staff members to monitor retaliation (a). During interviews, staff that conduct monitoring would monitor an alleged victim for 90 days and sometimes longer depending on a status review with the inmate victim to ensure there are no conduct reports, program and housing reassignments. PREA compliance managers at each facility would be monitoring housing reassignments. WRC has a history of monitoring through the treatment teams which includes the victim services coordinator and outside victim advocate services (b)(c)(d).</p> <p>Based on the evidence, the facility is in compliance with this standard.</p>

115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>WRC policy 3.2.13 outlines that inmates at high risk for sexual victimization shall not be placed in involuntary confinement unless an assessment of all available alternatives has been made and shall be subject to the requirements as found within Placement (a).</p> <p>During the last 12 months WRC did not have an inmate who alleged to have suffered sexual abuse who were held in involuntary segregated housing awaiting completion of assessment that would confirm the agency's practice with this provision. A review of investigations revealed there was one allegation of sexual abuse during the last 12 months where the alleged victim was not held in involuntary segregation (a).</p> <p>Based on the evidence, the facility is in compliance with this standard.</p>

115.71	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>WRC policy 3.2.13 Safety and Emergency Procedures Sexual Abuse and Sexual Harassment in Confinement (PREA) states that WRC shall ensure that an investigation is completed for all allegations of sexual abuse and sexual harassment, including those received from third-parties and anonymous sources (a).</p> <p>The agency is not responsible for conducting criminal sexual abuse allegations. However, the agency does conduct administrative sexual abuse allegations. The Criminal sexual abuse allegations are referred to the local law enforcement for investigation. Both agencies have a good working relationship (a).</p> <p>Wisconsin Department of Corrections agency policy Executive Directive #72 requires 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 Odden warnings, sexual abuse evidence collection in confinement settings and the criteria and evidence required to substantiate a case for administrative action or prosecutorial referral (b).</p> <p>A review of training records confirmed that staff were trained to conduct PREA investigations consistent with provision (b).</p> <p>This was verified during interviews with staff that conduct sexual abuse and sexual harassment investigations. Investigative staff were interviewed and confirmed that they receive specialized training to conduct sexual abuse investigations. Staff was able to describe the training they received and the referral process for criminal investigations.</p> <p>The agency Department of Health Services (DHS) has a Memorandum of Understanding (MOU) with Wisconsin Department of Corrections (DOC) that states that DHS shall notify DOC if a PREA violation is alleged. If DOC has reason to believe that any PREA violation has occurred, it shall have immediate access to DHS records. A copy of this MOU was reviewed and was consistent with provision (c).</p> <p>A review of facility investigations during the audit period confirmed that investigators do gather and preserve direct and circumstantial evidence, including any available physical and DNA evidenced any available electronic monitoring data. The investigations include interviews with alleged victims, suspects and witnesses. Also, investigators look at prior complaints and reports involving suspects. The agency keeps a tracking database of all agency investigations conducted by year consistent with provision (c).</p> <p>Interview with investigative staff confirmed that staff knew the investigative process of reporting to supervisor, PREA coordinator any allegation of sexual abuse or sexual harassment, talk with medical and mental health staff local law enforcement notification and processing evidence. Staff explained on the staff they needed to know were notified (c).</p> <p>In reviewing the investigative reports, there was no investigation that supported criminal</p>

prosecution for the auditor to determine the facilities compliance with provision (d).

Wisconsin Department of Corrections agency policy Executive Directive #72 requires 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 Oddsden warnings, sexual abuse evidence collection in confinement settings and the criteria and evidence required to substantiate a case for administrative action or prosecutorial referral (e).

A review of agency investigations confirmed that alleged victims, suspects, and witnesses are interviewed and their statements are documented in the report by the investigator consistent with provision(e).

During an interview, investigative staff confirmed that they look at the evidence and the credibility of the alleged victim, suspect and witnesses on an individual basis. Also, the investigators do not require inmates to submit to a polygraph examination or any other truth telling device before proceeding with the investigation (e). An inmate that disclosed sexual abuse was interviewed consistent with the agency policy requirements (e).

Administrative investigations are documented in written reports that include the description of physical evidence, testimonial evidence and reasoning and investigative facts and findings. A census check is conducted to determine whether staff actions or failures attributed to the abuse Investigation reports were reviewed and there were no substantiated cases that were referred for prosecution to confirm the agency's compliance with provision (f)(g).

In review of the agency investigations there was no substantiated allegations of conduct that appeared to be criminal referred for prosecution the would confirm agency's compliance with provision (H).

A review of the investigative reports and tracking database from 2010 to 2017 confirms that the agency does maintain all written reports consistent with provision (i).

In review of agency investigations during the audit period, there was no instance that an alleged abuser was departed from employment where that provided basis for terminating an investigation (j). Investigative staff also confirmed that there was no termination in any investigation. Staff confirmed that they must continue with the investigation (j).

Based on the evidence, the facility has demonstrated compliance with the standard.

115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>WRC policy 3.213 outlines that the facility shall impose no standard higher than a preponderance of the evidence in determining whether the allegations of sexual abuse or sexual harassment are substantiated.</p> <p>A review of four facility investigations confirm that the agency uses no standard higher than the preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.</p> <p>WRC has 13 investigative staff. During an interview with investigative staff, it was revealed that the standard of evidence is the preponderance of the evidence is used when determining whether or not a allegation of sexual abuse or harassment is substantiated.</p> <p>Based on the evidence, the facility has demonstrated compliance with the standard.</p>

115.73	Reporting to inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>WRC policy 3.2.13 outlines that following an investigation of an allegation that an offender suffered sexual abuse in a state-owned facility, the facility shall inform the alleged victim, and document such notification, as to whether the allegation has been determined to be substantiated, unsubstantiated or unfounded (a).</p> <p>A review of facility investigations confirm that the inmate is notified of the investigation finding consistent with provision (a).</p> <p>In an interview with investigative staff, inmates receive closure letters when an investigation is complete. This closure letter is maintained in the investigative file which is consistent with provision (a).</p> <p>WRC policy 3.2.13 outlines that if WRC did not conduct the investigation, it shall request the relevant information from the investigative agency in order to inform the alleged victim (b). In review of facility investigations, the facility did receive the relevant information from the law enforcement agency to provide inmate with a closure letter consistent with provision (b). Interview with inmate that alleged sexual abuse confirmed they were provided a notification at the conclusion of the investigation (b).</p> <p>WRC policy 3.2.13 outlines that following an offender's allegation that an employee committed sexual abuse against an offender and the findings are substantiated or unsubstantiated, WRC shall inform the alleged victim, whenever the employee is no longer posted within the alleged victim's unit; no longer employed at the facility; or that the employee has been indicted or convicted on a charge related to the initial allegation of sexual abuse. This notification will be documented by electronic copy (c).</p> <p>There has been no instance where there has been a substantiated or unsubstantiated allegation against staff in the last 12 months consistent with provision (c).</p> <p>WRC policy 3.2.13 outlines that following an offender's allegation that he or she has been sexually abused by another offender, WRC shall subsequently inform the alleged victim, and document such notification, whenever the DOC learns that the alleged abuser has been indicted or convicted on a charge related to the initial allegation of sexual abuse (d). There has been no instance where the alleged abuser has been indicted on a charge related to sexual abuse within the facility consistent with provision (d).</p> <p>WRC policy 3.2.13 outlines that following an offender's allegation that he or she has been sexually abused by another offender, WRC shall subsequently inform the alleged victim, and document such notification, whenever the DOC learns that the alleged abuser has been indicted or convicted on a charge related to the initial allegation of sexual abuse (e). In review of facility investigations during the last 12 months, WRC has had three allegations of sexual abuse and inmates were notified of the findings at the conclusion of the investigation. Inmates receive a written notification of the investigators findings. There was no criminal convictions at WRC requiring such notification at an inmate in the last 12 months (e). Interview with staff indicate that notification is being completed at the conclusion of a sexual abuse investigation. During the last 12 months, there was seven inmate on inmate sexual</p>

harassment where five closed as unsubstantiated and two closed as unfounded. There were one inmate on inmate sexual abuse that closed as unsubstantiated. There were three staff on inmate harassment that closed as unsubstantiated. There were two staff on inmate sexual misconduct that closed as unfounded (e).

Based on the evidence, the facility has demonstrated compliance with the standard.

115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>WRC policy 3.2.13 states staff who are found to have violated the WRC sexual abuse, sexual harassment and retaliation policies shall be subject to disciplinary sanctions up to and including termination. Sanctions shall be commensurate with the nature and circumstances of the violation, the staff member's disciplinary history and the sanctions imposed for comparable offenses by other staff with similar histories. Termination is the presumptive sanction for a staff member who engaged in sexual abuse. All terminations for violations of the WRC sexual abuse and sexual harassment policies, including resignations that would have resulted in termination if not for the resignation, shall be reported to any relevant licensing bodies (a)(b)(c).</p> <p>A review of Investigations conducted during the audit period verified that there were no substantiated cases involving staff sexual abuse to confirm agency practice on staff disciplinary sanctions (b). The agency tracking database was reviewed and verified the finding of the investigations. There were no disciplinary sanctions for violation of the agencies policy relating to sexual abuse or sexual harassment by staff during the audit period to confirm the agencies practice (c). There were no termination for violation of the agency sexual abuse or sexual harassment policy during the audit period (d).</p> <p>Staff verified that during the last 12 months, WRC has not terminated or disciplined any employee for violating the sexual abuse and sexual harassment policies.</p> <p>Based on the evidence, the facility has demonstrated compliance with the standard.</p>

115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>WRC policy 3.2.13 outlines that any volunteer or contractor who engages in sexual abuse shall be prohibited from contact with offenders and shall be reported to relevant licensing bodies. Appropriate remedial measures shall be taken by WRC to ensure the safety of offenders in contact with volunteers and contractors (a).</p> <p>During the last 12 months investigations were reviewed that verified there had not been any instance of sexual abuse or sexual harassment by a contractor or volunteer (a). During the last 12 months, WRC has not had a volunteer or contractor that violated the agency's policy on sexual abuse and sexual harassment to take appropriate measures and consider whether to prohibit further contact with inmates that would confirm the agency's practice (b).</p> <p>During an interview with staff, WRC staff expressed the importance of taking action to keep inmates safe in accordance with policy. Staff confirmed that the agency had not had an instance where a contractor or volunteer violated the agency's sexual abuse or sexual harassment policy (b). The agency refers all investigations to local law enforcement and there was no instance where a contractor or volunteer had to be reported to law enforcement (a).</p> <p>Based on the evidence, the facility has demonstrated compliance with the standard.</p>

115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>WRC policy 3.2.13 outlines that offenders who have committed offender-on-offender sexual abuse are subject to disciplinary sanctions pursuant to a formal disciplinary process (a). Sanctions shall be commensurate with the nature and circumstances of the violation, the offenders disciplinary history and the sanctions imposed for comparable offenses by other offenders with similar histories (b). The disciplinary process shall consider whether a perpetrating offender’s mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed (c). An offender may only be disciplined for sexual contact with an employee upon a finding that the employee did not consent to such contact (e). Reports of sexual abuse or sexual harassment made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence to substantiate the allegation (f). While consensual sexual activity between offenders is prohibited at WRC, WRC may not deem consensual sexual activities as sexual abuse if it is determined that the activity is not coerced (g).</p> <p>The agency does not offer therapy, counseling, or other interventions designed to address and correct the underlying reasons or motivations for abuse to confirm the agency’s compliance with provision (d).</p> <p>Investigations reviewed during the audit period revealed WRC had one administrative findings of inmate-on-inmate sexual abuse that have occurred at the facility that was not substantiated. WRC did not have any administrative finding that resulted in criminal finding of guilt to confirm the agency’s practice with this provision (a).</p> <p>Interviews with staff confirm that disciplinary sanctions for inmates are governed by administrative code or rule. Sanctions are based on the severity of the incident and mitigating factors. Sanctions are proportionate to the nature of the circumstances of abuses committed and are fair, just and progressive. A psychologist is on all disciplinary panels.</p> <p>Based on the evidence, the facility has demonstrated compliance with the standard.</p>

115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>WRC policy 4.1.02 outlines that if either the initial or follow-up screening indicates an offender has previously experienced prior sexual victimization or has perpetrated sexual abuse, whether it occurred in an institutional setting or in a community setting, employees shall ensure the offender is offered a follow-up meeting with a mental health provider within 14 days of the initial or follow-up screening. Also, 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.</p> <p>WRC uses a Adult PREA screening tool (DOC-2781A for female) and (DOC-2780B for male) within 72 hours of arrival. The auditor reviewed 11 adult female and nine adult male screening reviews that was completed on the screening tool form by the facility within 72 hours of arrival. If prior victimization was reported during screening, medical and mental health services are offered at the facility (a). If prior perpetrated sexual abuse has occurred, mental health follow services are offered (b). WRC does not operate as a jail. Therefore, compliance with provision (c) is not applicable. WRC mental health staff conduct all PREA risk screening. Therefore, information related to sexual victimization or abusiveness is strictly limited to mental and mental health practitioners (d).</p> <p>During interview with staff it was confirmed that inmates are offered a follow-up screening with medical or mental health staff. However, it is not mandated that an inmate attend a follow up meeting. Staff stated that a fairly low percent accept the service. Staff explained that they try to be trauma informed and that choice is a big part of trauma informed care. Due to having a large psychological staff at WRC, the staff explained that follow-up by policy is within 14 days but they complete it within one week. Medical staff indicated that they do receive informed consent from inmates for incidents that occurred in the community before reporting sexual victimization that did not occur in the institutional setting. WRC does not have youthful offenders (e). WRC had one youthful inmate during the last 12 months. At the time of the audit, no youthful inmates were housed at WRC.</p> <p>Based on the evidence, the facility has demonstrated compliance with the standard.</p>

115.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>WRC policy 3.2.13 outlines how victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment. In the event that no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, security staff first responders shall take preliminary steps to protect the victim and shall immediately notify the appropriate medical and mental health employee (a)(b).</p> <p>All medical and mental health treatment services shall be provided to the victim without financial cost, regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident, and in a manner consistent with the community level of care. WRC's medical response shall include the timely dissemination of information and access to emergency contraception and sexually transmitted infections prophylaxis (c)(d).</p> <p>A review of facility investigations and PREA risk screens indicate WRC does provided medical and mental health care to alleged inmate victims of sexual abuse (a). Also, first responders do ensure that necessary steps are taken to protect victims of alleged sexual abuse (b).</p> <p>WRC has a large medical and mental health treatment team. Staff have indicated during an interview that inmate victims do have timely and unimpeded access to emergency medical treatment. As soon as an incident is reported, they ensure the inmate is taken to the hospital. Staff are aware of the facility policy and protocol to provide treatment including offering victims timely information about access to emergency contraception and sexually transmitted infection prophylaxis (c).</p> <p>Based on the evidence, the facility has demonstrated compliance with the standard.</p>

115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	<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 1477 701">WRC policy 3.2.13 outlines that WRC 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. Victims of sexual abuse shall be offered tests for sexually transmitted infections. Victims of sexually abusive vaginal penetration shall be offered pregnancy tests, in addition to timely and comprehensive information about and timely access to lawful pregnancy-related medical services (a)(b)(d)(e)(f).</p> <p data-bbox="252 757 1485 1003">All medical and mental health treatment services shall be provided to the victim without financial cost, regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident, and in a manner consistent with the community level of care. WRC shall attempt to conduct a mental health evaluation of all known offender-on-offender abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners (c)(g).</p> <p data-bbox="252 1059 1477 1261">A review of inmate on inmate and staff on inmate investigations verify that inmates are offered medical and mental health care services consistent with community level of care. Inmates are also offered victim advocate services by the victim care coordinator. A review of PREA risk screening indicates that mental health care staff conduct PREA intake assessments and make referrals immediately and provided follow up the same day (c)(h)(g)(h).</p> <p data-bbox="252 1317 1469 1821">During an interview, WRC staff indicated that inmates who have been victimized will receive follow up treatment until they are stable. Staff indicated they would contact the physician, encourage inmate not to shower, use the bathroom, eat, drink until they can be evaluated at the hospital. WRC does have female inmates and staff were sensitive to their needs and was aware of providing access to all lawful pregnancy-related services in a timely manner. However, staff indicated if a female inmate was pregnant upon admission screening, they are transferred back to the women's facility. The services officered by medical and mental health staff were consistent with community level of care. WRC has 637 staff of which 110 are security personnel from Oshkosh correctional facility. The current population of inmates at WRC is 373 and with the large number of mental health and medical staff at WRC, inmates had unimpeded access to services. At WRC, medical staff conducts evaluation of all known inmate on inmate abusers and offer treatment as appropriate (a)(b)(d)(e).</p> <p data-bbox="252 1877 1342 1910">Based on the evidence, the facility has demonstrated compliance with the standard.</p>

115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>WRC policy 3.2.13 outlines the facility process on conducting a review within 30 days of the conclusion of every sexual abuse investigation unless the allegation was determined to be unfounded and that the team shall consist of upper level management officials with input from supervisors, investigators and medical and mental health practitioners.</p> <p>In review of the PREA investigations during the last 12 months, WRC had one investigation of an alleged inmate on inmate sexual abuse on June 27, 2016 that was determined to be unfounded on August 16, 2017. The investigation was through and complete. The facility referred the investigation to the Oshkosh Police Department for investigation. WRC also referred the alleged victim to victims services coordinator and mental health. On August 16, 2016, an incident review was conducted by upper level management officials and investigator. Since the alleged incident occurred in the bathroom, video footage only could provide entry and exit from the bathroom. A review of documentation verified that WRC has 19 staff that are on the incident review team.</p> <p>During onsite interview, team members acknowledged how the incident reviews help them assess different areas of the facility to make recommendations for cameras and placing windows in doors. Team members also expressed how they considered the motivations behind why an incident happened in order to fully assess possible changes to prevent incidents from occurring in the future. During this incident it was determined that one inmate make joking comments to another inmates and that inmate was issued a misconduct as a result.</p> <p>Based on the evidence, the facility has demonstrated compliance with the standard.</p>

115.87	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>WRC policy 3.2.13 outlines the Memo of Agreement between WRC and DOC, WRC and the DOC shall collect accurate, uniform data from incident-based documents such as reports, investigation files and sexual abuse incident reviews for every allegation of sexual abuse within its facilities, using a standardized instrument and set of definitions. The extracted data, at minimum include the information to answer all questions from the most recent version of the Department of Justice Survey of Sexual Victimization. This data is aggregated annually and reported to the Department of Justice as requested and, with personal identifiers removed, posted publicly to the DOC's website annually. WRC does not contact for the confinement of its inmates.</p> <p>The agency prepares a statistical report of all facility sexual abuse investigations and it is published on the agency's website. A review of the agency's website (https://doc.wi.gov/Pages/AboutDOC/PrisonRapeEliminationAct.aspx) verifies that the agency does collect and aggregate incident based sexual abuse data collected from the facilities (a).</p> <p>The reports on the website verify the agency has been collecting statistical sexual abuse data from 2010 through 2017. The agency has annual compilation of findings for both inmate on inmate and staff on inmate abuse investigations. The facility investigation database also verifies that WRC is collecting data that will be submitted to the agency to be included in the agency annual report (b). The information data collected and reviewed can answer all the questions on the Department of Justice Survey. The agency provided a copy of the most recent SSV Survey of Sexual Victimization 2015 (c). The agency maintains all the original investigative files and the facility keeps a copy on-site (d). The agency does not contact for the confinement of its inmates. Therefore, there is no incident based and aggregated data to review for provision (e). The agency would provide the Department of Justice (DOJ) all data upon request (f).</p> <p>During an interview, the agency reported that they have a layered approach. The agency collect data from the facilities, aggregate that data, respond, compile years, identify problems areas and things that can be corrected and this information is reflected in their annual report. If requested, they would provide the DOJ with all data from their annual report. They agency that they do not place suspect and victim information in their annual reports. All personal identifying information is removed prior to placing on the website. The auditors randomly selected four investigative files for review and the facility sexual abuse tracking spreadsheet.</p> <p>Based on the evidence, the facility has demonstrated compliance with the standard.</p>

115.88	Data review for corrective action
	<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 1477 786">WRC policy 03.02.13 outlines that the data collected and aggregated is be analyzed to assess and improve effectiveness of WRC and the DOC’s sexual abuse prevention, detection and response policies, practices and training by identifying problem areas; taking corrective action on an ongoing basis; and preparing an annual report of its findings and corrective actions for each facility, to include WRC, as well as the DOC as a whole. The report shall, additionally, include a comparison of the current year’s data and corrective actions with those from previous years and shall provide an assessment of WRC’s and the DOC’s progress in addressing sexual abuse. Corrective action reports shall also be posted publicly to the DOC’s website. The DOC may redact specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility, but must indicate the nature of the material redacted.</p> <p data-bbox="252 842 1477 1133">In review of the agency website, it was verified that the agency prepares annual report of the findings from its data review and corrective action plan for each facility as well as for the agency. The agency’s prior year reports are also available on the website and detail collected data from 2010 to 2015. The annual reports does assess the agency progress in addressing sexual abuse. It was verified that the agency prepares annual report of the findings from its data review and corrective action plan for each facility as well as for the agency on the agency website.</p> <p data-bbox="252 1189 1477 1559">During an interview, the agency reported that they have a layered approach to date collections. The agency explained that they collect the data and aggregate that data, respond, compile years, identify problem areas and things that can be corrected and that is what is reflected in the annual report. The agency demonstrated a clear understanding on what is needed to extract the data in order to access and improve the effectiveness of its sexual abuse prevention, detection, and response policies and training. The agency also verified that suspect and victim information is not available in their reports. Therefore, there is nothing in the report to redact or keep confidential. The agency reported that the agency Deputy Secretary approves after review with the agency adminisrtator.</p> <p data-bbox="252 1615 1342 1648">Based on the evidence, the facility has demonstrated compliance with the standard.</p>

115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>WRC policy 3.2.13 outlines how all data shall be securely retained and maintained for at least 10 years after the date of initial collection (d). The agency's Annual PREA report from 2014 and 2015 are posted on the agency's website and are readily available to the public (b).</p> <p>During an interview with the Agency PREA Coordinator, it was verified that the agency does not put suspect or victim information in there annual reports. The agency removes all personal identifying information prior to placing it on the website (c). The data collected is kept confidential and is securely retained by the agency PREA Coordinator (a).</p> <p>Based on the evidence, the facility has demonstrated compliance with the standard.</p>

115.401	Frequency and scope of audits
	<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 1458 528">Wisconsin Resource Center policy 3.2.13 outlines how the facility shall conduct audits. The Wisconsin Resource Center had not been previously audited. The current audit was conducted on April 5th, 6th and 7th, 2017. In review of the agency's website, the auditor was able to verify that all 38 facility audits were published (a). Among the 38 facilities that were reviewed, 13 was audited In 2015 and 25 was audited in 2016 (b).</p> <p data-bbox="252 584 1477 741">On April 5 and 6, 2017, the auditors were given full access and a complete tour on the facility. Auditor's were permitted to request and receive copies of any relevant documents (including electronically stored information). The auditor requested and reviewed inmate files, logbooks, PREA rounding logs, PREA investigations, Investigation spreadsheets, and camera videos (h).</p> <p data-bbox="252 797 1461 871">The auditors was permitted access to a conference room inside the security deputy's suite to conduct private interviews with inmates and staff (m).</p> <p data-bbox="252 927 1469 1128">The audit notification was posted in English and Spanish throughout the facility which allowed auditor to receive correspondence confidentially from inmates. During the interviews, inmates verified that the audit notice was posted and they were able to get the auditors contact information. The auditor did receive written correspondence from one inmate on March 1, 2017 pre-audit and on April 10, 2017 post audit (n).</p> <p data-bbox="252 1184 1342 1218">Based on the evidence, the facility has demonstrated compliance with the standard.</p>

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The Wisconsin Department of Corrections has a website http://doc.wi.gov/About/DOC-Overview/Office-of-the-Secretary/Prison-Rape-Elimination-Act-Unit, which is publically available. Among the 38 facility final reports published on the agency's website, one was published In 2015, 29 was published in 2016 and eight was published in 2017. The auditor reviewed the agency website to verify that the final reports were published on the website under the community resource tab.</p> <p>PREA Audit Reports available for the following facilities on the agencies website.</p> <ol style="list-style-type: none"> 1. Black River Correctional Center 2. Gordon Correctional Center 3. Wisconsin Secure Program Facility 4. St. Croix Correctional Center 5. McNaughton Correctional Center 6. Sanger B. Powers Correctional Center 7. Felmers O. Chaney Correctional Center 8. Milwaukee Women's Correctional Center 9. Lincoln Hills School/Copper Lake School 10. Kettle Moraine Correctional Institution 11. Redgranite Correctional Institution 12. Drug Abuse Correctional Center 13. Flambeau Correctional Center 14. Kenosha Correctional Center 15. Oregon Correctional Center 16. John Burke Correctional Center 17. Marshall Sherrer Correctional Center 18. New Lisbon Correctional Institution 19. Taycheedah Correctional Institution 20. Jackson Correctional Institution 21. Oshkosh Correctional Institution 22. Green Bay Correctional Institution 23. Racine Correctional Institution 24. Sturtevant Transitional Facility 25. Thompson Correctional Center 26. Winnebago Correctional Center 27. Robert E Ellsworth Correctional Center 28. Oakhill Correctional Institution 29. Milwaukee Secure Detention Facility 30. Racine Youthful Offender Correctional Facility 31. Stanley Correctional Institution 32. Chippewa Valley Treatment Facility 33. Dodge Correctional Institution 34. Waupun Correctional Institution

35. Columbia Correctional Institution
36. Grow Academy
37. Fox Lake Correctional Institution
38. Prairie du Chien Correctional Institution

Based on the evidence, the facility has demonstrated compliance with the standard.

Appendix: Provision Findings

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

	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

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

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	
	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	
	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	
	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	
	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	
	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	
	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.)	yes
	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.)	yes

115.15 (c)	Limits to cross-gender viewing and searches	
	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?	yes

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

	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

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

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

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.)	yes

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.)	yes

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

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

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

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

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

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

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

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

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

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

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

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

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.	yes

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

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

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

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

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

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

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

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

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

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	
	In the case of inmates, does such monitoring also include periodic status checks?	yes

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

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

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).)	na
	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).)	na

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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	
	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	
	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

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

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

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

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

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

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

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

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

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

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	
	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	
	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

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

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

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

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

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

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

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

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

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	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes

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

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

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

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.)	na

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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